Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047 2024 **Open to Public**

Department of the Treasury

Inter	nal Revenue Service	e´	l Go	to www.irs.gov/For	<i>m</i> 990 fo	r instructions	and the latest	information.		Inspection
<u>A</u>	For the 2024 of		year, or tax year b	eginning		, and ending				
В	Check if applicable:	C Name o	of organization						D Employe	r identification number
	Address change		THE	E FRIENDS OF	THE	PALACE	THEATER		1	
	Name change		usiness as							352607
	-		r and street (or P.O. box if r	mail is not delivered to str	eet addres	ss)		Room/suite	E Telephon	e number 934-7010
-	Initial return Final return/		HAILI ST. town, state or province, cou	intry, and ZIP or foreign n	ostal code				000-	934-1010
	terminated		•			•			l	1 016 027
	Amended return	HIL(ond address of principal offi	HI 9	6/20				G Gross rec	eipts\$ 1,016,837
$\overline{\Box}$	Application pending		, ,					H(a) Is this a gr	oup return for s	subordinates Yes X No
	ripplication portaing	l	FREY DAVIS	•				H(b) Are all su	hardinataa inal	uded? Yes No
		l	HAILI ST.		TT 0	6720		1		See instructions
		HII			HI 9	96720			, allacii a iist.	See mandenons
<u> </u>	Tax-exempt status:		501(c)(3) 501(c)	() (insert no.)		4947(a)(1) or	527			
			ALACE . COM					H(c) Group ex		
00000	Form of organization			Association Other	•		L	Year of formation: 2	002	M State of legal domicile: HI
P		ummary								
			ne organization's mis	_						
)Ce	PROV	TIDE C	ULTURAL AND	EDUCATIONAL	EVE	NTS AND	RESTORE	A HISTOR	C BUII	DING.
Governance										
Æ										
9	2 Check th	is box	if the organization	discontinued its op	erations	s or disposed	of more than	25% of its net a	ssets.	
ૐ	3 Number	of voting	members of the gov	erning body (Part \	√I, line 1	1a)			3	10
es	4 Number	of indepe	endent voting membe	ers of the governing	body ((Part VI, line	1b)		4	10
Activities	5 Total nur	mber of ir	ndividua l s emp l oyed	in calendar year 20	024 (Pa	rt V, line 2a)			5	21
Ę			olunteers (estimate	: c						50
٩			usiness revenue fror		(C). line	 ∋ 12			··· 7a	0
			siness ta xable inco m						7b	0
	a riot anno		Du	hlic	, , ,	ICC	100	Prior Ye	ar	Current Year
ø	8 Contribut	tions and	l grants (Part VIII, lin	e 1h)			105	25	6,380	192,733
'n	1		revenue (Part VIII, l ir					79	0,925	822,526
Revenue	1		ne (Part VIII, column						3,624	358
Ř	1		art VIII, column (A),						1,712	1,220
	1		dd lines 8 through 1				12)		2,641	1,016,837
			ır amounts paid (Par			١			8,131	2,670
	1		r for members (Part							0
Š			mpensation, emp l oy			nn (A), l ines 5	- 10)	29	1,428	324,413
oenses	16aProfessio	onal fund	raising fees (Part IX	. column (A). line 1	1e)	(-7)	-/		2,600	00
per	b Total fun	draising	expenses (Part IX, c	column (D) line 25\	• • ,	18 -	745	_	,	J
X	17 Other ev	nenses (Part IX, column (A),	lines 11a-11d 11f	-24e)			71:	8,549	761,345
			Add lines 13–17 (mu			 \\ line 25\			0,708	1,088,428
									1,933	-71,591
54	is kevenue	e iess exp	oenses, Subtract line	: 10 ITOITI IINE 12	<u></u>	<u></u>		Beginning of Cu		End of Year
ets	20 Total ass	sets (Part	t X, l ine 16)						3,698	1,130,335
ASS	21 Total ligh	oilitiae (Pr							8,935	177,163
Net Assets or	22 Not 222		d balances. Subtract	lino 21 from lino 2					4,763	953,172
<u> </u>	_ ZZ Net asse	es or tuno	u palances. Subtract	lime 21 from line 2	<u> </u>			1,02	±, / 03	933,11Z

Signature Block

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

							08/01/2	25	
Sign	Signature of office	cer					Date		
Here	SUSAN	STARKEY	HENDRICKS	TREAS	URER				
	Type or print na	me and title							
	Preparer's name	9		Preparer's signature	Dat	е	Check if	PTIN	
Paid	GRETCHEN I	KREMEYER		GRETCHEN KREMEYER	08	/01/25	self-employed	P007685	28
Preparer	Firm's name	CARB	ONARO CPAS	& MANAGEMENT G	ROUP	Firm's	EIN 99	-0303	190
Use Only		1885	MAIN ST S	TE 408					
	Firm's address	WAIL	UKU, HI 9	96793		Phone	no. 808	3-242-	5002
May the IF	RS discuss thi	s return with the	preparer shown ab	ove? See instructions				X Yes	No

m 990 (2024) THE FRIENDS OF THE PALACE THEATER 99-0352607	Page 2
Part III Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III	
Briefly describe the organization's mission:	
PROVIDE CULTURAL AND EDUCATIONAL EVENTS AND RESTORE AN HISTO	RIC BUILDIN
•	
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.	
Did the organization cease conducting, or make significant changes in how it conducts, any program	
services?	Yes X No
If "Yes," describe these changes on Schedule O.	
Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other the total expenses, and revenue, if any, for each program service reported.	
(Code:)(Expenses\$ 881,639 including grants of\$ 2,670)(Revenue \$ PROVIDE CULTURAL EVENTS (FILMS, PLAYS, HULA PERFORMANCES, CONCPUBLIC.	823,746) CERTS) FOR '
OBIIC.	
•	• • • • • • • • • • • • • • • • • • • •
•	
•	
Public Diecloeura	
(Code:) (Expenses \$ including grants of \$) (Revenue \$	
N/A	
<u> </u>	

