				Short Form	_		ON	IB No. 1545-1150
For	99	0-EZ		Return of Organization Exempt From Incor Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Co (except black lung benefit trust or private foundation)	ode			2007
			► Sp 990. Al	onsoring organizations, and controlling organizations as defined in section 512(b)(1 other organizations with gross receipts less than \$100,000 and total assets less th	3) must file Form an \$250,000 at t	he C	Эре	en to Public
	artment of nal Reveni	the Treasury ue Service		 end of the year may use this form. The organization may have to use a copy of this return to satisfy state reporting r 				nspection
A	For the	2007 calend	ar year	or tax year beginning , 2007, and ending	9			, 20
В	Check if a		Please	C Name of organization	D Em	ployer ic	denti	fication number
Н	Address c Name cha	° .	use IRS label or	I				
\square	Initial retu	ů.	print or type.	Number and street (or P.O. box, if mail is not delivered to street address) Room	m/suite E Tele	ephone (num	ber
	Terminatio		See Specific		()		
H	Amended Applicatio		Instruc- tions.	City or town, state or country, and ZIP + 4		up Exer nber		
_			organiza		Accounting r	nethod:		Cash Accrual
			a con	ppleted Schedule A (Form 990 or 990-EZ).	Other (specif	_		
I.	Websit	te: 🕨			Check ► _ is not require			
J	Organiz	ation type (c	heck or	ly one)—	Schedule B (Form 99	90, 9	990-EZ, or 990-PF).
				n is not a section 509(a)(3) supporting organization and its gross receipts a	are normally n o	ot more	thar	n \$25,000. A return is
	-		-	zation chooses to file a return, be sure to file a complete return.	(Farma 000 F7	•		
	art I			e 9 to determine gross receipts; if \$100,000 or more, file Form 990 instead of nses, and Changes in Net Assets or Fund Balances (Se			-	ructions)
		,		· •			11151	
	1		. 0	, grants, and similar amounts received.				
	3	-		and assessments		3		
	4		•	e		4		
	5a							
	b	Less: cost			١.			
ē	c	Gain or (loss	'	<u>5c</u>	t i			
Revenue	6	6 Special events and activities (attach schedule). If any amount is from gaming, check here ► □ a Gross revenue (not including \$ of contributions						
Rev	a	reported of						
_	b			hses other than fundraising expenses				
	с	Net income	e or (lo	ss) from special events and activities. Subtract line 6b from line 6	Sa	6c		
	7a			entory, less returns and allowances		_		
	b		-	ds sold		7c	١.	
	с 8			ss) from sales of inventory. Subtract line 7b from line 7a			-	
	9	Total reve	nue (ue nue. A	scribe ►	, ▶	9		
	10			r amounts paid (attach schedule)				
	11			r for members		11		
Expenses	12			mpensation, and employee benefits			-	
)en:	13			and other payments to independent contractors			-	
Ä	14			utilities, and maintenance				
	15 16			ons, postage, and shipping				
	17	Total expe	enses.	Add lines 10 through 16				
ts	18			for the year. Subtract line 17 from line 9			-	
Net Assets	19			d balances at beginning of year (from line 27, column (A)) (mus			١.	
ίA	00			reported on prior year's return)			-	
Ne	20 21	Net assets	or fun	net assets or fund balances (attach explanation)	· · · · ·		-	
Ρ	art II			If Total assets on line 25, column (B) are \$250,000 or more, fil			of	Form 990-EZ.
			(S	ee page 60 of the instructions.)	(A) Beginning c	of year		(B) End of year
22	2 Cash	n, savings, a	and inv	estments			22	
23							23	
24				▶)			24 25	
25 26							25 26	
20	Net	assets or f	und ba	Iances (line 27 of column (B) must agree with line 21) .			27	

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 10642I

Form 990-EZ (2007)

