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 Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A F	or the	2022 calendar year, or tax year beginning UL 1, 2022 and endi	ing Jl	<u>UN 30, 2023</u>	
B c	heck if pplicable	C Name of organization		D Employer identifi	cation number
	Addres	THE RICHMOND BALLET			
	Name change	DICHMOND DALLES		54-60498	48
	Initial return		m/suite	E Telephone number	
]Final return/	407 E. CANAL STREET		80434409	
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code	Į.	G Gross receipts \$	9,577,987.
	Amend return	RICHMOND, VA 23219		H(a) Is this a group r	
	Application	F Name and address of principal officer: BRETT BONDA		for subordinates	s? Yes X No
	pendin	407 E. CANAL ST., RICHMOND, VA 23219		H(b) Are all subordinates i	ncluded? Yes No
<u> 1 T</u>	ax-exe	empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or	527	If "No," attach a	list. See instructions
	Vebsit			H(c) Group exemption	
			L Year o	of formation: 1968 I	M State of legal domicile: VA
Pa	rt I	Summary			
ø		Briefly describe the organization's mission or most significant activities: RICHMON			
Activities & Governance		UPLIFTS, AND UNITES HUMAN SPIRITS THROUGH TE			
ern	l	Check this box if the organization discontinued its operations or disposed o			
ઠું		Number of voting members of the governing body (Part VI, line 1a)			32
<u>«</u>		Number of independent voting members of the governing body (Part VI, line 1b)			141
ies		Total number of individuals employed in calendar year 2022 (Part V, line 2a)			97
ţį		Total number of volunteers (estimate if necessary)			27,064.
Ac		Total unrelated business revenue from Part VIII, column (C), line 12			5,032.
_	В	Net unrelated business taxable income from Form 990-T, Part I, line 11	<u> </u>	Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)		4,646,343.	2,772,741.
ine	l			2,894,227.	3,678,541.
Revenue	l	Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d)		559,723.	-204,416.
Be	ı	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		33,101.	-42,319.
	l	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		8,133,394.	6,204,547.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		237,162.	280,916.
	l	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
'n	45 .	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		3,841,935.	4,081,170.
Se	16a l	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
Expenses	b.	Total fundraising expenses (Part IX, column (D), line 25) 392,544.			
Ж	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,444,141.	1,903,851.
	l	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		5,523,238.	6,265,937.
	19	Revenue less expenses. Subtract line 18 from line 12		2,610,156.	-61,390.
Net Assets or Fund Balances			Beg	inning of Current Year	End of Year
sets	20	Total assets (Part X, line 16)	:	<u>10,091,737.</u>	10,853,342.
t As	21	Total liabilities (Part X, line 26)		577,579.	667,498.
ESE ESE	22	Net assets or fund balances. Subtract line 21 from line 20		9,514,158.	10,185,844.
	rt II	Signature Block			
		lties of perjury, I declare that I have examined this return, including accompanying schedules and			y knowledge and belief, it is
true,	correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which p	reparer f	nas any knowledge.	
٠.		Signature of officer		 Date	
Sig				Date	
Her	е	BRETT BONDA, MANAGING DIRECTOR Type or print name and title			
			l n	ate Check [PTIN
Paid		Print/Type preparer's name OLIVIA A. HUTTON, CPA OLIVIA A. HUTTON,		is	
Prep	- 1	Firm's name YOUNT, HYDE & BARBOUR, P.C.	<u>Ст.</u> Т.		4-1149263
	Only	Firm's address P.O. BOX 2560		FIIIII S EIN J	- TT-7403
536	Jiny	WINCHESTER, VA 22604-1760		Phone no 54	0-662-3417
May	the IF	S discuss this return with the preparer shown above? See instructions		[1 HOHO HO. 3 4	X Yes No

Form	990 (2022) THE RICHMOND BALLET	54-604984	8 Page 2
Par	t 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:		
•	THROUGH ALL OF ITS PROGRAMS, RICHMOND BALLET STRIVES TO	EXPAND ACC	ESS
	·		THE
	ORGANIZATION'S MISSION, TO AWAKEN, UPLIFT, AND UNITE HU		
	THE CONVICTION THAT THE APPETITE AND NEED FOR ARTS EXPE	ERIENCES IS	BOTH
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	Did the organization cease conducting, or make significant changes in how it conducts, any program services	s?	Yes X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services,	as measured by expen	202
-			
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to ot	ners, the total expense	es, and
	revenue, if any, for each program service reported.	0 10	0.000
4a		evenue \$ 2,10	0,282.
	PROFESSIONAL COMPANY PERFORMANCES - RICHMOND BALLET IS	ONE OF	
	VIRGINIA'S FINEST ART AND DANCE EDUCATION INSTITUTIONS	AND HAS GAI	NED
	NATIONAL AND INTERNATIONAL ACCLAIM AS A PREMIER DANCE O	RGANIZATION	•
	NEARLY 35,000 PEOPLE IN AND AROUND THE RICHMOND, VA ARE	EA JOINED	
	RICHMOND BALLET FOR FOUR REPERTORY PRODUCTIONS AS WELL		СТН
	PRODUCTIONS OF "THE NUTCRACKER" AND "FIREBIRD" WITH "SE		<u> </u>
	RICHMOND BALLET ALSO COMPLETED TOURS AND LECTURE DEMONS		<u> </u>
	VARIOUS SCHOOLS AND LOCALITIES THROUGHOUT THE COMMONWEA		
	INCLUDING VIRGINIA BEACH, REACHING NEARLY 25,000 STUDEN	ITS AND OVER	•
	1,000 COMMUNITY PATRONS.		
4b	(Code:) (Expenses \$ 1,398,508 • including grants of \$ 280,916 •) (Re	evenue \$ 1,44	2,337.
	DANCE SCHOOL - THE SCHOOL OF RICHMOND BALLET OFFERS TRA		
			ND
	CHARACTER. WITH NO AUDITION REQUIREMENT, ADMISSION TO T		
	INCLUSIVE. DANCE CLASSES ARE PROVIDED TO ALMOST 1,000 S		ES 4
	TO ADULT, 7 DAYS A WEEK. THE SCHOOL ALSO PROVIDES ADVAN		
	QUALIFIED STUDENTS WHO PERFORM WITH THE BALLET'S PROFES		
	COMPANY. OVER \$280,000 GIVEN IN FINANCIAL AID AND SCHOL		PED
	OVER 100 STUDENTS PARTICIPATE IN DANCE CLASSES THIS YEAR	AR.	
40	(Code:) (Expenses \$ 427 , 189 . including grants of \$) (Re	evenue \$ 10	8,858.
70	MINDS IN MOTION (MIM) - MIM IS RICHMOND BALLET'S PRIMAR		
	ENGAGEMENT PROGRAM, REACHING OVER 1,000 CHILDREN FROM A		
	· · · · · · · · · · · · · · · · · · ·		OTNO
	SOCIOECONOMIC BACKGROUNDS. THIS IN-SCHOOL PROGRAM FEATURE OF THE STATE		
	MOVEMENT-BASED CURRICULUM TAUGHT BY PROFESSIONAL TEACHI		
		M STRIVES T	0
	NURTURE SELF-CONFIDENCE IN STUDENTS AND ENDEAVORS TO CU	JLTIVATE	
	COMMUNICATION AND TEAMWORK SKILLS. TEACHING ARTISTS FOI	LOW A CURRI	CULUM
	THAT GUIDES STUDENTS TOWARD MASTERY OF COMPLEX MOVEMENT		
	CHOREOGRAPHY. THROUGH THE EXPERIENCE OF SUCCESSFUL GROU		
			<u> </u>
	STUDENTS PERCEIVE AND MODEL THE VALUE AND BENEFITS OF T		·
	RESPECTFUL COMMUNICATION. THE PROGRAM CONCLUDES WITH AN		
	PRODUCTION PRESENTED FOR A LIVE AUDIENCE, THEMED THIS Y	EAR AROUND	
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses 5,183,026.		

