Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public

A	For the	2022 calend	dar year, or tax year beginning	01/01/2022 and	ending	12	2/31/2022				
В	Check if	applicable:	C Name of organization WILLIAM	S PROJECT			D Emplo	oyer identification number			
	Address	change	Doing business as The William	s Project				47-3954408			
	Name ch	nange	Number and street (or P.O. box if	mail is not delivered to street address)	F	Room/suite	E Teleph	none number			
	Initial ret	urn	3411 20th Avenue S			206-494-5364					
	Final retu	rn/terminated	City or town, state or province, co	ountry, and ZIP or foreign postal code							
	Amende	d return	Seattle, WA 98144				G Gross	receipts \$ 343,526			
	Applicati	on pending	F Name and address of principal offi	cer: Ellen Abram		H(a) Is th	is a group return fo	or subordinates? Yes No			
			3411 20th Avenue S, Seattle, V	NA 98144		H(b) Are	all subordinat	all subordinates included? Yes No			
ī	Tax-exe	mpt status:	✓ 501(c)(3)) (insert no.)	527	If "No,"	attach a list. Se	ch a list. See instructions.			
J	Website	: https://w	ww.thewilliamsproject.org/			H(c) Gro	oup exemption	number			
K	Form of o	organization:	Corporation Trust Associat	tion Other LYe	ear of form	ation: 201	5 M State	of legal domicile: WA			
Р	art I	Summa	ry								
	1			on or most significant activities	: Profes	sional thea	tre presente	d to the general public			
e											
Activities & Governance											
/err	2	Check this	box [] if the organization di	scontinued its operations or dis	sposed o	of more tha	n 25% of it	s net assets.			
9	3	Number of	voting members of the gover	rning body (Part VI, line 1a)			. 3	5			
જ	4	Number of	independent voting member	s of the governing body (Part V	I, line 1b)	. 4	4			
ijes	5	Total numb	oer of individuals employed in	ı calendar year 2022 (Part V, lin	ie 2a)		. 5	20			
Ę	6	Total numb	oer of volunteers (estimate if r	necessary)			. 6	0			
Ac	7a	Total unrel	ated business revenue from F	Part VIII, column (C), line 12 .			. 7a	0			
	b	Net unrelat	ted business taxable income	. 7b	0						
						Prio	Year	Current Year			
Φ	8	Contributio	ons and grants (Part VIII, line	1h)			247,433	270,339			
Revenue	9	Program se	ervice revenue (Part VIII, line 2	29,350	70,185						
eve	10	Investment	t income (Part VIII, column (A)	0	0						
Œ	11	Other reve	nue (Part VIII, column (A), line			-6,393	1,115				
	12			nust equal Part VIII, column (A), I			270,390	341,639			
	13	Grants and	d similar amounts paid (Part I)	K, column (A), lines 1-3)			0	0			
	14	Benefits pa	aid to or for members (Part IX	, column (A), line 4)			0	0			
Ø	15			penefits (Part IX, column (A), lines			99,956	188,529			
Expenses	16a	Profession	al fundraising fees (Part IX, co	olumn (A), line 11e)			0	0			
cbe	b	Total fundr	raising expenses (Part IX, colu	umn (D), line 25)	26,952						
ш	17	Other expe	enses (Part IX, column (A), line	es 11a-11d, 11f-24e)			102,283	192,374			
	18	Total exper	nses. Add lines 13-17 (must	equal Part IX, column (A), line 2	25) .		202,239				
	19	Revenue le	ess expenses. Subtract line 1	8 from line 12			68,151	380,903 -39,264			
Net Assets or Fund Balances						Beginning of	Current Year	End of Year			
sets	20	Total asset	ts (Part X, line 16)				184,909	145,675			
t Ass	21	Total liabili	ities (Part X, line 26)				75	105			
울	22	Net assets	or fund balances. Subtract li	ne 21 from line 20			184,834	145,570			
	art II	Signatu	re Block								
				eturn, including accompanying schedule				my knowledge and belief, it is			
tru	e, correct	t, and complete	e. Declaration of preparer (other than	officer) is based on all information of wh	nich prepar	er has any kn	owledge.				
Si	_	Signature of	officer				Date				
He	ere	Ryan Purce	ell, Artistic Director & Board Pr	esident							
		Type or print	name and title								
Pa	id	Print/Type	e preparer's name	Preparer's signature	[Date	Check [if PTIN			
	nu epare	David Sc	hor				self-emp	P01873145			
	epare se Onl	Lives's see	ne NWAFM PLLC			1	Firm's EIN	82-4105877			
_		Firm's add	dress PO Box 77033, Seattle, V	VA 98177			Phone no.	206-789-8484			
Ma	v the IF	RS discuss t		hown above? See instructions				. ✓ Yes □ No			