······	
(Code:) (Expenses \$ including grants of\$) (Revenue \$)
•••••••••••••••••••••••••••••••••••••••	
•	
•	
•	
•	
•	
Other program services (Describe on Schedule O.)	
)
(Expenses \$ including grants of\$) (Revenue \$ Total program service expenses 881,639	

domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II.

Form 990 (2024) THE FRIENDS OF THE PALACE THEATER 99-0352607 Page 3 **Checklist of Required Schedules** Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," X complete Schedule A 1 Is the organization required to complete Schedule B, Schedule of Contributors? See instructions X 2 2 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 X 3 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 X 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III 5 X 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 X 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 X 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes, X complete Schedule D, Part III 8 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 X Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? If "Yes," complete Schedule D, Part V X 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," X complete Schedule D, Part VI 11a 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 162 If "Yes " complete Schedule D. Part VII X 11b Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 11c X d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 11d X X Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f X **12a** Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete* X Schedule D, Parts XI and XII 12a 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 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 X 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV X 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or X for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other X assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on 17 Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions X 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 X Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 19 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or

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Form 990 (2024) THE FRIENDS OF THE PALACE THEATER 99-0352607

Part IV Checklist of Required Schedules (continued)

	are iv and or it of an out of original out		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the			1
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b	240		x
b	through 24d and complete Schedule K. If "No," go to line 25a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b		
C	Did the organization milest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year	240		
·	to defease any tax-exempt bonds?	24c		1
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			1
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these	07		v
28	persons? If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties? (See the Schedule	27		Х
20	L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director trustee, key employee, creator or founder, or substantial contributor? If			
a	"Yes," complete Schedule L, Part IV	28a		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
C	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			3,
	or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	35a		^
b	to the third the second of the FAO/IV/AOVO ##War and the Cabadala D. Dart V. Har O.	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	330		
30	related annualization 2 If "Voc " complete Schoolule D. Bort V. line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
• •	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and			
	19? Note: All Form 990 filers are required to complete Schedule O.	38	X	
P	art V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	· · · · · · · · · · · · · · · · · · ·		
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 39			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	10		

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Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance (cont	tinue	ed)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax					
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	21			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax re	eturns	s?	2b	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year? \dots			3a		<u> </u>
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Sched	lule O		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or oth	ner au	thority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other finan	cia l a	ccount)?	4a		<u> </u>
b	If "Yes," enter the name of the foreign country					
	See instructions for filling requirements for FinCEN Form 114, Report of Foreign Bank and Financia		counts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year			5a		<u>X</u>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter tran	sactio	on?	5b		X
С	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					3.7
	organization solicit any contributions that were not tax deductible as charitable contributions?			6a		<u> </u>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions and the deductible?	utions	s or	c.		
7	gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c).			6b		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly f	or an	ode			
а	and comices previded to the never	_		7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it					
·	required to file Form 8282?	· wao		7c		X
d		7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benef		tract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit co			7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organ	nizatio	on file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund mainta	ained	by the			
	sponsoring organization have excess business holdings at any time during the year?			8		
9	Sponsoring organizations maintaining donor advised funds.					
а	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:	1				
а		10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:	44-				
a	Gross income from members or shareholders Gross income from other sources. (Do not net amounts due or paid to other sources	11a				
b		11b				
12a	against amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of F.		0412	12a		
		12b	• • • • • • • • • • • • • • • • • • • •			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	In the control of the Property of the Second			13a		
	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	13b				
С	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		<u> </u>
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Sche			14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remu					7.5
	excess parachute payment(s) during the year?			15		<u> </u>
4.0	If "Yes," see instructions and file Form 4720, Schedule N.			40		v
16	Is the organization an educational institution subject to the section 4968 excise tax on net investm	ent in	icome'?	16		X
17	If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust, any disqualified or other person, engage in any a	activit	iee			
. /	that would result in the imposition of an excise tax under section 4951, 4952, or 4953?			17		
	If "Yes," complete Form 6069.					
	······································					

Part VI

Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI

Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 10			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, trustees, or key employees to a management company or other person?	3		_X_
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		_X_
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the follow	ing:		
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Reven	ue Co		
			Yes	
10a	Did the organization have local chapters, branches, or affiliates?	10a		_X_
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	••	
_	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		7,	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	32
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		<u>X</u>
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			37
4.0	describe on Schedule O how this was done	12c	v	<u>X</u>
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			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	45-	v	
a	The organization's CEO, Executive Director, or top management official	15a	X	X
b	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	15b		A
16a				
Ioa	with a tayable antity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	IVa		
D	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure	TOD		
17	List the states with which a copy of this Form 900 is required to be filed HT			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)			
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,			
	and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records.			
	otate the hand, address, and telephone number of the person who possesses the organization's books and records.			