Form **990** (2022)

13031017 781823 41048000.0

Form 990 (2022) THE RICHMOND BALLET 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? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
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 donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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,			
u	Part VI	11a	Х	
h	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	<u>-</u>		
D	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
•	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	1110		
·	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
Ч	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	٠٠		
u		11d		x
•	Part X, line 16? If "Yes," complete Schedule D, Part IX Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f		116	- 25	<u> </u>
'	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11f	Х	
120	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," <i>complete</i>	 ''''	21	
IZa	, , ,	400		x
	Schedule D, Parts XI and XII	12a		<u> </u>
D	Was the organization included in consolidated, independent audited financial statements for the tax year?	401	v	
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	X	Х
13	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		├^
D	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			_v
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			🗸
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			3,7
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			3,7
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		<u> </u>
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	X	
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		<u> X</u>
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	, , , , , , , , , , , , , , , , , , , ,	20b		<u> </u>
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		Х
			aan	(0000)

Part IV Checklist of Required Schedules (continued)

22 X 23 Dd the organization report more than \$5.000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 27 if "Trey", complete Schedule I, Part I and III 24 Dd the organization answer "Yes" to Part IVI, Section A, line 3, 4, or 5, about compensation of the organization sourcet and former offices, directors, tustees, key employees, and highest compensated employees? If "Yes," complete Schedule I, Part IVI 25 Dd the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the list day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule I/ "Who," or to live 25a 26 Dd the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 26 Dd the organization meets an an ecrow account other than a returning ecrow at any time during the year to defease any lax-exempt bonds? 26 Dd the organization meets as an "on behalf of" issuer for bonds outstanding at any time during the year? 26 Dd the organization are as an "on behalf of" issuer for bonds outstanding at any time during the year? 26 Dd the organization are are the it engaged in an excess benefit transaction with a disqualified person during the year? 26 Dd the organization are that it engaged in an excess benefit transaction with a disqualified person of wind the organization with a disqualified person of a person of the organization with a disqualified person of a person of the organization with a disqualified person of a person of the organization with a disqualified person of a person of the organization with a disqualified person of a person of the organization with a disqualified person of a person of the organization with a person of the organization with a person of the orga				Yes	No
23 Did the organization asswer "Yes" to Part VII, Section A, Ilins 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? 24 Press, "complete Schedule I." 25 Did the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the list day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24th through 24th and complete Schedule I. If "Yes," to line 25e 26 Did the organization marks and proceeds of fax-exempt bonds beyond a temporary period exception? 26 Did the organization amarks and are scrow account of ther than a refunding scrow at any time during the year to defease any tax-exempt bonds? 27 Did the organization acts as an "on behalf of" issuer for bonds outstanding at any time during the year to defease any tax-exempt bonds? 28 Section \$5(16)\$, \$501(44)\$, and \$501(42)90 organizations. Did the organization are period as caps and the transaction has not been reported on any of the organization specifies of the state	22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
and former officers, directions, fustlesse, key employees, and highest compensated employees? If "Yee," compete Schedule L. Part IV. 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 "Yee," answer lines 240 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? 24b Did the organization minetal any exceptions of tax exempt bonds beyond a temporary period exception? 24d Did the organization invest any an except account other than a rehunding secrew at any time during the year to defease any tax-exempt bonds? 25d Did the organization available as an 'on behalf of 'issuer for bonds outstanding at any time during the year? 25d 25d Did the organization available as an 'on behalf of 'issuer for bonds outstanding at any time during the year? 25d Did the organization available as an 'on behalf of 'issuer for bonds outstanding at any time during the year? 25d Did the organization available and solicity of the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction was the disqualified person in a prior year, and that the transaction was the disqualified person in a prior year, and that the transaction has not been personed in Yee, and year of 904DEZ if Yee, complete Schedule L. Part II 25d Did the organization provide 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 any substantial contributor, or 395% controlled entity of one to a business transaction with no of the following parties (see the Schedule L. Part IV. 27 or A 595% controlled entity of one to a business transaction with one officer, directo		Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
Schedule / La 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 fine 25a. b Did the organization mivest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization mivest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d Did the organization maintain an escrow account other than a refunding escrow at any time during the year? d Did the organization acts as an "on behalf of "issuer for bonds outstanding at any time during the year? d Did the organization acts as an "on behalf of "issuer for bonds outstanding at any time during the year? 24d	23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
Did the copanization 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 "Res," answer lines 24th through 24th and complete Schedule K. If "No," go to line 25a		and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
slast day of the year. Nat was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. "Mo." go to line 258. b Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? c Did the organization minest any proceeds of tax exempt bonds beyond a temporary period exception? d Did the organization amental an escrove account other than a refunding escrow at any time during the year? 24d 25a Section 50(16), 8 Dot(16), 4 and 501(16)/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 25b X b Is the organization aware that in engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25b X b Is the organization aware that in 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 sprior 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 former officer, director, fustee, key employee, creator or former officer, director, fustee, key employee, creator or founder, substantial contributor, or 35% controlled entity of marring or family member of any of these persons? If "Yes," complete Schedule L, Part IV 27 X 27 Did the organization apply to a business transaction with one of the following parties (see the Schedule L, Part IV 27 X 28 Was the organization expert yet to a business transaction with one of the following parties (see the Schedule L, Part IV 28c X 28b X C 2			23		X
Schedule K. If "No.", go to line 25a. Schedule K. If "No.", go to line 25a. B Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax exempt bonds? C Did the organization and as an "on behalf of" issuer for bonds cutstanding at any time during the year? 24d. Did the organization act as an "on behalf of" issuer for bonds cutstanding at any time during the year? 24d. Did the organization act as an "on behalf of" issuer for bonds cutstanding at any time during the year? 24d. Did the organization avance that it engaged not an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on person in the organization specific prior of payables to any current or former officer, director, flustee, key employee, creator or founder, substantial contributor, or 35% controlled entity for family member of any of these persons? If "Yes," complete Schedule L, Part II 25 Was the organization provide a grant or other assistance to any current or former officer, director, flustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 59% controlled entity finching an employee benear person? If "Yes," complete Schedule L, Part II" 26 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part III" 27 Yes, "complete Schedule L, Part II" 28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part III" 29 A 13% controlled schedule III parts III" 29 A 13% controlled schedule III" 29 B 10 the organization receive more than \$25,000 in non-cash	24a				
b Dd the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding secrow at any time during the year to defease any tax-exempt bonds? 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? 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? 25b Is the organization eaver that the engage in an excess benefit transaction has not been reported on any of the organization proper section in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 // 1/*es,* 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, frustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or founder, substantial contributor, or 35% controlled entity of rounder, substantial contributor or organization apertury of former officer, director, frustee, key employee, creator or founder, substantial contributor, or 35% controlled entity (including an employee thereof) or family member of any of these persons? // 1/*es,* complete Schedule L, Part II 27 Did the organization experts the schedule L, Part II 28 Was the organization experts or founder, or substantial contributor? // 1/*es,* complete Schedule L, Part II 28 A 18 A 24 29 A 18 A 24 20 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? // 1/*es,* complete Schedule L, Part II 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? // 1/*es,* compl					
c 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 maintain an escrow account other than a refunding escrow at any time during the year? of the property of the organization engage in an excess benefit transaction with a disqualified person during the year? if "Yes," complete Schedule I, Part I 25a X b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? if "Yes," complete Schedule I, Part I 25a X b Is the organization report any amount on Part X, line 5 or 22, for neceivables from or psyables to any current or former officer, director, fustee, key employee, creator or founder, substantial contributor, or 35% 25b X Did the organization report any amount on Part X, line 5 or 22, for neceivables from or psyables to any current or former officer, director, fustee, key employee, creator or founder, substantial contributor, or 35% 25c X 25D Uff the organization provide a grant or other assistance to any current or former officer, director, fustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part II 27 X 28b X 27 28c 27 28c					<u> </u>
any tax-exempt bonds? 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/3), 501(c/3), 501(c/3) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? 1/Yes, 'complete Schedule L, Part I 25a X 25a X 25a 25a X 25			24b		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 258 Section 501(28), 501(40), 4an 501(40)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	С				
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 25b					
b is the organization ware 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 990E2? If "Yes," complete Schedule L, Part I		• • • • • • • • • • • • • • • • • • • •	240		
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 980 or 990-E27 "Yes," complete Schedule L, Part I 250 bill 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 former officer, director, trustee, key employee, creator or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 26	2 5a		250		v
that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? // "Yes," complete Schedule L, Part I	h		25a		
Schedule L, Part I 25b X 2 2 2 2 2 2 2 2 2	D				
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If "Yes," complete Schedule R, Part V, line 2 36	36				
Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 X 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on 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? 1c X		If "Yes," complete Schedule R, Part V, line 2	36		X
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 Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V The image of the complete Schedule O contains a response or note to any line in this Part V The image of the complete Schedule O complete Schedule O The image of the complete Schedule O complete Schedule O The image of the complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? The image of the image of the complete Schedule O The image of the complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? The image of the complete Schedule O for Part VI, lines 11b and 19? The image of the complete Schedule O for Part VI, lines 11b and 19? The image of the complete Schedule O for Part VI, lines 11b and 19? The image of the complete Schedule O for Part VI, lines 11b and 19? The image of the complete Schedule O for Part VI, lines 11b and 19? The image of the complete Schedule O for Part VI, lines 11b and 19? The image of the complete Schedule O for Part VI, lines 11b and 19? The image of the complete Schedule O for Part VI, lines 11b and 19? The image of the complete Schedule O for Part VI, lines 11b and 19? The image of the complete Schedule O for Part VI, lines 11b and 19? The image of the complete Schedule O for Part VI, lines 11b and 19? The image of the complete Schedule O for Part VI, lines 11b and 19? The image of the complete Schedule O for Part VI, lines 11b and 19? The image of the complete Schedule O for Part VI, lines 11b and 19? The image of the complete Schedule O for Part VI, lines 11b and 19? The image of the complete Schedule O for Part VI, lines 11b and 19? The image of the complete Schedule O for Part VI, lines 11b and 19? The image of the complete Schedule O for Part VI, lines 11b and 19? The image of the c	37				
Note: All Form 990 filers are required to complete Schedule O Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on 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? 38 X Yes Yes No 1a 49 b Enter the number of Forms W-2G included on 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? 1c X		and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
Part 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 b Enter the number of Forms W-2G included on 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? 1c X	38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
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 b Enter the number of Forms W-2G included on 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? 1c X	D-		38	X	
Ta Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on 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? Yes No 1a 49 1b 0 1b 0 1c X	Par				
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 49 b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c X		Check if Schedule O contains a response or note to any line in this Part V			
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable		5. "		Yes	No
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c X					
(gambling) winnings to prize winners?		Enter the figure of Fermi V 24 metaded of fine facilities of most applicable			
	С		10	x	
	232004				(2022)