Form	990-EZ (2007)						Page	2
Pa	rt III Statement of Program Service Accom	plishments (See page 60) of the instruction	ons.)) (Exper		_
	What is the organization's primary exempt purpose?						or 501(c)(3) janizations	
Desc	cribe what was achieved in carrying out the organiza	ation's exempt purposes. In	a clear and cond	cise manner	, and	4947(a)	(1) trusts; others.)	
	cribe the services provided, the number of persons be		•	•			others.)	
28 _								
-								
-	Grants \$) If this amount inclu		here	▶ □	28a			
					200			-
29 -								
_								
(Grants \$) If this amount inclu	udes foreign grants, check	here	. 🕨 🗌	29a			
30 -								
-								
-								
	Grants \$) If this amount inclu Other program services (attach schedule)				30a			_
		udes foreign grants, check			31a			
	Fotal program service expenses. Add lines 28a th				32			-
	rt IV List of Officers, Directors, Trustees, and Key					e instru	ctions.)	-
	(A) Name and address	(B) Title and average	(C) Compensation	(D) Contribut	ions to	(E)	Expense	_
	(A) Name and address	hours per week devoted to position	(If not paid, enter -0)	employee benef deferred comp			ount and allowances	
		•						
		-						
								_
		-						
Pa	rt V Other Information (Note the statemer	nt requirement in Genera	al Instruction V.)				Yes No	,
33	Did the organization make a change in its activitie			as " attach	2			_
00					α	33		
34	Were any changes made to the organizing or gov				"			
			-			34		_
35	If the organization had income from business activities,	such as those reported on line	es 2, 6, and 7 (amor	ng others), bu	t not			
	reported on Form 990-T, attach a statement explaining	your reason for not reporting t	he income on Form	990-T.				
а	Did the organization have unrelated business gros		()			05-		
						35a 35b		_
	If "Yes," has it filed a tax return on Form 990-T fo	-				000		-
36	Was there a liquidation, dissolution, termination, or statement.			res," atta	cn a	36		
372	Enter amount of political expenditures, direct or inc			a	• •			
	Did the organization file Form 1120-POL for this					37b		
	Did the organization borrow from, or make any loa	-						
	any such loans made in a prior year and still unpa					38a		_
b	If "Yes," attach the schedule specified in the line		r the amount					
	involved		38	b		_		
39	501(c)(7) organizations. Enter:							
	Initiation fees and capital contributions included c Gross receipts, included on line 9, for public use		· · · · 39			_		
<u> </u>	aross receipts, included on line 3, for public use			u u				

Form **990-EZ** (2007)

Form	990-EZ	. (2007)			Page 3	
Par	rt V	Other Information (Note the statement require	ement in General Instructio	n V.) <i>(Continued)</i>		
40a		c)(3) organizations. Enter amount of tax imposed on th on 4911 ▶; section 4912 ▶				
b		c)(3) and (4) organizations. Did the organization engage in a or did it become aware of an excess benefit transaction			YesNo40b	
	the ye	r amount of tax imposed on organization managers or vear under sections 4912, 4955, and 4958.				
d	Enter	r amount of tax on line 40c reimbursed by the organiz	ation	•	-	
е		rganizations. At any time during the tax year, was the saction?			40e	
41		he states with which a copy of this return is filed. \blacktriangleright				
42a	The b	books are in care of ►			,	
	Locat	ted at ►		ZIP + 4 ►		
	accou	unt, or other financial	Yes No 42b			
с		t any time during the calendar year, did the organization maintain an office outside of the U.S.?				
	lf "Ye	es," enter the name of the foreign country:				
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here					
Plea		Under penalties of perjury, I declare that I have examined this retu and belief, it is true, correct, and complete. Declaration of prepa	Irn, including accompanying scheduler arer (other than officer) is based on all and the scheduler of the scheduler area of the sc	es and statements, and to the Il information of which prepar 	best of my knowledge er has any knowledge.	
Sigr Her		Signature of officer		Date		
		Type or print name and title.				
Paid Pren	arer's	Preparer's signature	sel	eck if Preparer's SSN f- ployed ►	or PTIN (See Gen. Inst. X)	
Use		Firm's name (or yours if self-employed), address, and ZIP + 4		EIN Phone no. ► ()		

Form 990-EZ (2007)

SCHEDULE A

(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 4947(a)(1) Nonexempt Charitable Trust OMB No. 1545-0047

2007

Department of the Treasury Internal Revenue Service Name of the organization Supplementary Information—(See separate instructions.)

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

Employer identification number

Part I Compensation of the Five Hig (See page 1 of the instructions.				Ind Trustees
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Total number of other employees paid over \$50,000 .				
Part II-A Compensation of the Five Hig (See page 2 of the instructions. Li				
(a) Name and address of each independent contract	,	, í	of service	(c) Compensation
Total number of others receiving over \$50,000 for professional services	•			
Part II-B Compensation of the Five High (List each contractor who perfor firms. If there are none, enter "N	med services other than p	professional ser	Other Services vices, whether inc	lividuals or
(a) Name and address of each independent contract		,	of service	(c) Compensation
Total number of other contractors receiving over \$50,000 for other services	•			
For Paperwork Reduction Act Notice, see the Instructions for I	Form 990 and Form 990-EZ	Cat. No. 11285E	Schedule A (Form	990 or 990-EZ) 2007