Part			Part III	\square
1	Briefly describe the organization's missi			<u>· · · · · · · · · · · · · · · · · · · </u>
-	Professional theatre presented to the gen	oral public		
2	Did the organization undertake any sign			
	prior Form 990 or 990-EZ?		· · · · · · · · · · · L Yes	✓ No
_	If "Yes," describe these new services or		have the appaleate and more support	
3	Did the organization cease conducting services?			□ Na
	If "Yes," describe these changes on Sch		· · · · · · · · · · · · · · · · · · ·	✓ No
4	· · · · · · · · · · · · · · · · · · ·		its three largest program services, as mea	seured by
•			ort the amount of grants and allocations	
	the total expenses, and revenue, if any,			,
4a	(Code:) (Expenses \$	252,850 including grants of \$	0) (Revenue \$ 70,18	35)
	In 2022, The Williams Project began its 20	22-2023 season by co-producing Jam	es Baldwin's The Amen Corner in November	2022
	at Seattle's Langston Hughes Performing	Arts Institute, in collaboration with LA	NGSTON. The production employed more th	an 30
	artists and served more than 2,100 audier	ice members.		
4b	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
	(Εσασί) (Ελροποσό ψ	g grante or \$		/
4d	Other program services (Describe on Sc	hedule ())		
- u	(Expenses \$ 0 including g		 ue \$ 0)	
4e	Total program service expenses	252,850	V /	

Form 90	00 (2022)			Page 3
Part				age C
			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	,	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	~	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If</i> "Yes," complete Schedule C, Part I	3		~
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		٧
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		>
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		٧
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		~
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," complete Schedule D, Part III	8		>
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? <i>If</i> "Yes," <i>complete Schedule D, Part IV</i>	9		٧
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If</i> "Yes," <i>complete Schedule D, Part V</i>	10		>
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		>
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		>
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		>
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	,	
e f	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11e		ンン
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		\ \ \
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		· ·
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		~
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		~
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate			

Part I	V Checklist of Required Schedules (continued)		-	
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		_
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		_
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a			
		24a		~
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year	24b		
C	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I			
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	25b		~
20	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		,
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee 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 III	27		,
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L,	21		
	Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	28a		_
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		~
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		_
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		~
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		~
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		~
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		,
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		~
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		~
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		~
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	25h		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	35b		
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		~
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
00	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		~
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	_	
Part '	· · · · · · · · · · · · · · · · · · ·			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 34			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	-		
·	reportable gaming (gambling) with backup withholding rules for reportable payments to vehdors and	10		

Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 2a			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	~	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		~
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O .	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
_	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		~
b	If "Yes," enter the name of the foreign country			
- -	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	-		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		V
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5b 5c		· ·
c 6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	30		
Ju	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		~
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		•
7	Organizations that may receive deductible contributions under section 170(c).	OD		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	70		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
_	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	0-		
a b	Did the sponsoring organization make any taxable distributions under section 4966?	9a 9b		
10	Section 501(c)(7) organizations. Enter:	90		
a	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b	1		
11	Section 501(c)(12) organizations. Enter:	1		
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	-		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	10-		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		~
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O .	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	1		
	excess parachute payment(s) during the year?	15		~
16	If "Yes," see the instructions and file Form 4720, Schedule N.	40		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		/
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
	If "Yes," complete Form 6069.			

Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year . . . 1a 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. Enter the number of voting members included on line 1a, above, who are independent . 1b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 1 Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, trustees, or key employees to a management company or other person? . 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a 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 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No **10a** Did the organization have local chapters, branches, or affiliates? 10a If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 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. **12a** Did the organization have a written conflict of interest policy? *If "No," go to line 13* 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 13 Did the organization have a written document retention and destruction policy? 14 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a 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 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 Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed None 17 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) 18 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Other (explain on Schedule O) Own website Another's website ✓ Upon request Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 19 and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records. Ellen Abram, (206)494-5364

Part VI

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.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

☐ Check this box if heither the organization no	r any relate	a org	anız	atic	n c	ompe	ensa	ited any current (officer, director,	or trustee.
				(0	C)					
(A)	(B)				ition			(D)	(E)	(F)
Name and title	Average hours per week (list any hours for related organizations below	box, office or directo	unles	ss pe	rson	e than of the is or trus Highest compensated employee	n an	Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	Estimated amount of other compensation from the organization and related organizations
Duna Duranii	dotted line)	tee	ıstee			ensated				
Ryan Purcell	20.00			,	,			05.000		
- Artistic Director & Board President	0.00			·	-			25,000	0	0
Ellen Abram - Executive Director	20.00 0.00			~	~			25,000	0	0
Dedra Woods	20.00									
- Producing Director	0.00				~			25,000	0	0
Reggie White	4.00									
- Director	0.00	~						7,600	0	0
Vanessa Resler	1.00									
- Treasurer	0.00	~		~				0	0	0
Jennifer Brandon	1.00									
- Director	0.00	~						0	0	0
Stacy La	1.00									
- Director	0.00	~						0	0	0