	orm 990 (2022) THE RICHMOND BA		54-6049	848	Р	age 5
Par	Part V Statements Regarding Other IRS Fili	ngs and Tax Compliance (continued)				
			1 1		Yes	No
2a	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 yea	r covered by this return	2a 141			
b	b If at least one is reported on line 2a, did the organization	n file all required federal employment tax return	ns?	2b	Х	
За	3a Did the organization have unrelated business gross inc	ome of \$1,000 or more during the year?		За	Х	
b	b If "Yes," has it filed a Form 990-T for this year? <i>If</i> "No"	to line 3b, provide an explanation on Schedule	O	3b	Х	
	4a At any time during the calendar year, did the organizati					
	financial account in a foreign country (such as a bank a	ccount, securities account, or other financial a	ccount)?	4a		Х
b	b If "Yes," enter the name of the foreign country					
	See instructions for filing requirements for FinCEN Forr	n 114, Report of Foreign Bank and Financial A	ccounts (FBAR).			
5a				5a		Х
b				5b		Х
	c If "Yes" to line 5a or 5b, did the organization file Form 8			5c		
6a						
	any contributions that were not tax deductible as chari		-	6a		Х
b	b If "Yes," did the organization include with every solicita					
			-	6b		
7						
а	D. 1.1	` '	vices provided to the payor?	7a	Х	
				7b	Х	
	c Did the organization sell, exchange, or otherwise dispo	-				
·			•	7с		x
d			7d			
e			•	7e		х
f				7f		Х
g				7g		
h				7h		
8				711		
Ū	sponsoring organization have excess business holding			8		
9						
а				9a		
b				9b		
10		a donor, donor advisor, or rolated person:		0.0		
		t VIII line 12	10a			
b			10b			
11		, for public use of club fusilities	100			
	a Gross income from members or shareholders		11a			
	b Gross income from other sources. (Do not net amounts		110			
b	amounts due or received from them.)		11b			
19a	12a Section 4947(a)(1) non-exempt charitable trusts. Is:			12a		
	b If "Yes," enter the amount of tax-exempt interest receiv		12b	IZG		
13			IZU			
	a Is the organization licensed to issue qualified health pla			13a		
u	Note: See the instructions for additional information the			ioa		
h	b Enter the amount of reserves the organization is require	-				
b	organization is licensed to issue qualified health plans	•	13b			
•	c Enter the amount of reserves on hand		13c			
				14a		Х
14a	Ida Did the organization receive any payments for indoor tob If "Yes," has it filed a Form 720 to report these payments			14a 14b		1
				1+D		
15	,			15		X
	excess parachute payment(s) during the year?			15		
16	If "Yes," see the instructions and file Form 4720, Scheo		tincomo?	16		Х
16		THE SECTION 4900 EXCISE TAX ON HET INVESTMENT	I IIICOITIE!	16		
17	If "Yes," complete Form 4720, Schedule O.	disqualified or other person angers in accura-	tivitios			
17	, , ,			47		
	that would result in the imposition of an excise tax und	ธเ จ ธ ธเมษา 4ชอ เ, 4ชอ2 ปี 4ชอ 3 ?		17		

232005 12-13-22

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. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No Yes 32 **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. 30 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors, trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 6 Х 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? Х 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? 10a 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? Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c on Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 Did the organization have a written document retention and destruction policy? 14 Х 14 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? The organization's CEO, Executive Director, or top management official Х 15a Х Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its 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? 16h Section C. Disclosure NONE List the states with which a copy of this Form 990 is required to be filed 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 X Own website Another's website X Upon request Other (explain on Schedule O) 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. State the name, address, and telephone number of the person who possesses the organization's books and records MICHELLE MULLER - 804-344-0906

Form **990** (2022)

407 E CANAL ST, RICHMOND,

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 the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

- 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.

(A) Name and title	(B) Average hours per week	box	not c , unles	ss per	ition more son is	than o	n an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) STONER WINSLETT	40.00	ļ						140 011		4 404
ARTISTIC DIRECTOR	40.00	Х		Х				142,911.	0.	4,424.
(2) BRETT BONDA	40.00	٠,,						110 601	_	F 000
MANAGING DIRECTOR	40.00	Х		Х				112,691.	0.	5,988.
(3) MICHELLE MULLER CHIEF FINANCIAL OFFICER	40.00	1		х				75,175.	0.	4,130.
(4) DAVID R. BERAN	5.00			Λ				15,115.	0.	4,130.
PAST PRESIDENT	3.00	x		Х				0.	0.	0.
(5) MEG CLINARD	5.00							•	•	
PRESIDENT	3100	x		х				0.	0.	0.
(6) JEFF JONES	3.00	1								
VICE PRESIDENT		Х		Х				0.	0.	0.
(7) TIFFANY B. ARMSTRONG	2.00									
VICE PRESIDENT		Х		Х				0.	0.	0.
(8) DAN BRYANT	2.00									
TREASURER & VP		Х		Х				0.	0.	0.
(9) LIBBY ROBERTSON	2.00	<u> </u>								
VICE PRESIDENT		Х		Х				0.	0.	0.
(10) CHRISTIN KENNEDY	2.00]							_	_
VICE PRESIDENT		Х		Х				0.	0.	0.
(11) GAYE MONTGOMERY	2.00	ļ								
SECRETARY		Х		Х				0.	0.	0.
(12) KATHLEEN MACCIO HOLMAN	5.00	ļ							_	•
CHAIRMAN	2 00	Х		Х				0.	0.	0.
(13) HUNTER APPLEWHITE	2.00	٠,,							_	0
TRUSTEE	2 00	Х						0.	0.	0.
(14) MRS. HERBERT A. CLAIBORNE, JR. TRUSTEE	2.00	х						0.	0.	0.
(15) KATHERINE DUVAL	2.00							0.	<u></u>	<u></u>
TRUSTEE	2.00	x						0.	0.	0.
(16) MRS. R. FINLEY GAYLE	2.00	† 							•	
TRUSTEE		х						0.	0.	0.
(17) MAGGIE GEORGIADIS	2.00									
TRUSTEE		Х						0.	0.	0.
· · · · · · · · · · · · · · · · · · ·									•	Farm 990 (2022)

232007 12-13-22

Part VII Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	ΙΗiς	ghes	t C	ompensated Employee	s (continued)	
(A)	(B)			(0)			(D)	(E)	(F)
Name and title	Average hours per week	box	not cl , unles cer an	ss per	more son i	than o	an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(18) RYAN GLASGOW	2.00									
TRUSTEE		Х						0.	0.	0.
(19) PHILIP GOODPASTURE	2.00	7,7							0	0
TRUSTEE	2 00	Х						0.	0.	0.
(20) WILLIAM HANCOCK TRUSTEE	2.00	х						0.	0.	0.
(21) KATHLEEN LUKE	2.00								•	
TRUSTEE		Х						0.	0.	0.
(22) J. ROBERT MOONEY TRUSTEE	2.00	х						0.	0.	0.
(23) MAC MOYERS	2.00								•	
TRUSTEE		х						0.	0.	0.
(24) KWADWO OWUSU-AKYAW, M.D. TRUSTEE	2.00	х						0.	0.	0.
(25) CAROLYN PORT, M.D.	2.00									
TRUSTEE		Х						0.	0.	0.
(26) SELINA RAINEY	2.00									
TRUSTEE		Х						0.	0.	0.
1b Subtotal								330,777.	0.	14,542.
c Total from continuation sheets to Part V	II, Section A							0.	0.	0.
d Total (add lines 1b and 1c)				<u></u>				330,777.	0.	14,542.