HILO HI 96720

808-934-7010

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week	(do box offi	not o c, unle	Pos check ess pe	c) ition more rson lirecto	than o is both or/truste	one an ee)	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	from the organization and related organizations
(1) JEFFREY DAVIS	7.50									
PRESIDENT	0.00	Х		X				0	0	0
(2) WENDY PESKIN PAST PRESIDENT	7 50 0 : 00	Q		Ç	,	L		sclos	ure 。	0
(3) JEFFREY L. DAVI		X		^		H		0	0	<u> </u>
VICE PRESIDENT	0.50	x		x				0	0	0
(4) BETH BLOCK										
SECRETARY	2.50 0.00	X		X				0	0	0
(5) SUSAN STARKEY H		\$								
TREASURER	2.50 0.00	х		х				0	0	0
(6) GENEVIEVE AIONA										
DIRECTOR	0.50	x						0	0	0
(7) STEVE PEYTON										
DIRECTOR	0.50	x						o	o	0
(8) DANA BUTLER	0.00							•	•	<u> </u>
(3,23232 20222	0.50									
DIRECTOR	0.00	Х						0	0	0
(9) RUSSELL RUDERMA										
<u></u>	0.50									•
DIRECTOR DROCE	0.00	Х	_					0	0	0
(10)MARCIA PROSE	0.50									
DIRECTOR	0.00	x						0	0	0
(11) JASON GREEN										
	0.50									
DIRECTOR	0.00	X						0	0	0

Form 990 (2024) THE	FRIENDS	OF	THE	PALACE	THEATER	99-0352607
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Part VII Section A. Officer	s, Directors, Ti	ruste	es,	Key	Em	ploy	/ees	s, and Highest Compens	ated Employees (continu	ued)		<u> </u>
(A)	(B)			(C Posi check r	tion more			(D)	(E)		(F)	
Name and title	Average hours per week (list any	offi	icer a	ess per nd a di	recto	r/trust	ee)	Reportable compensation from the organization (W-2/	Reportable compensation from related organizations (W-2/	со	nated amou of other mpensation from the	
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensatec employee	Former	1099-MISC/ 1099-NEC)	1099-MISC/ 1099-NEC)	orga	anization an d organizati	
(12) PHILLIPS PAY (12) EXECUTIVE DIRECTOR	SON 40.00 0.00			х		d		62,875	0		5,	752
(13)												
(14)												
(15)												
(16)												
(17)												
(18)	Pul	7	li		<u> </u>	Г)	isclos	ure			
(19)	ı ak		•						GI O			
1b Subtotal								62,875			5,	752
c Total from continuation sh d Total (add lines 1b and 1c)								62,875			5,	752
2 Total number of individuals (reportable compensation from				to the	ose	liste	d ab	pove) who received more	than \$100,000 of			
· · · · · · · · · · · · · · · · · · ·	<u> </u>			tru o to	l	·0		loves or highest semnen	antad		Yes	s No
3 Did the organization list any employee on line 1a? If "Yes	," complete Sch	edu	le Ĵ i	for su	ıch .	indiv	ridua	al			3	X
4 For any individual listed on li organization and related organization												
individual5 Did any person listed on line	1a receive or a		 e co	 mper	 nsat	 ion f	rom	any unrelated organization	on or individual		4	X
for services rendered to the	organization? <i>If</i>										5	X
Section B. Independent Contract1 Complete this table for your total		npen	sate	d ind	lepe	nde	nt co	ontractors that received m	ore than \$100,000 of			
compensation from the organ	nization. Report (A) d business address	com	pen	satio	n fo	r the	cal T		within the organization's (B) tion of services	tax year.	(C) Compen	
Name and	d business address							Descrip	otiòn'of services		Compen	sation
2 Total number of independent received more than \$100,000								those listed above) who	0			

Pa	rt V	Statement of Revenue Check if Schedule O cor	itains	a respo	onse or no	ote to anv line ir	n this Part VIII		
				<u> </u>		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts nts	1a	Federated campaigns	1a						
Gra	b	Membership dues	1b						
ts, An	С	Fundraising events	1c						
<u>iai</u>	d	Related organizations	1d						
ns, Sim	е	Government grants (contributions)	1e		30,992				
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, gifts, grants, and similar amounts not included above	1f		161,741				
E O	y	Noncash contributions included in lines 1a-1f	1g	\$					
So	h	Total. Add lines 1a–1f				192,733			
					Business Code				
e	2a	ADMISSIONS			711110	699,041	699,041		
ezi ezi	b	CONCESSIONS			711110	123,485	123,485		
Program Service Revenue	С								
Rev	d								
Ž.	е								
_	f	All other program service revenue							
		Total. Add lines 2a–2f				822,526		T	
	3	Investment income (including divider	nds, in	terest, an	d				
		other similar amounts)				358			358
	4	Income from investment of tax-exem							
	5	Royalties							
		(i) Real		(ii) F	Personal				
	6a		_	-					
	b	Less: rental expenses 6b	H	111) 		78117		
		Rental inc. or (loss) 6c	H	\mathcal{H}					
		Gross amount from	<u></u>		Other				
		sales of assets (i) Securities	•	(11)	Other				
<u>o</u>	h	other than inventory							
ther Revenue	b	basis and sales exps. 7b							
ev	_	Gain or (loss) 7c							
ř		Net gain or (loss)							
the		Gross income from fundraising events		T					
٥	- Ou	/not including t							
		of contributions reported on line							
		1c). See Part IV, line 18	8a						
	b	Less: direct expenses	8b						
		Net income or (loss) from fundraising	even	ıts					
		Gross income from gaming							
		activities. See Part IV, line 19	9a						
	b	Less: direct expenses	9b						
		Net income or (loss) from gaming ac	tivities						
		Gross sales of inventory, less							
		returns and allowances	10a						
	b	Less: cost of goods sold	10b						
		Net income or (loss) from sales of in	ventor	y					
sn					Business Code				
Miscellaneous Revenue	11a	OTHER INCOME			711110	1,220	1,220		
llar	b	• • • • • • • • • • • • • • • • • • • •							
Sce Zev	С	• • • • • • • • • • • • • • • • • • • •							
Ĕ		All other revenue							
		Total. Add lines 11a–11d				1,220	000	-	
	12	Total revenue. See instructions				1,016,837	823,746	0	358