Sche	dule A (Form 990 or 990-EZ) 2007		Р	age 2
Pa	t III Statements About Activities (See page 2 of the instructions.)		Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities > \$ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)	1		
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.			
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)			
а	Sale, exchange, or leasing of property?	2a		
b	Lending of money or other extension of credit?	2b		
с	Furnishing of goods, services, or facilities?	2c		
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d		
е	Transfer of any part of its income or assets?	2e		
3a	Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.)	3a		
b	Did the organization have a section 403(b) annuity plan for its employees?	3b		
с	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement	3c		
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services? .	3d		
4a	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g	4a		
b	Did the organization make any taxable distributions under section 4966?	4b		
с	Did the organization make a distribution to a donor, donor advisor, or related person?	4c		l
d	Enter the total number of donor advised funds owned at the end of the tax year			
е	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year			
f	Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts			
g	Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year .			

Ра	rt I\	Reason for Non-Private Foundation Status (See pages 4 through 8 of the instructions.)
l cei	tify 1	hat the organization is not a private foundation because it is: (Please check only ONE applicable box.)
5		A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
6		A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
7		A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
8		A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
9		A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ►
10		An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the Support Schedule in Part IV-A.)
11a		An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)
11b		A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)
12		An organization that normally receives: (1) more than 33% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no more than 33% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)
13		An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization:
		Type I Type II Type III-Functionally Integrated Type III-Other

Provide the following info	rmation about th	e supported organizat	ions. (See pag	e 8 of the instru	ctions.)
(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
Total				🕨	

14 🗌 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 8 of the instructions.)

Schedule A (Form 990 or 990-EZ) 2007 Page 4 Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting. Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting. Calendar year (or fiscal year beginning in) (a) 2006 (b) 2005 (c) 2004 (d) 2003 (e) Total 15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.). 16 Membership fees received Gross receipts from admissions, merchandise sold or services performed, or furnishing of 17 facilities in any activity that is related to the organization's charitable, etc., purpose . 18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975 19 Net income from unrelated business activities not included in line 18. . . 20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf 21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge 22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets 23 Total of lines 15 through 22 Line 23 minus line 17 24 25 Enter 1% of line 23 26a 26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2003 through 2006 exceeded the 26b amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts > 26c d Add: Amounts from column (e) for lines: 18 _____ 19 ____ 26d 22 _____ 26b _____ Public support (line 26c minus line 26d total) . 🕨 26e е Public support percentage (line 26e (numerator) divided by line 26c (denominator)) f 26f % Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified 27 person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year:

b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the **larger** of **(1)** the amount on line 25 for the year or **(2)** \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) **Do not file this list with your return.** After computing the difference between the amount received and the larger amount described in **(1)** or **(2)**, enter the sum of these differences (the excess amounts) for each year:

(2006)	 (2005)	 	003)

С	Add: Amounts from column (e) for lines: 15 16		
	17 20 21	27c	
d	Add: Line 27a total and line 27b total	27d	
е	Public support (line 27c total minus line 27d total).	27e	
	Total support for section 509(a)(2) test: Enter amount from line 23, column (e)		
	Public support percentage (line 27e (numerator) divided by line 27f (denominator))	27g	%
	Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)).	27h	%

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2003 through 2006, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

Sche	dule A (Form 990 or 990-EZ) 2007		P	age 5
Pa	rt VPrivate School Questionnaire (See page 9 of the instructions.)(To be completed ONLY by schools that checked the box on line 6 in Part IV)			
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	Yes	No
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31		
32 a b	Does the organization maintain the following: Records indicating the racial composition of the student body, faculty, and administrative staff?	32a 32b		
c d	basis?	32c 32d		
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			
33	Does the organization discriminate by race in any way with respect to:			
а	Students' rights or privileges?	33a		
b	Admissions policies?	33b		
с	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
е	Educational policies?	33e		
f	Use of facilities?	33f		
g	Athletic programs?	33g		
h	Other extracurricular activities?	33h		
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	Has the organization's right to such aid ever been revoked or suspended?	34b		
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 11 of the instructions.) (To be completed ONLY by an eligible organization that filed Form 5768)

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

	Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for all electing organizations
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		
37	Total lobbying expenditures to influence a legislative body (direct lobbying).	37		
38	Total lobbying expenditures (add lines 36 and 37)	38		
39	Other exempt purpose expenditures	39		
40	Total exempt purpose expenditures (add lines 38 and 39)	40		
41	Lobbying nontaxable amount. Enter the amount from the following table-			
	If the amount on line 40 is— The lobbying nontaxable amount is—			
	Not over \$500,000			
	Over \$500,000 but not over \$1,000,000 . \$100,000 plus 15% of the excess over \$500,000			
	Over \$1,000,000 but not over \$1,500,000 . \$175,000 plus 10% of the excess over \$1,000,000	41		
	Over \$1,500,000 but not over \$17,000,000. \$225,000 plus 5% of the excess over \$1,500,000			
	Over \$17,000,000			
42	Grassroots nontaxable amount (enter 25% of line 41).	42		
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36.	43		
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44		
	Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.			