2 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
3	Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on			
	line 1a? If "Yes," complete Schedule J for such individual	3		Х
4				
	and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4		X
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services			
	rendered to the organization? If "Yes." complete Schedule J for such person	5		Х

Section B. Independent Contractors

1 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
RICHMOND SYMPHONY, 612 E. GRACE 401, RICHMOND, VA 23219	LIVE ORCHESTRA	193,550.

2 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 SHEETS

Form 990 THE RICH	MOND BAI	LE	T						54-604	9848
Part VII Section A. Officers, Directors, Tr	ustees, Key Er	nplo	yee	s, aı	nd F	ligh	est (Compensated Employe	ees (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average				ition	1		Reportable	Reportable	Estimated
	hours	(c	heck				ly)	compensation	compensation	amount of
	per							from	from related	other
	week	_)yee		the	organizations	compensation
	(list any	recto				em plc		organization	(W-2/1099-MISC)	from the
	hours for related	ordi	ee			sated		(W-2/1099-MISC)		organization and related
	organizations	Individual trustee or director	Institutional trustee		/ee	Highest compensated employee				organizations
	below	dualt	utiona	_	Key employee	stco	Ē			organizations
	line)	Indivi	Institu	Officer	Key e	Highe	Former			
(27) DONNA RANSONE	2.00									
TRUSTEE		Х						0.	0.	0.
(28) DAPHNE MAXWELL REID	2.00									
TRUSTEE		Х						0.	0.	0.
(29) MRS. RICHARD S. REYNOLDS III	2.00									
TRUSTEE		Х						0.	0.	0.
(30) MRS. ANDREWS G. SPITZER	2.00									
TRUSTEE		Х						0.	0.	0.
(31) ROBIN ROBERTSON STARR	3.00									
TRUSTEE		Х						0.	0.	0.
(32) LIZ TOMS	2.00									
TRUSTEE		Х						0.	0.	0.
(33) BARBARA WRIGHT	2.00									
TRUSTEE		Х						0.	0.	0.
(34) SUZANNE YOUNGKIN (NONVOTING)	0.00								_	_
HONARY TRUSTEE		Х						0.	0.	0.
		-								
		-								
						_				
		-								
	+									
		1								
	+									
		1								
	+									
		1								
	+									
		1								
	+									
		1								
		1								
		1								
			L			L				
Total to Part VII, Section A, line 1c										
										·

54-6049848

Form 990 (2022) THE RICHMOND BALLET
Part VIII | Statement of Revenue

		Check if Schedule O			or note to any line	o in this Dart VIII			
		Check if Schedule O	JUITLA	iilis a response	or note to any line	(A)	(B)	(C)	(D)
						Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
							function revenue	business revenue	sections 512 - 514
S S	1 :	Federated campaigns		1a					
Contributions, Gifts, Grants and Other Similar Amounts	ŀ	Membership dues		4.					
n, G		Fundraising events			332,649.				
ifts Ir A		Related organizations			50,398.				
s, G nils	6	Government grants (contr			122,887.				
Sir	f	All other contributions, gifts,			·				
outi her		similar amounts not included			2,266,807.				
ള		Noncash contributions included in			161,549.				
Cor	ŀ	Total. Add lines 1a-1f				2,772,741.			
					Business Code				
Ф	2 8	PRODUCTION AND TOURS	3		711120	2,127,346.	2,100,282.	27,064.	
vic.	k	SCHOOL TUITION			611600	1,442,337.	1,442,337.		
Ser		MINDS IN MOTION			611600	108,858.	108,858.		
Program Service Revenue									
ogra Re	•	•							
Pro	f	All other program service	rever	nue					
		Total. Add lines 2a-2f				3,678,541.			
	3	Investment income (include							
		other similar amounts)				147,687.			147,687.
	4	Income from investment of	of tax	exempt bond	oroceeds				
	5	Royalties	. <u></u>						
				(i) Real	(ii) Personal				
	6 a	Gross rents	6a	6,800	,				
	k	Less: rental expenses	6b	0	,				
	c	Rental income or (loss)	6с	6,800	,				
	c	Net rental income or (loss)) <u></u>			6,800.			6,800.
	7 a	Gross amount from sales of		(i) Securities	(ii) Other				
		assets other than inventory	7a	2,872,126	,				
	k	Less: cost or other basis							
ne		and sales expenses	7b	3,184,521					
Revenue	c	Gain or (loss)	7с	-312,395	-39,708.				
		d Net gain or (loss)				-352,103.			-352,103.
her	8 8	Gross income from fundraisi							
Ŏŧ		including \$	332,	649. of					
		contributions reported on		·					
		Part IV, line 18							
		Less: direct expenses			149,211.				
		Net income or (loss) from				-98,086.			-98,086.
	9 a	Gross income from gamin		I					
	_	Part IV, line 19							
		Less: direct expenses			01				
		Net income or (loss) from							
	10 a	Gross sales of inventory, I		I					
		and allowances		I					
		Less: cost of goods sold			0				
		Net income or (loss) from	sales	of inventory .	Rueinaga Cada				
ns	44	MISCELLANEOUS			Business Code 711120	48,967.			48,967.
Miscellaneous Revenue	11 6				,11120	±0,307.			=0,307.
llar	k								
Sce									
Ξ		d All other revenue				48,967.			
	12	Total revenue. See instruction				6,204,547.	3,651,477.	27,064.	-246,735.

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**)
Fundraising (C) Management and general expenses (B) Do not include amounts reported on lines 6b. Program service expenses Total expenses 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 280,916. 280,916. 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, 473,317. 226,178. 187,091. 60,048. 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) 3,087,382. 2,660,607. 193,051. 233,724. Other salaries and wages 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 35,<mark>692.</mark> 278,069. 226,215. 16,162. Other employee benefits 9 242,402. 196,356. 29,192. 16,854. 10 Payroll taxes 11 Fees for services (nonemployees): Management 1,317. 1,317. Legal 21,371. 21,371. Accounting Lobbying Professional fundraising services. See Part IV, line 17 30,401. 30,401. Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 65,221. 46,623. 3,442. 15,156. column (A), amount, list line 11g expenses on Sch O.) 175,991. 175,991. Advertising and promotion 12 73,036. 19,535. 47,454. 6,047. Office expenses 13 56,336. 7,978. 44,763. 3,595. Information technology 14 27,697. 27,697. 15 Royalties 5,697. 354,048. 324,520. 23,831. 16 Occupancy 110,073. 100,251. 8,791. 1,031. 17 Payments of travel or entertainment expenses 18 for any federal, state, or local public officials ... Conferences, conventions, and meetings 19 20 Payments to affiliates 21 187,895. 177,542. 4,747. 5,606. Depreciation, depletion, and amortization 22 26,459. 17,780. 8,343. 336. 23 Other expenses. Itemize expenses not covered 24 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.) 514,396. 514,396. OTHER PRODUCTION EXPENS 130,979. BUSINESS LICENSES AND A 128,829. 2,150. 79,883. **EDUCATION EXPENSES** 79,883. 39,502. 39,502. d FUNDRAISING COSTS 9,246. 1.879. 6,867. 500. e All other expenses 6,265,937. 5,183,026. 690,367. 392,544. 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. Check here if following SOP 98-2 (ASC 958-720)