Part IX Statement of Functional Expenses

	int IX Statement of Functional Ex	-	other ergenizations make	t complete column (A)	
Sect	ion 501(c)(3) and 501(c)(4) organizations must Check if Schedule O contains a resp			t complete column (A).	X
	ot include amounts reported on lines 6b, 7b, and 10b of Part VIII.		(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations		·	j i	•
	and domestic governments. See Part IV, line 21	2,670	2,670		
2	Grants and other assistance to domestic	·			
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	68,627	54,902	10,294	3,431
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	220,778	176,622	33,117	11,039
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	11,498	9,198	1,725	575
10	Payroll taxes	23,510	18,807	3,527	1,176
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
С	Accounting	40,565	20,282	20,283	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	$\mathcal{M}\cup \mathcal{M}$	<u> </u>	ulc	
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A), amount, list line 11g expenses on Schedule O.)	392,828	309,942	82,886	
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties	55 500	45 500	F 000	
16	Occupancy	55,599	47,799	7,800	
17	Travel				
18		5			
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates	60 205	40.060	10 465	
22	Depreciation, depletion, and amortization	62,325	49,860	12,465	
23	Insurance	5,272	4,218	1,054	
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
_	(A), amount, list line 24e expenses on Schedule O.) PROGRAM COSTS	113,936	113,936		
a	SUPPLIES	32,692	29,423	3,269	
b	······	28,979	23,183	5,796	
c C	BANK FEES THEATER EQUIPMENT	14,418	9,842	2,883	1,693
d	All other evenence	14,418	10,955	2,945	831
	All other expenses Total functional expenses. Add lines 1 through 24e	1,088,428	881,639	188,044	18,745
<u>25</u> 26	Joint costs. Complete this line only if the	1,000,420	301,039	100,044	10,745
_0	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)				
DAA	10110WITIN SOF 30-2 (MSC 300-120)				Form QQN (2024)

	art i	Check if Schedule O contains a response or not	e to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			154,697	1	43,556
	2	Savings and temporary cash investments			48,633	2	34,939
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net				4	1,174
	5	Loans and other receivables from any current or former	er office	er, director,			
		trustee, key employee, creator or founder, substantial	contrib	utor, or 35%			
		controlled entity or family member of any of these pers	sons			5	
	6	Loans and other receivables from other disqualified pe					
ţ		under section 4958(f)(1)), and persons described in se	ection 4	958(c)(3)(B)		6	
Assets	7					7	
ä	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			1,392	9	4,195
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	1,520,559			
	b	Less: accumulated depreciation	10b	747,150	835,734	10c	773,409
	11	Investments—publicly traded securities		.		11	
	12	Investments—other securities. See Part IV, line 11				12	
	13	Investments—program-related. See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			123,242	15	273,062
	16	Total assets. Add lines 1 through 15 (must equal line	33)		1,163,698	16	1,130,335
	17	Accounts payable and accrued expenses			122,057	17	119,413
	18	Grants payable				18	
	19		16,878	19	34,059		
	20	Tax-exempt bond liabilities	, .	Jiaala	OLIKO	20	
	21	Deferred revenue Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV	of Sch	edule D		21	
es	22	Loans and other payables to any current or former offi	cer, dir	ector,			
Liabilities		trustee, key employee, creator or founder, substantial					
jab		controlled entity or family member of any of these pers	sons			22	
_	23	Secured mortgages and notes payable to unrelated th	ird part	ies		23	
	24	Unsecured notes and loans payable to unrelated third				24	
	25	Other liabilities (including federal income tax, payables					
		parties, and other liabilities not included on lines 17-24	1). Com	plete Part X			
		of Schedule D			100 000	25	23,691
	26	Total liabilities. Add lines 17 through 25			138,935	26	177,163
S		Organizations that follow FASB ASC 958, check he	ere X				
ü		and complete lines 27, 28, 32, and 33.					
<u>a</u>	27				1,013,706		930,238
8	28				11,057	28	22,934
Ē		Organizations that do not follow FASB ASC 958, c	heck h	eı			
Net Assets or Fund Balances		and complete lines 29 through 33.			_		
ts c	29	Capital stock or trust principal, or current funds				29	
Se	30	Paid-in or capital surplus, or land, building, or equipme				30	
Ą	31	Retained earnings, endowment, accumulated income,			1 004 755	31	0=0 1=0
Net	32	Total net assets or fund balances			1,024,763		953,172
_	33	Total liabilities and net assets/fund balances			1,163,698	33	1,130,335