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 13 of the instructions.)

		Lob	bying Expenditu	res During 4-Ye	ar Avera	agin	g Pe	riod
	Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2006	(c) 2005	•	d) 004		(e) Total
45	Lobbying nontaxable amount							
46	Lobbying ceiling amount (150% of line 45(e))							
47	Total lobbying expenditures							
48	Grassroots nontaxable amount							
49	Grassroots ceiling amount (150% of line 48(e))							
50	Grassroots lobbying expenditures							
Ра	rt VI-B Lobbying Activity by Nonelec (For reporting only by organiza			Part VI-A) (See	page 1	14 c	of th	e instructions.)
	ng the year, did the organization attempt to influ mpt to influence public opinion on a legislative m	,	0	, 0	ny Y	es	No	Amount
a b c	Volunteers Paid staff or management (Include compensation Media advertisements	on in expenses r	eported on lines	•				
d e f	Mailings to members, legislators, or the public Publications, or published or broadcast statem Grants to other organizations for lobbying purp	ents			: _			
g h	Direct contact with legislators, their staffs, gover Rallies, demonstrations, seminars, conventions	ernment officials,	or a legislative b	ody	. –			

h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i	Total lobbying expenditures (Add lines c through h.)			
	If "Yes" to any of the above, also attach a statement giving a detailed description of the lob	bvin	na activ	ities.

501	(c) of the Code (oth	ner than section 50	1(c)(3) organizations) or in sect	ion 527, relating to political organizatior	ns?		
a Tra	nsfers from the rep	orting organization	to a noncharitable exempt org	anization of:		Yes	No
(i)	Cash				51a(i)		
(ii)	Other assets .				a(ii)		
b Oth	ner transactions:						
(i)	Sales or exchange	es of assets with a	noncharitable exempt organiza	ation	b(i)		
(ii)	Purchases of asse	ets from a nonchar	itable exempt organization .		b(ii)		
(iii)	Rental of facilities	, equipment, or oth	ner assets		b(iii)		
(iv)					b(iv)		
					b(v)		
			ship or fundraising solicitations		b(vi)		
			sts, other assets, or paid emplo		с		
d If th goo	ne answer to any of ods, other assets, o	the above is "Yes," r services given by	complete the following schedule the reporting organization. If	e. Column (b) should always show the fai the organization received less than fair ds, other assets, or services received:	r market market v	value /alue	of the in any
(a) Line no.	(b) Amount involved	Name of non	(c) haritable exempt organization	(d) Description of transfers, transactions, and s	sharing arr	angem	onte
Line no.	Amount involved	Name of Hono	inantable exempt organization		shanny an	angern	
des	scribed in section 50 Yes," complete the	01(c) of the Code (other than section 501(c)(3)) or	ne or more tax-exempt organizations in section 527? ►	Yes	; [] No
	(a) Name of organiz	ation	Type of organization	(c) Description of relationsh	ain		
·							
				Schedule A (For	rm 990 or	990-E2	Z) 2007

51

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 14 of the instructions.)

Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section

Page 7

Schedule - To accompany form 990-EZ, Part I, Line 10

The Opera House Players base of operations is a historic structure built in 1903. Part of the charter for the group is to bring the experience of theater and the arts to the area. This year the Opera House Players participated in two fund drives for the Elkader Opera House. As of the end of 2007, we had donated \$3000 toward a foundation to maintain the Elkader Opera House, and \$480 toward the renovation of the Park adjoining the building.

Schedule for Line 16 Other Exp

1/1/2007 Through 12/31/2007

Category Description	1/1/2007- 12/31/2007
	12/01/2001
XPENSES	
Costumes	4,596.0
Donation Exp	3,480.00
Improvements	5,786.66
Insurance	434.00
Lights Exp	235.8
Planning	117.7
Postage	815.9
Repairs	167.1
Tickets	-10.0
Videoexp	704.1
TOTAL EXPENSES	16,327.5
VERALL TOTAL	-16,327.5

3/3/2008

Schedule - To accompany form 990-EZ, Part III, Line 31

In addition to the productions listed on form 990-EZ Part III lines 28-30: In May, the group hosted the Old Creamery Theatre for a production of "Dates with a Nut", which was attended by approximately 422 people. The Opera House Players sponsored this event at a loss, so that area residents could enjoy a theatrical experience by a professional group.