Pai	rt X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	2,496,525.	1	673,429.
	2	Savings and temporary cash investments		2	672,267.
	3	Pledges and grants receivable, net	283,088.	3	467,318.
	4	Accounts receivable, net	88,033.	4	19,978
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
S.	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use	29,716.	8	46,545
ğ	9	Prepaid expenses and deferred charges	57,756.	9	136,861
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 3,737,026.			
	b	Less: accumulated depreciation 10b 1,893,398.	1,621,623.	10c	1,843,628
	11	Investments - publicly traded securities	5,308,601.	11	6,920,404
	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	206,395.	15	72,912
	16	Total assets. Add lines 1 through 15 (must equal line 33)	10,091,737.	16	10,853,342
	17	Accounts payable and accrued expenses	204,213.	17	191,028
	18	Grants payable		18	
	19	Deferred revenue	373,366.	19	403,369
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
es	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
jab		controlled entity or family member of any of these persons		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X	•		F2 101
		of Schedule D	0.		73,101.
	26	Total liabilities. Add lines 17 through 25	577,579.	26	667,498
S		Organizations that follow FASB ASC 958, check here			
č		and complete lines 27, 28, 32, and 33.	6 772 002		7 160 400
alar	27	Net assets without donor restrictions	6,772,883.	27	7,168,499.
Ä	28	Net assets with donor restrictions	2,741,275.	28	3,017,345.
Ĕ		Organizations that do not follow FASB ASC 958, check here			
F		and complete lines 29 through 33.			
ţ	29	Capital stock or trust principal, or current funds		29	
sse	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or other funds	0 514 150	31	10 105 0//
ž	32	Total net assets or fund balances	9,514,158.	32	10,185,844.
	33	Total liabilities and net assets/fund balances	10,091,737.	33	10,853,342

1 0111	1000 (2022)				.gc
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>		
1	Total revenue (must equal Part VIII, column (A), line 12)	1	6,20	4,5	47.
2	Total expenses (must equal Part IX, column (A), line 25)	2	6,26		
3	Revenue less expenses. Subtract line 2 from line 1	3	- 6	1,3	90.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	9,51	4,1	<u>.58.</u>
5	Net unrealized gains (losses) on investments	5	73	3,0	76.
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			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	10,18	35,8	44.
Pai	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	О.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u> </u>
	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:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	Separate basis X Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.			
За	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?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits	<u></u>	3b		
			Forr	n 990	(2022)

232012 12-13-22

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

Attach to Form 990 or Form 990-EZ.

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

Open to Inspect

2022

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

THE RICHMOND BALLET 54-6049848 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 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). 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 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 described in section 170(b)(1)(A)(vi). (Complete Part II.) 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 or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 X 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 12 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). (iv) Is the organization listed n your governing document? (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions)) Total

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II

(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	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization'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						
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)						
6	Public support. Subtract line 5 from line 4.						
Sec	ction B. Total Support			•		•	
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4						
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
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						
	Gross receipts from related activities,	etc. (see instruction	ons)		•	12	
	First 5 years. If the Form 990 is for the	•				i01(c)(3)	
	organization, check this box and stop	here					
Sec	ction C. Computation of Publi	c Support Per	centage				
14	Public support percentage for 2022 (I	ine 6, column (f), d	ivided by line 11,	column (f))		14	%
	Public support percentage from 2021					15	%
16a	33 1/3% support test - 2022. If the	organization did no	t check the box o	n line 13, and line	14 is 33 1/3% or m	ore, check this bo	x and
	stop here. The organization qualifies	as a publicly supp	orted organization				
b	33 1/3% support test - 2021. If the	organization did no	t check a box on	ine 13 or 16a, and	l line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation			
17a	10% -facts-and-circumstances test	- 2022. If the org	anization did not	check a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the fact	s-and-circumstanc	es test, check this	box and stop he	re. Explain in Part	VI how the organiz	ation
	meets the facts-and-circumstances te	st. The organizatio	n qualifies as a pu	blicly supported o	rganization		
b	10% -facts-and-circumstances test	- 2021. If the org	anization did not	check a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets the	ne facts-and-circun	nstances test, che	ck this box and s	top here. Explain i	n Part VI how the	
	organization meets the facts-and-circu	umstances test. Th	ne organization qua	alifies as a publicly	supported organiz	zation	
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17b	o, check this box a	nd see instructions	s
							(Form 990) 2022

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

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

Sed	ction A. Public Support		,				
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	3081356.	3707531.	4258475.	4646343.	2722342.	18416047.
	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	4050448.	3682183.	1610706.	2866342.	3651477.	15861156.
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ- ization'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	7131804.	7389714.	5869181.	7512685.	6373819.	34277203.
7a	Amounts included on lines 1, 2, and	05 546	004 500	100 500	156 560	204 222	061 614
	3 received from disqualified persons	95,516.	234,520.	170,579.	156,760.	304,239.	961,614.
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						0.
,	Add lines 7a and 7b	95,516.	234,520.	170.579.	156,760.	304.239.	
	Public support. (Subtract line 7c from line 6.)	20,0201					33315589.
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6	7131804.	7389714.	5869181.	7512685.	6373819.	34277203.
10 <i>a</i>	dross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	161,703.	121,720.	67,333.	69,184.	154,487.	574,427.
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b	161,703.	121,720.	67,333.	69,184.	154,487.	574,427.
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on				2,906.	27,064.	29,970.
12	Other income. Do not include gain or loss from the sale of capital			8,998.	33,101.	48,969.	
12	assets (Explain in Part VI.)	7293507.	7511434.	5945512.	7617876.		34972668.
	Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for th	•					•
	check this box and stop here	•					J.,
Sed	ction C. Computation of Publi						
	Public support percentage for 2022 (li			olumn (f))		15	95.26 %
	Public support percentage from 2021					16	95.58 %
Sec	ction D. Computation of Inves	tment Income	Percentage				
	Investment income percentage for 20					17	1.64 %
	Investment income percentage from 2					18	1.42 %
19a	33 1/3% support tests - 2022. If the						
	more than 33 1/3%, check this box an						
b	33 1/3% support tests - 2021. If the						ind
	line 18 is not more than 33 1/3%, chec			•		· ·	H

Т..

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

	Yes	No
1		
2		
3a		
3b		
3с		
4a		
4b		
TU		
4c		
5a		
5b		
5c		
6		
7		
0		
8		
9a		
Ju		
9b		
9с		
10a		
10b		
 	~ 000	

Par	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			
	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			
01	detail in Part VI.	11c		
Seci	tion B. Type I Supporting Organizations			
			Yes	No
	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the	4		
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
	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? <i>If</i> "Yes," <i>explain in</i>			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	2		
Sect	supervised, or controlled the supporting organization. tion 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		100	110
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sect	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
	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? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
	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			
Sact	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations	3		
1 a	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction The organization satisfied the Activities Test. Complete line 2 below.	>).		
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	inetruction	ic)	
2	Activities Test. Answer lines 2a and 2b below.	ristruction	Yes	No
	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 those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
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	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	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		

54	<u>l</u> -6	04	.98	348	B Page 6	6
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Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Organi	zations				
1	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 mus						
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)			
1	Net short-term capital gain	1					
2	Recoveries of prior-year distributions	2					
3	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	+ +					
Ū	collection of gross income or for management, conservation, or						
		6					
	maintenance of property held for production of income (see instructions)	7					
7	Other expenses (see instructions)	8					
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		(D) O			
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current 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					
С	Fair market value of other non-exempt-use assets	1c					
d	Total (add lines 1a, 1b, and 1c)	1d					
е	Discount claimed for blockage or other factors						
	(explain in detail in Part VI):						
2	Acquisition indebtedness applicable to non-exempt-use assets	2					
3	Subtract line 2 from line 1d.	3					
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,						
	see instructions).	4					
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5					
6	Multiply line 5 by 0.035.	6					
7	Recoveries of prior-year distributions	7					
8	Minimum Asset Amount (add line 7 to line 6)	8					
Sect	ion C - Distributable Amount			Current Year			
1	Adjusted net income for prior year (from Section A, line 8, column A)	1					
2	Enter 0.85 of line 1.	2					
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3					
4	Enter greater of line 2 or line 3.	4					
5	Income tax imposed in prior year	5					
6	Distributable Amount. Subtract line 5 from line 4, unless subject to						
•	emergency temporary reduction (see instructions).	6					
7	Check here if the current year is the organization's first as a non-functional		d Type III supporting orga	nization (see			
•	instructions)	any micograted	a 1, po in oupporting orga				

Schedule A (Form 990) 2022

Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	inizations _{(continu}	ıed)	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exer		1		
2	Amounts paid to perform activity that directly furthers exemp				
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpose	s of supported organizations	 S	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	e organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2022 from Section C, line 6			9	
	Line 8 amount divided by line 9 amount			10	
	,	(i)	(ii)		(iii)
Secti	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistribution Pre-2022	าร	Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2022				
a	From 2017				
b	From 2018				
СС	From 2019				
d	From 2020				
ее	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2022 distributable amount				
<u>i</u>	Carryover from 2017 not applied (see instructions)				
<u>j</u>	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
	line 7:				
<u>a</u>	Applied to underdistributions of prior years				
b	Applied to 2022 distributable amount				
с	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
a	Excess from 2018				
b	Excess from 2019				
с	Excess from 2020				
d	Excess from 2021				
_	Evenes from 2022				

Schedule A (Form 990) 2022

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.