Form **990** (2024)

Pa	art XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1	, 01		<u>837</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	1			<u> 428</u>
3	Revenue less expenses. Subtract line 2 from line 1	3		-7	11,5	<u>591</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1	, 02	24,	763
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	10		95	3,1	172
Pa	art XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
			_		Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on					
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		L	2a	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or					
	reviewed on a separate basis, consolidated basis, or both.					
	X Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		L	2b		_X_
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a					
	separate basis, consolidated basis, or both.					
	Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of					
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		L	2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on					
	Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		L	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the					
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		

Form **990** (2024)

SCHEDULE A (Form 990)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

2021

Open to Public Inspection

Name of the organization

Employer identification number

THE FRIENDS OF THE PALACE THEATER 99-0352607 Part I **Reason for Public Charity Status.** (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public X 7 described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college 9 or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (iv) Is the organization (v) Amount of monetary (vi) Amount of listed in your governing organization (described on lines 1-10 other support (see support (see above (see instructions)) document? instructions) instructions) Yes No (A) (B) (C) (D) (E)

Total

THE FRIENDS OF THE PALACE THEATER 99-0352607

Schedule A (Form 990) 2024

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

Sec	tion A. Public Support	•	•		•	•	
Cale	ndar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	654,776	480,093	240,966	256,380	192,733	1,824,948
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	654,776	480,093	240,966	256,380	192,733	1,824,948
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						323,321
6	Public support. Subtract line 5 from line 4						1,501,627
	tion B. Total Support	(-) 2000	(I-) 2004	(-) 0000	(4) 2002	(-) 2004	(0 T. (-)
	ndar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
7 8	Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	654,776	480,093 69	240,966 56		192,733 358	
9	Net income from unrelated business activities, whether or not the business is regularly carried on	blic	Dis	clos	sure		
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						1,829,076
12	Gross receipts from related activities, etc	c. (see instructions	s)			12	2,432,124
13	First 5 years. If the Form 990 is for the						
	organization, check this box and stop he	_					
Sec	tion C. Computation of Public S	Support Perce	entage				
14	Public support percentage for 2024 (line	6, column (f), divi	ded by line 11, co	lumn (f))		14	82.10%
15	Public support percentage from 2023 Sc	hedule A, Part II, I	line 14			15	83.16%
16a	33 1/3% support test — 2024. If the org	ganization did not	check the box on	line 13, and line 1	14 is 33 1/3% or m	nore, check this	
	box and stop here. The organization qu						X
b	33 1/3% support test — 2023. If the org	ganization did not	check a box on l ir	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check	
	this box and stop here. The organization	n qua l ifies as a pu	blicly supported o	organization			
17a	10%-facts-and-circumstances test —						
	10% or more, and if the organization me				-	•	
	Part VI how the organization meets the forganization						
b	10%-facts-and-circumstances test —	2023. If the organ	ization did not che	eck a box on line	13, 16a, 16b, or 1	7a, and l ine	
	15 is 10% or more, and if the organization				-		
	in Part VI how the organization meets th	e facts-and-circum	nstances test. The	e organization qua	ilifies as a publicly	supported	
	organization						L
18	Private foundation. If the organization of						
	instructions						

Page 2

THE FRIENDS OF THE PALACE THEATER 99-0352607

Schedule A (Form 990) 2024

Part III **Support Schedule for Organizations Described in Section 509(a)(2)**

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.) If the organization fails to qualify under the tests listed below, please complete Part II.)

	tion A. Public Support			, ,	•	,	
Cale	ndar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's fax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С 8	Add lines 7a and 7b Public support. (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
9	Amounts from line 6	\mathbf{O}		CIOS	siire	, ,	. ,
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the o	 organization's firs	t, second, third. fo	ourth, or fifth tax v	ear as a section 5	 i01(c)(3)	
	organization, check this box and stop he	•		•			
Sec	tion C. Computation of Public S	Support Perc	entage				
15	Public support percentage for 2024 (line	8, column (f), div	rided by line 13, co	olumn (f))		15	%_
16	Public support percentage from 2023 Sc	hedule A, Part III	, l ine 15				%
Sec	tion D. Computation of Investm						
17	Investment income percentage for 2024	(line 10c, column	ı (f), divided by l in	e 13, column (f))		17	%
18	Investment income percentage from 2023					40	%
19a	33 1/3% support tests — 2024. If the or	ganization did no	ot check the box o	n line 14, and line	e 15 is more than	33 1/3%, and l ine	_
	17 is not more than 33 1/3%, check this l	box and stop he r	re. The organizati	on qua l ifies as a _l	publicly supported	organization	L
b	33 1/3% support tests — 2023. If the or	-					
	line 18 is not more than 33 1/3%, check to	=	-	· ·		-	
20	Private foundation. If the organization of	ud not check a bo	ox on line 14 19a	or 19b check th	is nox and see ins	tructions	