In December, the OHP put on a special Christmas production. The production of "The Best Christmas Pageant Ever" involved 46 cast members, predominately children, and was attended by approximately 1134 people. Community theater and the arts were promoted.

Schedule - To accompany form 990-EZ, Part V, Line 35

The Opera House Players is a community theater group which produces two to four shows each year in the restored 1903 Elkader Opera House and occasional other venues. The productions usually are a musical in the fall of the year and a smaller production in the spring. This organization also supports children's theater in the summer on a frequent basis as well as an annual community Christmas Fantasy Concert in early December. The group will frequently have special productions for area school children and invite them to attend at no or little cost. This organization has also arranged to have touring theater groups appear at the Opera House. Opera House Players is in existence solely for the purpose of promoting the arts and cultural activity in northeast Iowa and southwest Wisconsin by producing shows involving local amateur performers and exposing the community to musical theater as well as comedies and dramatic performances. We feel these activities are substantially related to the purpose that is the basis for the organization's exemption. Therefore, we have not filed Form 990-T.

Banking Summary

1/1/2007 Through 12/31/2007

Category Description	1/1/2007- 12/31/2007
INCOME	
Afoot.i	
Patron	1,726.33
tickets	20.00
TOTAL Afoot.i	1,746.33
Baker.I	
Patron	1,733.34
t-shirts	458.50
tickets	13,702.60
video	77.00
TOTAL Baker.I	15,971.44
Best.I	
Patron	2,725.33
t-shirts	507.50
tickets	10,368.00
TOTAL Best.I	13,600.83
Costume_Rental	2,026.00
Donation	24.00
GiftCertificate	340.00
Interest	2,804.81
Lighting Fund	625.00
Members	9,530.00
Noisesl	0,000.00
tickets	8,455.00
tshirt	169.20
TOTAL NoisesI	8,624.20
Resalel	100.00
Special.inc	100.00
patrons	200.00
Tickets	5,787.00
video	100.00
	6,087.00
TOTAL Special.inc	
Video TOTAL INCOME	53.00 61,532.61
TOTAL INCOME	01,332.01
EXPENSES	
Uncategorized	0.00
Afoot.E	
programs	250.00
Royalties	2,305.00
scripts	97.66
TOTAL Afoot.E	2,652.66
AnniewE	
tickets	30.00
TOTAL AnniewE	30.00
Baker.E	
Ads	90.00
Building	1,271.00
costumes	465.59
Deposit	200.00
	200.00

3/4/2008

Banking Summary

1/1/2007 Through 12/31/2007

Category Description	1/1/2007- 12/31/2007
Director	750.00
Mailing	160.36
Makeup	92.06
production	1,355.00
programs	771.69
publicity	748.16
Royalties	1,774.11
set	1,169.05
Shipping	24.99
Strike	114.43
t-shirts	570.46
tickets	75.00
TOTAL Baker.E	9,631.90
Best.E	
Ads	250.00
Building	867.00
Director	1,000.00
Production	440.00
programs	581.73
publicity	39.41
Royalties	1,052.00
Scripts	226.50
Set	291.04
Stike	170.23
t-shirts	537.45
tickets	110.00
TOTAL Best.E	5,565.36
ChristmasE	
publicity	125.00
TOTAL ChristmasE	125.00
Costumes	4,596.05
Donation Exp	3,480.00
Improvements	5,786.66
Insurance	434.00
Lights Exp	235.86
MCT	
Copies	74.24
TOTAL MCT	74.24
NoisesE	
Ads	380.90
Building	969.50
Costumes	238.82
Director	750.00
Makeup	102.37
Production	850.00
Programs	412.67
Props	50.93
Publicity	407.06
Royalties	260.00
Scripts	16.06
set	1,330.38

3/4/2008

Banking Summary

1/1/2007 Through 12/31/2007

Category Description	1/1/2007- 12/31/2007
Strike	80.87
tickets	105.00
tshirts	197.91
TOTAL NoisesE	6,152.47
OHP Trips	-1,470.00
Planning	117.71
Postage	815.96
Repairs	167.15
Special	
Building	3,172.00
housing	250.00
Publicity	459.58
Royalties	3,000.00
TOTAL Special	6,881.58
Supplies	16.04
Tickets	-10.00
Videoexp	704.16
TOTAL EXPENSES	45,986.80

OVERALL TOTAL

15,545.81