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

OMB No. 1545-0047 Inspection

Name of the organization

THE RICHMOND BALLET

Employer identification number 54-6049848

Pai	organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		imilar Funds or <i>F</i>	Accounts. Complete if the
		(a) Donor advise	d funds	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in w	riting that the assets he	d in donor advised fu	nds
	are the organization's property, subject to the organization's e	exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor ad	lvisors in writing that gra	nt funds can be used	only
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any	y other purpose confe	rring
	impermissible private benefit?			
Pai	rt II Conservation Easements. Complete if the organic	anization answered "Yes	s" on Form 990, Part I	V, line 7.
1	Purpose(s) of conservation easements held by the organization	n (check all that apply).		
	Preservation of land for public use (for example, recreati	ion or education)	Preservation of a his	torically important land area
	Protection of natural habitat		Preservation of a ce	rtified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualifie	ed conservation contribu	ition in the form of a c	conservation easement on the last
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b				
С	Number of conservation easements on a certified historic structure	cture included in (a)		2c
d	Number of conservation easements included in (c) acquired af	fter July 25,2006, and no	ot on a	
	historic structure listed in the National Register			2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or to	erminated by the orga	nization during the tax
	year			
4	Number of states where property subject to conservation ease	ement is located		
5	Does the organization have a written policy regarding the period	odic monitoring, inspect	on, handling of	
	violations, and enforcement of the conservation easements it l	holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, h	nandling of violations, an	d enforcing conservat	ion easements during the year
_				
7	Amount of expenses incurred in monitoring, inspecting, handli	ing of violations, and en	ording conservation e	asements during the year
8	Does each conservation easement reported on line 2(d) above	satisfy the requirement	s of section 170(h)(4)(l	3)(i)
_	and section 170(h)(4)(B)(ii)?	•		
9	In Part XIII, describe how the organization reports conservation			
	balance sheet, and include, if applicable, the text of the footnot		•	
	organization's accounting for conservation easements.	g-		
Pai	rt III Organizations Maintaining Collections of	Art, Historical Trea	asures, or Other	Similar Assets.
	Complete if the organization answered "Yes" on Form 9	990, Part IV, line 8.		
1a	If the organization elected, as permitted under FASB ASC 958	3, not to report in its reve	nue statement and ba	alance sheet works
	of art, historical treasures, or other similar assets held for publ	lic exhibition, education,	or research in further	ance of public
	service, provide in Part XIII the text of the footnote to its finance	cial statements that desc	cribes these items.	
b	If the organization elected, as permitted under FASB ASC 958	3, to report in its revenue	statement and balan	ce sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or	research in furtheran	ce of public service,
	provide the following amounts relating to these items:			
	(i) Revenue included on Form 990, Part VIII, line 1			\$
				<u> </u>
2	If the organization received or held works of art, historical trea			, provide
	the following amounts required to be reported under FASB AS			
а	Revenue included on Form 990, Part VIII, line 1			\$
	Assets included in Form 990, Part X			
	For Paperwork Reduction Act Notice, see the Instructions			Schedule D (Form 990) 2022

	t III Organizations Maintaining Co	ollections of Art	, Historical Tre	asures, or Othe	er Sir	nilar A	ssets	(contin	ued)	age —	
3	Using the organization's acquisition, accession	n, and other records	, check any of the fo	ollowing that make	signific	cant use	of its				
	collection items (check all that apply):										
а	a Public exhibition d Loan or exchange program										
b											
С											
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	f art, historical treas	ures, or other simila	ar asse	ets					
	to be sold to raise funds rather than to be mai	ntained as part of th	e organization's col	lection?				Yes		No	
Par	t IV Escrow and Custodial Arrang	ements. Comple	te if the organizatior	n answered "Yes" o	n Forr	n 990, Pa	art IV, I	ine 9, or			
	reported an amount on Form 990, Part										
1a	Is the organization an agent, trustee, custodia	n or other intermedia	ary for contributions	or other assets not	t inclu	ded					
	on Form 990, Part X?							Yes		No	
b	If "Yes," explain the arrangement in Part XIII a										
		·	· ·		Γ			Amount			
С	Beginning balance				Γ	1c					
d	Additions during the year					1d					
	Distributions during the year					1e					
f	Ending balance				··· [1f					
2a	Did the organization include an amount on Fo				∟ ility?	•		Yes		No	
	If "Yes," explain the arrangement in Part XIII.				-			_]	
Par											
	·	(a) Current year	(b) Prior year	(c) Two years back		hree years	back	(e) Four	years	back	
1a	Beginning of year balance	3,281,182.	2,916,842.	2,301,816.		1,645,	977.	1,	220,	813.	
b	Contributions	76,782.	784,000.	125,000.	 					263.	
С	Net investment earnings, gains, and losses	311,715.	-419,660.	541,783.						217.	
d	Grants or scholarships			5,164.	. 2,350. 1,6					676.	
	Other expenditures for facilities			·	<u> </u>						
	and programs			46,593.		25,	733.		17,	640.	
f	Administrative expenses			,		•					
g	End of year balance	3,669,686.	3,281,182.	2,916,842.		2,301,	816.	1,	645,	977.	
2	Provide the estimated percentage of the curre					· · ·					
a	Board designated or quasi-endowment	43.0000	%	, mora do.							
b	Permanent endowment 49.0000	%	_/*								
	Term endowment 8.0000 %										
_	The percentages on lines 2a, 2b, and 2c shou										
За	Are there endowment funds not in the posses	•	ion that are held an	d administered for t	he						
	organization by:	3-						Γ	Yes	No	
	(i) Unrelated organizations							3a(i)		X	
	(ii) Related organizations							3a(ii)		X	
b	If "Yes" on line 3a(ii), are the related organizati	ions listed as require	ed on Schedule R?					3b			
4	Describe in Part XIII the intended uses of the o										
Par											
	Complete if the organization answered		Part IV, line 11a. Se	ee Form 990, Part X	(, line [·]	10.					
	Description of property	(a) Cost or ot	her (b) Cost	or other (c)	Accun	nulated		(d) Book	valu		
	Becomplien of property	basis (investm	• • •	1 ' '	epreci			(4) 2001	· vaia	•	
1a	Land	· ·	,	,							
	Buildings										
c	Leasehold improvements		7	5,777.	66	5,559		Ç	7.2	18.	
d	Equipment	I				,839		9 1,834	. 4	10.	
	Other		2,30	, = = = · - /		,		,	,		
	Add lines 1a through 1e. (Column (d) must on		(aakuman (D) lina 10)				1.843	6.	28.	

Schedule D (Form 990) 2022

Schedule D (Form 990) 2022 THE RICHMONI) BALLET	54-	-6049848 _{Page}
Part VII Investments - Other Securities.	- Faura 000 Davi IV line	11b Coo Forms 000 Bort V line 10	
Complete if the organization answered "Yes" of		•	afa
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-	of-year market value
) Financial derivatives			
2) Closely held equity interests			
Other			
(A)			
(B)			
(C)		+	
(D)		+	
(E)		+	
(F)		+	
(G)		+	
(H)			
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" of	n Form 990 Part IV line	11c See Form 990 Part Y line 13	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-	of vear market value
	(b) DOOK Value	(c) Wethod of Valuation. Cost of end-	Ol-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)		+	
(7)			
(8)			
(9)			
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets.			
Complete if the organization answered "Yes" of	n Form 990 Part IV line	11d See Form 990 Part X line 15	
-	Description	Tru. Gee Form 330, Fart X, line 13.	(b) Book value
	резсприон		(b) book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
	15\		
otal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	15.)		
Complete if the organization answered "Yes" of	n Form 990 Part IV line	11e or 11f See Form 990 Part X line 25	
(a) Description of liability	in Form 990, Fart IV, line	The of Thi. See Point 990, Part A, line 25.	(b) Book value
(, , , , , , , , , , , , , , , , , , ,			(b) Dook value
(1) Federal income taxes (2) LEASE LIABILITIES			73,101
			/3,101
(3)			
1/11			

73,101. Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2022

(6) (7) (8)