Page 3

Schedule A (Form 990) 2024

Part IV **Supporting Organizations**

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

Section A. All Supporting Organizations

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

		Yes	No
	1		
	2		
	3a		
	3b		
	3с		
	4a		
	4b		
	4c		
	5a		
-	5b		
	5c		
	6		
	7		
	8		
	9a		
	9b		
	9c		
	10a		
	10b		
ched	ule A	(Form 9	90) 2024

	tle A (Form 990) 2024 THE FRIENDS OF THE PALACE THEATER 99-035260	17		Page 5
Par	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and	44.		
L	11c below, the governing body of a supported organization?	11a		
	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI .	11c		
Secti	ion B. Type I Supporting Organizations	110		
	ion 21 Typo I supporting stiganizations	$\overline{}$	Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or		100	110
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported	,		
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sect	ion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
<u>C 1</u>	the supported organization(s).	1		
Sect	ion D. All Type III Supporting Organizations	— т	· · ·	
4	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		Yes	No
1				
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	•		
-	organization(s), or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI</i>			
	how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have	_		
·	a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sect	ion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct	ions).		
a	The organization satisfied the Activities Test. Complete line 2 below.			
b C	The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	instruc	tions)	
·]	Yes	No
2	Activities Test. Answer lines 2a and 2b below.			
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to each of its supported organizations, and how the organization determined	2a		
	that these activities constituted substantially all of its activities.			
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's			
	involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would			
	have engaged in these activities but for the organization's involvement.	2b		
3				
a	Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i> Did the organization have the power to regularly experience a clear a majority of the officers, directors, or			
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No," provide details in Part VI.</i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

THE FRIENDS OF THE PALACE THEATER 99-0352607 Schedule A (Form 990) 2024 Page 6 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) 1 Net short-term capital gain 2 Recoveries of prior-year distributions 2 Other gross income (see instructions) 3 4 Add lines 1 through 3. 4 5 Depreciation and depletion 5 6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of 6 property held for production of income (see instructions) 7 7 Other expenses (see instructions) Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 (B) Current Year Section B - Minimum Asset Amount (A) Prior Year (optional) 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities 1a **b** Average monthly cash balances 1b 1<u>c</u> **c** Fair market value of other non-exempt-use assets d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI): Acquisition indebtedness applicable to non-exempt-use assets 3 Subtract line 2 from line 1d. 4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, Net value of non-exempt-use asset 6 Multiply line 5 by 0.035. Recoveries of prior-year distributions 8 Minimum Asset Amount (add line 7 to line 6) 8 Section C - Distributable Amount **Current Year** 1 Adjusted net income for prior year (from Section A, line 8, column A) 1 2 Enter 0.85 of line 1. Minimum asset amount for prior year (from Section B, line 8, column A) 3 3

	emergency temporary reduction (see instructions).	6			
,	Check here if the current year is the organization's first as a non-functionally integrat	ed Ty	pe III supporting orga	anizati	ion
	(see instructions).				

4

5

Schedule A (Form 990) 2024

Enter greater of line 2 or line 3.

5 Income tax imposed in prior year

Distributable Amount. Subtract line 5 from line 4, unless subject to

THE FRIENDS OF THE PALACE THEATER 99-0352607 Schedule A (Form 990) 2024 Page 7 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** 1 Amounts paid to supported organizations to accomplish exempt purposes 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations 3 3 Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required—provide details in Part VI) 5 5 Other distributions (describe in Part VI). See instructions. 6 Total annual distributions. Add lines 1 through 6. 7 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. 8 Distributable amount for 2024 from Section C, line 6 9 Line 8 amount divided by line 9 amount 10 (i) (ii) (iii) **Excess Distributions** Underdistributions Section E - Distribution Allocations (see instructions) Distributable Pre-2024 Amount for 2024 Distributable amount for 2024 from Section C, line 6 Underdistributions, if any, for years prior to 2024 2 (reasonable cause required-explain in Part VI). See instructions. 3 Excess distributions carryover, if any, to 2024 **a** From 2019 **b** From 2020 **c** From 2021 **d** From 2022 **e** From 2023 f Total of lines 3a through 3e g Applied to underdistributions of prior year h Applied to 2024 distributable amount i Carryover from 2019 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. Distributions for 2024 from Section D, line 7: a Applied to underdistributions of prior years **b** Applied to 2024 distributable amount c Remainder. Subtract lines 4a and 4b from line 4. 5 Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. 6 Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. Excess distributions carryover to 2025. Add lines 3j and 4c. Breakdown of line 7:

Schedule A (Form 990) 2024

a Excess from 2020 ...

c Excess from 2022d Excess from 2023e Excess from 2024

b Excess from 2021

Schedule A (Fo	orm 990) 2024	THE	FRIENDS	OF THE	PALACE	THEATER	99-	0352607	Page 8
Part VI	Supplemental III, line 12; Part B, lines 1 and 2	IV, Section P; Part IV, S	n A, lines 1, 2 Section C, lin	2, 3b, 3c, 4 e 1; Part I\	b, 4c, 5a, 6, /, Section D,	9a, 9b, 9c, 11 lines 2 and 3	la, 11b ; Part l	Part II, line 17a o , and 11c; Part I\ V, Section E, line and 8; and Part \	/, Section es 1c, 2a, 2b
								(See instructions	
					• • • • • • • • • • • • • • • • • • • •				
			hlia						
					SUIC	Sui	\mathbf{E}		