Part	VII Section A. Officers, Directors, 1	rustees,	Key I	Emp	oloy	/ee	s, an	d F	lighest Compe	nsated Emplo	yees (continued)
	(A) Name and title		(C) Position (do not check more than box, unless person is bot officer and a director/trus						(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
		per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former		organizations (W-2/ 1099-MISC/ 1099-NEC)	l '
			_								
			-								
			-								
			-								
			-								
			-								
1b c	Subtotal	VII. Sectio	 on A						82,600	0	0
d	Total (add lines 1b and 1c)								82,600	0	0
2	Total number of individuals (including reportable compensation from the organi		limite	d t	o t	hos	e lis	ted	above) who re	eceived more	than \$100,000 of
											Yes No
3	Did the organization list any former of employee on line 1a? <i>If "Yes," complete</i> 3							-	loyee, or highes 		3 1
4	For any individual listed on line 1a, is the organization and related organizations	greater th	an \$1	50,	000	? /:	f "Ye	s,"			
5	individual	r accrue co	ompei	nsat	tion	froi	m any	/ un			4 🗸
Cooti	for services rendered to the organization	? If "Yes," c	compl	ete	Sch	edu	ıle J i	for s	such person .		5 /
1	on B. Independent Contractors Complete this table for your five high	nest comp	ensate	ed	inde	per	ndent	CC	ontractors that r	received more	than \$100,000 of
	compensation from the organization. Repo	ort compen	satior	n for	the	ca	lenda	r ye	ar ending with or	within the organ	nization's tax year.
	(A) Name and business add	ress							(B) Description of serv	vices	(C) Compensation
None											
2	Total number of independent contractor received more than \$100,000 of compens						ed to	th	ose listed abov	e) who	

1 01111 330 (202	-)
Part VIII	Statement of Revenue

		Check if Schedule	Осо	ntains a re	spon	se or note to an	ıy line in this Pa	rt VIII....		🗌
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
ທ໌ ທ	1a	Federated campaig	ns .		1a	0				
ᇎᆸ	b	Membership dues			1b	0				
Contributions, Gifts, Grants, and Other Similar Amounts	C	Fundraising events			1c	0				
S, a	_	Related organization			1d	0				
ᄩ	d									
<u> </u>	e	Government grants			1e	106,026				
Sig	f	All other contribution								
iğ e		and similar amounts no			1f	164,313				
흔된	g	Noncash contribution								
ב פ		lines 1a-1f			1g	\$ 0				
a ပ	h	Total. Add lines 1a-	-1f .				270,339			
						Business Code				
e	2a	Theatrical Performan	nce			711110	70,185	70,185	0	0
اہ کے	b						10,100	10,100		
yram Ser Revenue	c									
E ē	_									
Re Ja	d									
Program Service Revenue	e	A II - +I								
ਕ ∣	f	All other program se					0	0	0	0
	g	Total. Add lines 2a-					70,185			
	3	Investment income								
		other similar amoun	•							
	4	Income from investr	nent d	of tax-exem	npt bo	nd proceeds				
	5	Royalties								
				(i) Rea	l	(ii) Personal				
	6a	Gross rents	6a							
	b	Less: rental expenses	6b							
	С	Rental income or (loss)			0	0				
	d	Net rental income o								
	7a	Gross amount from	(.55	(i) Securit		(ii) Other				
	74	sales of assets		(7		()				
		other than inventory	7a							
	b	Less: cost or other basis	1 a							
Revenue	b	and sales expenses .	71-							
Ver		•	7b			_				
Š.	C	Gain or (loss)	7c		0	0				
		Net gain or (loss)								
Other	8a	Gross income from		ndraising						
0		events (not including		0						
		of contributions rep		d on line						
		1c). See Part IV, line	e 18		8a					
	b	Less: direct expens	es .		8b					
	С	Net income or (loss)) from	fundraisin	g eve	nts				
	9a	Gross income f								
		activities. See Part I			9a					
	b	Less: direct expens			9b					
		Net income or (loss)								
		Gross sales of in			LIVILIE	55				
	ıva	returns and allowan		ory, less	10-	0.000				
					10a	3,002				
		Less: cost of goods			10b	1,887				
	С	Net income or (loss)) trom	sales of in	ivento		1,115	1,115	0	0
Sn						Business Code				
ē e	11a									
an	b									
Miscellaneous Revenue	С									
<u>8</u>	d	All other revenue								
Σ	е	Total. Add lines 11a	a–11d	1			0			
	12	Total revenue. See					341,639	71,300	0	0