	TXI Reconciliation of Revenue per Audited Financial Statement	ents With Reve	nue per Return.	rage
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a.		
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d	, , , , , , , , , , , , , , , , , , , ,	2d		
е	Add lines 2a through 2d			
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 - 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b			
b	Other (Describe in Part XIII.)	•		
C	Add lines 4a and 4b			
5 Dai	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Staten			
ı aı	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	•	enses per neturn.	
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments			
c	Other losses	_		
d		"		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1			
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	
	rt XIII Supplemental Information.			
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Par			Part XI,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any ad	ditional information.		
DΔF	RT X, LINE 2:			
1 711	(1 A, DING 2.			
ACC	COUNTING FOR UNCERTAIN TAX POSITIONS: MANA	GEMENT EVA	LUATED THE BALI	ET'S
TAX	Y POSITIONS AND CONCLUDED THAT THE BALLET	HAD TAKEN	NO UNCERTAIN TA	XX
POS	SITIONS THAT REQUIRE ADJUSTMENT TO THE FIN	ANCIAL STA	TEMENTS TO COME	LLY
WI'	TH THE PROVISIONS OF THIS GUIDANCE. WITH F	EW EXCEPTI	ONS, THE BALLET	IS
370	TONORD GUDTROW WO THOOME WAY TYANTHAMIONO	DV MIID II	a ====================================	
NO	LONGER SUBJECT TO INCOME TAX EXAMINATIONS	BY THE U.	S. FEDERAL, STA	ATE OR
т 🔿	THE MAY ASSESSED THE PARTY OF THE PROPERTY OF	E 2010		
пос	CAL TAX AUTHORITIES FOR YEARS ENDING BEFOR	.E 2019		
_				
<u>•</u>				
PAF	RT V, LINE 4			
THE	E ENDOWMENT IS CURRENTLY MADE UP OF THE ST	ONER WINSL	ETT SCHOLARSHIE	P

FUND, THE GENERAL ENDOWMENT FUND, AND THE BOARD DESIGNATED ENDOWMENT. THE

232054 09-01-22

Schedule D (Form 990) 2022

SCHEDULE G (Form 990)

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, line 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.

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

OMB No. 1545-0047

2022

Open to Public Inspection

THE RIC		54-6049848					
Part I Fundraising Activities	 Complete if the organization answe 	ered "Y	es" or	n Form 990, Part IV, I	ine 17		
required to complete this par 1 Indicate whether the organization rais a Mail solicitations b Internet and email solicitations c Phone solicitations d In-person solicitations 2 a Did the organization have a written of key employees listed in Form 990, F b If "Yes," list the 10 highest paid indicompensated at least \$5,000 by the	sed funds through any of the followin e Solicitat f Solicitat g Special or oral agreement with any individual Part VII) or entity in connection with prividuals or entities (fundraisers) pursuit	tion of tion of fundra (includ	non-g gover aising ding of onal fu	overnment grants nment grants events ficers, directors, trus undraising services?	itees,	Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	tò (c	Amount paid or retained by) fundraiser red in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No				
Total	1	ı	I				
List all states in which the organization or licensing.	on is registered or licensed to solicit o			or has been notified	it is e	exempt from re	gistration

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

Schedule G (Form 990) 2022

THE RICHMOND BALLET

Pa	rt I	of fundraising events. Complete if the of fundraising event contributions and groups are supplied to the contributions.	•	,	, , ,	. ,
		<u> </u>	(a) Event #1	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through
			(event type)	(event type)	(total number)	col. (c))
ηne			(event type)	(event type)	(total Hallisol)	
Revenue	1	Gross receipts	383,774.			383,774.
	2	Less: Contributions	332,649.			332,649.
	3	Gross income (line 1 minus line 2)	51,125.			51,125.
	4	Cash prizes	0.			
s	5	Noncash prizes	27,582.			27,582.
pense	6	Rent/facility costs	6,360.			6,360.
Direct Expenses	7	Food and beverages	52,042.			52,042.
Θ	8	Entertainment	0.			62.227
	9	Other direct expenses	63,227.]	63,227.
		Direct expense summary. Add lines 4 through Net income summary. Subtract line 10 from li				-98,086.
Pa	rt I	II Gaming. Complete if the organization a				207000
		\$15,000 on Form 990-EZ, line 6a.				
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Rev	1	Gross revenue				
es	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct E	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes % No	Yes % No	Yes % 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	Ent	ter the state(s) in which the organization condu	cts gaming activities:			
а	ls t	he organization licensed to conduct gaming ac No," explain:	tivities in each of these s	states?		Yes No
	_					
		ere any of the organization's gaming licenses re Yes," explain:			year?	Yes No
22000	0 10	L27-22			Soho	dule G (Form 990) 2022

Sch	edule G (Form 990) 2022 THE RICHMOND BALLET 54-	0049	040	Page 3
11	Does the organization conduct gaming activities with nonmembers?		Yes	☐ No
	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:			
а	The organization's facility	13a		%
	An outside facility	13b		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	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 \$			
С	If "Yes," enter name and address of the third party:			
	Name			
	Address			
16	Gaming manager information:			
	Name			
	Gaming manager compensation \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain 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 \$			
Pa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Pa	ırt III, lin	es 9, 9	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.			

Schedule G	(Form 990)	THE	RICHMOND	BALLET	54-6049848	Page 4
Part IV	(Form 990) Supplemental Infor	mation	(continued)			
			,			
-						

SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Schedule I (Form 990) 2022

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Attach to Form 990. Go to www.irs.gov/Form990 for the latest information. Open to Public Inspection

Name of the organization TH	HE RICHMOND BALLE	'T					Employer identification number $54-6049848$
	on on Grants and Assistance	· -					
criteria used to award the	uintain records to substantiate the grants or assistance?ganization's procedures for moni						
Part II Grants and Other	Assistance to Domestic Organized more than \$5,000. Part II car	zations and Domestic	Governments.	Complete if the org	anization answered "Y	es" on Form 990, Par	t IV, line 21, for any
1 (a) Name and address of or government		(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
	l tion 501(c)(3) and government or er organizations listed in the line	•	e line 1 table	<u> </u>	<u></u>	<u> </u>	

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
	110	000 016			
SCHOLARSHIP/FINANCIAL AID TO DANCE STUDENTS	118	280,916.	0.		
Part IV Supplemental Information. Provide the information req	uirod in Part Llin	o 2: Part III. column	(b): and any other ac	ditional information	
	juneu irri arti, iiri	e z, r art III, colullii	(b), and any other ac	ditional information.	
PART I, LINE 2:					
PARENTS OF STUDENTS SUBMIT FINANCIA	AL AID AP	PLICATIONS	INCLUDING	TAX RETURNS	
TO THE BUSINESS MANAGER FOR THE SC	HOOL OF R	ICHMOND BA	LLET. THE	BUSINESS	
MANAGER CONSULTS WITH THE SCHOOL D	IRECTOR A	ND AID IS	GRANTED BA	SED ON FUNDS	
AVAILABLE AND FINANCIAL NEED OF TH	E APPLICA	NT. MERIT	SCHOLARSHI	PS ARE	
AWARDED TO TALENTED STUDENTS AT TH					
AWARDS ARE NOT PAID DIRECTLY TO PAI					
	KIICIFANI	D DOI AND	DEDUCTED F.	NOTI TOTITON	
OWED.					

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

2022

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.

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

Employer identification number 54-6049848

	THE RICHMOND	BALLE	T			54-	6049	848	
Pai	t I Types of Property								
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	no	Method of oncash contrib	determin	•	s
1	Art - Works of art								
2	Art - Historical treasures								
3	Art - Fractional interests								
4	Books and publications								
5	Clothing and household goods								
6	Cars and other vehicles								
7	Boats and planes								
8	Intellectual property								
9	Securities - Publicly traded	Х	14	80,151.	FAII	R VALUE			
10	Securities - Closely held stock								
11	Securities - Partnership, LLC, or								
	trust interests								
12	Securities - Miscellaneous								
13	Qualified conservation contribution -								
	Historic structures								
14	Qualified conservation contribution - Other								
15	Real estate - Residential								
16	Real estate - Commercial								
17	Real estate - Other								
18	Collectibles								
19	Food inventory								
20	Drugs and medical supplies								
21	Taxidermy								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts								
25	Other (GALA AUCTION IT)	Х	106	66,648.	SALI	ES COMP.	ARAB	LE I	PRO
26	Other (SET PRODUCTION)	Х	1	14,750.	FAII	R VALUE	PRO	VIDI	ED
27	Other ()								
28	Other (
29	Number of Forms 8283 received by the organiz	zation during	the tax year for c	ontributions					
	for which the organization completed Form 828	33, Part V, D	onee Acknowledg	ement 29					
								Yes	No
30a	During the year, did the organization receive by	/ contributio	n any property rep	orted in Part I, lines 1 throug	h 28, tł	nat it			
	must hold for at least 3 years from the date of	the initial co	ntribution, and whi	ch isn't required to be used	for				
	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 p	oolicy that re	equires the review	of any nonstandard contribut	ions?		31		Х
32a	Does the organization hire or use third parties	or related or	ganizations to soli	cit, process, or sell noncash					
	contributions?						32a		X
b	If "Yes," describe in Part II.								
33	If the organization didn't report an amount in c	olumn (c) fo	r a type of property	for which column (a) is chec	ked,				
	describe in Part II.								