SCHEDULE D (Form 990)

(Rev. December 2024)
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.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Employer identification number THE FRIENDS OF THE PALACE THEATER 99-0352607 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds Total number at end of year _____ Aggregate value of contributions to (during year) 2 Aggregate value of grants from (during year) 3 Aggregate value at end of year _____ 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? 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 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 land for public use (for example, recreation or education Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 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. Held at the End of the Tax Year a Total number of conservation easements 2a b Total acreage restricted by conservation easements
c Number of conservation easements on a certified historic structure included on line 2a 2b 2c d Number of conservation easements included on the 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register 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 conversation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B) Yes (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. 1a If the organization elected, as permitted under FASB 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 in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB 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 VIII, line 1 (ii) Assets included in Form 990, Part X \$ If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items. a Revenue included on Form 990, Part VIII, line 1

Schedule D (Form 990) (Rev. 12-2024) THE FRIENDS OF THE PALACE THEATER 99-0352607 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply). Loan or exchange program а Public exhibition b Scholarly research Other Preservation for future generations С Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 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 maintained as part of the organization's collection?... Yes No Part IV **Escrow 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. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No **b** If "Yes," explain the arrangement in Part XIII and complete the following table. **Amount** c Beginning balance 1c d Additions during the year 1d e Distributions during the year 1e Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? No Yes b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. Part V **Endowment Funds** Complete if the organization answered "Yes" on Form 990, Part IV, line 10. (b) Prior year (a) Current year (c) Two years back (d) Three years back (e) Four years back 1a Beginning of year balance **b** Contributions 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 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 % c Term 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 Yes No organization by: (i) Unrelated organizations? (ii) Related organizations? 3a(ii) **b** If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 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)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		673,880	249,552	424,328
c Leasehold improvements		337,404	74,544	262,860
d Equipment		509,275	423,054	86,221
e Other				772 400

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))

Schedule D (Form 990) (Rev. 12-2024)

Schedule D (Form 990) (Rev. 12-2024) HE FRIENDS OF THE PALACE THEATER 99-0352607

Part VII	Investments – Other Securities	on Form 000 Dort IV	/ line 44h Con Farm 000	Dowl V line 40
	Complete if the organization answered "Yes"			
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of va	
(4) =:	1 1 1		Cost of end-of-year in	nainet value
(1) Financial				
	eld equity interests			
(3) Other				
(A)				
(Ċ)				
(D)				
(E) (F)				
(G)				
(H)				
	nn (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII	Investments – Program Related			
r are viii	Complete if the organization answered "Yes"	on Form 990 Part I\	/ line 11c See Form 990) Part X line 13
	(a) Description of investment	(b) Book value	(c) Method of va	
			Cost or end-of-year n	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	Dublia D	Via	A	
	nn (b) must equal Form 990, Part X, line 13, col. (B))	<u> </u>		
Part IX	Other Assets	10010	9 911 9	
	Complete if the organization answered "Yes"	on Form 990, Part I\	/, line 11d. See Form 990), Part X, line 15
	(a) Description	,		(b) Book value
(1)	CONSRTUCTION IN PROGRI	ESS		243,24
(2)	OPERATING LEASE RIGHT	OF USE ASSET	'S	29,82
(3)				•
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Colun	nn (b) must equal Form 990, Part X, line 15, col. (B))			273,06
Part X	Other Liabilities			
	Complete if the organization answered "Yes"	on Form 990, Part I\	/, line 11e or 11f. See Fo	rm 990, Part X,
	line 25.			
1.	(a) Description of liability	,		(b) Book value
	income taxes			
(2) LEAS	E LIABILITY			23,69
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Colun	nn (b) must equal Form 990, Part X, line 25, col. (B))			23,69
2. Liability for	r uncertain tax positions. In Part XIII, provide the text of the	footnote to the organization	on's financial statements that re	eports the

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII.