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

Schedule M (Form 990) 2022

Schedule M (Form 990) 2022

232142 09-09-22

SCHEDULE O (Form 990)

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.

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

OMB No. 1545-0047

2022
Open to Public Inspection

Name of the organization

THE RICHMOND BALLET

Employer identification number 54-6049848

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

DEDICATED TO THE EVOLUTION OF BALLET AS A VERSATILE LANGUAGE OF

MOVEMENT THAT CROSSES NATIONAL AND CULTURAL BOUNDARIES, WE SEEK TO DRAW

AN EVER BROADER RANGE OF ARTISTS, STUDENTS, AND AUDIENCES TO EXPERIENCE

THE MAGIC OF DANCE THROUGH INSPIRING PERFORMANCES, OUTSTANDING

TRAINING, AND MEANINGFUL COMMUNITY ENGAGEMENT.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

UNIVERSAL AND ETERNAL. ENGAGEMENT WITH THE ARTS CREATES SHARED

EXPERIENCES THAT UNITE PEOPLE OF DIVERSE BACKGROUNDS. RICHMOND BALLET

IS COMMITTED TO IDENTIFYING AND CARVING PATHWAYS THROUGH BARRIERS IN

ACCESS TO THESE EXPERIENCES FOR ALL MEMBERS OF THE COMMUNITY.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

CELEBRATING VOICES FROM VIRGINIA'S PAST, PRESENT, AND FUTURE.

APPROXIMATELY 50% OF PARTICIPANTS ATTEND A TITLE I SCHOOL OR A

TUITION-FREE INDEPENDENT SCHOOL PRIMARILY SERVING LOW-INCOME STUDENTS.

SINCE ITS INCEPTION, MIM REMAINS THE ONLY PROGRAM OF ITS KIND IN THE

COMMONWEALTH OF VIRGINIA. NEARLY 800 STUDENTS FROM SIXTEEN

PARTICIPATING SCHOOLS IN THE RICHMOND AREA CELEBRATED THEIR DANCE

ACHIEVEMENTS IN A CULMINATING PERFORMANCE WITH OVER 3,000 PEERS,

FAMILIES AND COMMUNITY MEMBERS IN THE AUDIENCE. THROUGH ITS RESIDENCY

PROGRAM, MIM ALSO REACHED ANOTHER 300 STUDENTS AND 1,000 COMMUNITY

MEMBERS IN ISRAEL AND PORTSMOUTH, VIRGINIA.

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

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

Schedule O (Form 990) 2022

Schedule O (Form 990) 2022 Page 2

Name of the organization

THE RICHMOND BALLET

Employer identification number 54-6049848

BEFORE FILING, THE 990 IS CIRCULATED VIA EMAIL TO ALL VOTING MEMBERS OF THE BOARD OF TRUSTEES FOR REVIEW. PAPER COPIES ARE ALSO AVAILABLE UPON REQUEST.

THE FINANCE COMMITTEE OF THE BOARD, INCLUDING EIGHT TRUSTEES IS RESPONSIBLE FOR THE FINAL REVIEW.

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

THE BALLET DISTRIBUTES A CONFLICT OF INTEREST FORM TO ALL MEMBERS OF THE
BOARD OF TRUSTEES AT THEIR ANNUAL MEETING IN MAY OF EACH YEAR. THE FORM IS
COMPLETED BY EACH TRUSTEE STATING ANY CONFLICTS AND RETURNED TO THE BALLET
IN A TIMELY MANNER. FOR EACH INTEREST DISCLOSED TO THE PRESIDENT, HE/SHE
WILL DETERMINE WHETHER TO: 1) TAKE NO ACTION 2) ASSURE FULL DISCLOSURE TO
THE BOARD OF TRUSTEES AND OTHER INDIVIDUALS COVERED BY THE POLICY 3) ASK
THE PERSON TO RECUSE FROM PARTICIPATION IN RELATED DISCUSSIONS OR DECISIONS
WITHIN THE ORGANIZATION OR 4) ASK THE PERSON TO RESIGN HIS/HER POSITION OR,
IF THE PERSON REFUSES TO RESIGN, THEY ARE SUBJECT TO REMOVAL.

FORM 990, PART VI, SECTION B, LINE 15A:

THE HEAD OF HUMAN RESOURCES FORWARDS ALL APPROPRIATE DOCUMENTATION TO THE

PRESIDENT OF THE BOARD OF TRUSTEES TO REVIEW ANY INCREASES IN COMPENSATION

FOR THE ARTISTIC DIRECTOR AND THE MANAGING DIRECTOR. IN TURN, THE ARTISTIC

DIRECTOR AND MANAGING DIRECTOR ARE RESPONSIBLE FOR APPROVING ALL OTHER KEY

EMPLOYEES' SALARIES.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION'S GOVERNING DOCUMENTS, POLICIES, AND FINANCIAL STATEMENTS

ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART XII, LINE 2C:

Scriedule O (Form 990) 2022	Page 2
Name of the organization THE RICHMOND BALLET	Employer identification number 54-6049848
THE PROCESS HAS NOT CHANGED FROM THE PRIOR	YEAR.

SCHEDULE R (Form 990)

Name of the organization

Related Organizations and Unrelated Partnerships
Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Attach to Form 990.

Department of the Treasury Internal Revenue Service

THE RICHMOND BALLET

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Schedule R (Form 990) 2022

54-6049848

Part I Identification of Disregarded Entities. Comple	te if the organization answered "Yes'	on Form 990, Part IV, line 30	3.					
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state of foreign country)	(d) Total inco	me End-of-year		(f) Direct controlling entity		9
	_							
	_							
Part II Identification of Related Tax-Exempt Organizations during the tax year.	ations. Complete if the organization	answered "Yes" on Form 990), Part IV, line 34, t	pecause it had one	or more	related tax-exer	mpt	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity		Section 512(b) controlled entity?	
				501(c)(3))			Yes	No
RICHMOND BALLET BUILDING CORPORATION -								
26-3887749, 407 E. CANAL STREET, RICHMOND, VA 23219	HOLDS PROPERTY	VIRGINIA	501(C)2					Х
	_							

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

		0 11 70 1	II) / II F 000	D 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	and the second second
Part III	Identification of Related Organizations Taxable as a Partnership.	Complete if the organization answered	"Yes" on Form 990.	Part IV, line 34, becau	se it had one or more related
Partill	organizations treated as a partnership during the tax year.	•			
	organizations treated as a partitioning during the tax year.				

(a) Name, address, and EIN of related organization	(b) Primary activity	Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes No		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General of managin partner? Yes No	(k) Percentage ownership
		- /		,							

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	Section 512(b)(13) controlled entity?	
		country						Yes	No_

Page 3

Yes No

1a

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

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

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

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

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

c Gift, grant, or capital contribution from related organization(s)				1c	Λ		
d Loans or loan guarantees to or for related organization(s)				1d		Х	
e Loans or loan guarantees by related organization(s)						X	
f Dividends from related organization(s)				1f		X	
g Sale of assets to related organization(s)				1 g		X	
h Purchase of assets from related organization(s)				1h		X	
i Exchange of assets with related organization(s)				1i		X	
j Lease of facilities, equipment, or other assets to related organization(s)							
k Lease of facilities, equipment, or other assets from related organization(s)				1k		X	
I Performance of services or membership or fundraising solicitations for related orga	Performance of services or membership or fundraising solicitations for related organization(s)						
m Performance of services or membership or fundraising solicitations by related organization(s)							
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)							
				10		Х	
p Reimbursement paid to related organization(s) for expenses						X	
q Reimbursement paid by related organization(s) for expenses				1q		X	
r Other transfer of cash or property to related organization(s)				1r		X	
s Other transfer of cash or property from related organization(s)				1s		X	
2 If the answer to any of the above is "Yes," see the instructions for information on w							
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount in	volved			
1) RICHMOND BALLET BUILDING CORPORATION	С	50,398.	FAIR VALUE				
2) RICHMOND BALLET BUILDING CORPORATION	N	0.	VALUE NOT DETERMINED				
3)							
4)							
5)							
6)							
20100 00 14 00	•		Schodulo	D /Eorn	- 000	2022	

Page 4

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec 501(c)(3) orgs.?	(g) Share of end-of-year assets	Disprotion allocat) opor- ate ions?		Gener mana partn Yes	al or Perce ging er?	(k) centage nership
			,						100		
										+	
										+	
	-									+	
										+	
										+	
									$\frac{1}{1}$	+	
								Och chile			