D.	at VI Decemblishing of Devenue new Audited Financial Ct			Datus	
Pa	Reconciliation of Revenue per Audited Financial St			Retu	rn
	Complete if the organization answered "Yes" on Form				1 050 011
1	Total revenue, gains, and other support per audited financial statements			1	1,050,811
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1			
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b	33,974		
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	33,974
3	Subtract line 2e from line 1			3	1,016,837
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b					
С	Add lines 4a and 4b			4c	
5				5	1 016 027
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			•	1,016,837
-	art XII Reconciliation of Expenses per Audited Financial S			•	
-		Statements W	ith Expenses p	•	
-	Reconciliation of Expenses per Audited Financial S Complete if the organization answered "Yes" on Form	Statements W	ith Expenses p ne 12a.	•	
Pa	Reconciliation of Expenses per Audited Financial S Complete if the organization answered "Yes" on Form	Statements W 990, Part IV, li	ith Expenses p ne 12a.	•	turn
Pa	Art XII Reconciliation of Expenses per Audited Financial S Complete if the organization answered "Yes" on Form Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	Statements W 990, Part IV, li	ith Expenses p ne 12a.	•	turn
Pa	Art XII Reconciliation of Expenses per Audited Financial S Complete if the organization answered "Yes" on Form Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	Statements W 990, Part IV, li	ith Expenses p ne 12a.	•	turn
Pa	Reconciliation of Expenses per Audited Financial S Complete if the organization answered "Yes" on Form Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments	990, Part IV, li	ith Expenses p ne 12a.	•	turn
1 2 a b	Reconciliation of Expenses per Audited Financial S Complete if the organization answered "Yes" on Form Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses	2a 2b 2c	ith Expenses p ne 12a.	•	turn
Pa 1 2 a b	Complete if the organization answered "Yes" on Form Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	Statements W 990, Part IV, Ii 2a 2b 2c 2d	ith Expenses pine 12a. 33,974	•	turn
Pa 1 2 a b c	Complete if the organization answered "Yes" on Form Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	Statements W 990, Part IV, Ii 2a 2b 2c 2d	ith Expenses pine 12a. 33,974	er Re	turn 1,122,402
Pa 1 2 a b c d	Complete if the organization answered "Yes" on Form Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	Statements W 990, Part IV, Ii 2a 2b 2c 2d	ith Expenses pine 12a. 33,974	er Re	turn 1,122,402 33,974
Pa 1 2 a b c d	Reconciliation of Expenses per Audited Financial S Complete if the organization answered "Yes" on Form Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1	Statements W 990, Part IV, Ii 2a 2b 2c 2d	ith Expenses pine 12a. 33,974	er Re	turn 1,122,402 33,974
1 2 a b c d e 3 4	Complete if the organization answered "Yes" on Form Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	Statements W 990, Part IV, Ii 2a 2b 2c 2d	ith Expenses pine 12a. 33,974	er Re	turn 1,122,402 33,974
1 2 a b c d e 3 4 a	Complete if the organization answered "Yes" on Form Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2a 2b 2c 2d 4a 4b	ith Expenses pine 12a. 33,974	er Re	turn 1,122,402 33,974

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

PART X - FIN 48 FOOTNOTE

Part XIII Supplemental Information

THE FRIENDS OF THE PALACE THEATER, INC. IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501 (C) (3) OF THE INTERNAL REVENUE CODE, AND THEREFORE HAS MADE NO PROVISION FOR FEDERAL INCOME TAXES IN THE ACCOMPANYING FINANCIAL STATEMENTS.

THE ACCOUNTING STANDARD FOR UNCERTAINTY IN INCOME TAXES ADDRESSES THE DETERMINATION OF WHETHER TAX BENEFITS CLAIMED OR EXPECTED TO BE CLAIMED ON A TAX RETURN SHOULD BE RECORDED IN THE FINANCIAL STATEMENTS. UNDER THAT GUIDANCE, THE ORGANIZATION MAY RECOGNIZE THE TAX BENEFIT FROM AN UNCERTAIN TAX POSITION ONLY IF IT IS MORE LIKELY THAN NOT THAT THE TAX POSITION WILL BE SUSTAINED ON EXAMINATION BY TAXING AUTHORITIES, BASED ON THE TECHNICAL MERITS OF THE POSITION. EXAMPLES OF TAX POSITIONS INCLUDE THE TAX-EXEMPT STATUS OF THE ORGANIZATION AND VARIOUS POSITIONS RELATED TO THE POTENTIAL SOURCES OF UNRELATED BUSINESS TAXABLE INCOME (UBIT). THE TAX BENEFITS RECOGNIZED IN THE FINANCIAL STATEMENTS FROM SUCH A POSITION ARE MEASURED BASED ON THE LARGEST BENEFIT THAT HAS A GREATER THAN 50% LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT. THERE WERE NO UNRECOGNIZED TAX BENEFITS IDENTIFIED OR RECORDED AS LIABILITIES FOR THE YEAR ENDED DECEMBER 31, 2024. THE ORGANIZATION FILES ITS FORM 990 IN THE U.S. FEDERAL JURISDICTION AND IS GENERALLY NO LONGER SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE FOR YEARS BEFORE 2021.

Schedu l e D (F	orm 990) (Rev. 1	12-202 4)HE	FRIENDS	OF TH	E PALACE	THEATER	99-0352607	Page 5
Part XIII	Supplemen	tal Informa	ation (contin	ued)			99-0352607	
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SCHEDULE O (Form 990)

(Rev. December 2024)

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 Form 990-EZ.

OMB No. 1545-0047

Open to Public Inspection

Go to www.irs.gov/Form990 for instructions and the latest information. Name of the organization Employer identification number 99-0352607 THE FRIENDS OF THE PALACE THEATER PART VI, LINE 11B - ORGANIZATION'S **PROCESS** TO REVIEW FORM 990 THE 990 IS EMAILED TO ALL BOARD MEMBERS AND THEN DISCUSSED AND THE NEXT BOARD MEETING FORM 990, PART VI, LINE 15A COMPENSATION PROCESS FOR TOP OFFICIAL THE BOARD MEETS AND DECIDES THE EXECUTIVE DIRECTOR'S COMPENSATION USING COMPARABILITY DATA, AND THE ORGANIZATION'S BUDGET. FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE THE 990 RETURNS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST FORM 990, PART IX, LINE 11G - OTHER FEES FOR SERVICES DESCRIPTION TOT/PROG SERVICE MGT & GENERAL **FUNDRAISING** PRODUCTION SERVICES 302,742 75,686 GRANT WRITING 0 7,200 7,200 TOTAL 309,942