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

	Check if Schedule O contains a response or note to any line in this Part IX								
Do no	et include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	_ (D)				
	o, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses				
1	Grants and other assistance to domestic organizations		·		·				
	and domestic governments. See Part IV, line 21 .	0	0						
2	Grants and other assistance to domestic individuals. See Part IV, line 22	0	0						
3	Grants and other assistance to foreign organizations, foreign governments, and	·							
	foreign individuals. See Part IV, lines 15 and 16	0	0						
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	75,000	33,334	20,833	20,833				
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0				
7	Other salaries and wages	74,727	31,318	43,409	0				
8	Pension plan accruals and contributions (include	,. = .	0.,0.0	10,100					
	section 401(k) and 403(b) employer contributions)	3,535	3,535	0	0				
9	Other employee benefits	18,588	10,700	7,888	0				
10	Payroll taxes	16,679	8.030	7,055	1,594				
11	Fees for services (nonemployees):	10,079	0,030	7,055	1,554				
a	Management	0	0	0	0				
b	Legal	0	0	0	0				
C	Accounting	780	0	780	0				
d	Lobbying	0	0	0	0				
e	Professional fundraising services. See Part IV, line 17	0	0	0	0				
f	Investment management fees	0	0	0	0				
g	Other. (If line 11g amount exceeds 10% of line 25, column	<u> </u>	0	•					
Ū	(A), amount, list line 11g expenses on Schedule O.) .	49,150	49,150	0	0				
12	Advertising and promotion	17,496	17,496	0	0				
13	Office expenses	7,743	861	3,580	3,302				
14	Information technology	13,636	587	13,049	0				
15	Royalties	0	0	0	0				
16	Occupancy	62,199	60,484	1,715	0				
17	Travel	11,075	11,008	67	0				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	11,073	11,000	07					
19	Conferences, conventions, and meetings .								
20	Interest								
21	Payments to affiliates								
22	Depreciation, depletion, and amortization .								
23	Insurance	1,901	0	1,901	0				
24	Other expenses. Itemize expenses not covered								
	above. (List miscellaneous expenses on line 24e. If								
	line 24e amount exceeds 10% of line 25, column								
	(A), amount, list line 24e expenses on Schedule O.)								
а	Production Costs	24,882	24,882	0	0				
b	Catering & Food	2,868	1,417	238	1,213				
С	Dues	478	48	430					
d	Taxes & Licenses	134	0	124	10				
е	All other expenses	32	0	32	0				
25	Total functional expenses. Add lines 1 through 24e	380,903	252,850	101,101	26,952				
26	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)								
					Form 990 (2022)				

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Pa	rt X		
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	184,594	1	116,334
	2	Savings and temporary cash investments	15	2	15
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	300	4	0
	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	0	5	0
	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)	0	6	0
Assets	7	Notes and loans receivable, net	0	7	0
	8	Inventories for sale or use	0	8	0
	9	Prepaid expenses and deferred charges	0	9	0
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b		10c	
	11	Investments—publicly traded securities	0		0
	12	Investments—other securities. See Part IV, line 11	0	12	0
	13	Investments—program-related. See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets. See Part IV, line 11	0	15	29,326
	16	Total assets. Add lines 1 through 15 (must equal line 33)	184,909	16	145,675
	17	Accounts payable and accrued expenses	75	17	105
	18	Grants payable	0	18	
	19	Deferred revenue	0	19	
	20	Tax-exempt bond liabilities	0	20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .	0	21	
es	22	Loans and other payables to any current or former officer, director,			
≣		trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities		controlled entity or family member of any of these persons	0	22	
_	23	Secured mortgages and notes payable to unrelated third parties	0	23	
	24	Unsecured notes and loans payable to unrelated third parties	0	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 of Schedule D			
				25	
	26	Total liabilities. Add lines 17 through 25	75	26	105
Ses		Organizations that follow FASB ASC 958, check here value and complete lines 27, 28, 32, and 33.			
au	07		404.004	07	445 570
Bal	27		181,334		145,570
둳	28	Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here	3,500	28	0
Ξ		and complete lines 29 through 33.			
Net Assets or Fund Balances	29			29	
ts	30	Capital stock or trust principal, or current funds		30	
SSe	31	Retained earnings, endowment, accumulated income, or other funds .		31	
ţ	32	Total net assets or fund balances	184,834		145,570
Se	33	Total liabilities and net assets/fund balances	184,909		145,675
		Total habilition and not according balances	104,303		173,073

Part	XI Reconciliation of Net Assets		
	Check if Schedule O contains a response or note to any line in this Part XI		🗆
1	Total revenue (must equal Part VIII, column (A), line 12)		341,639
2	Total expenses (must equal Part IX, column (A), line 25)		380,903
3	Revenue less expenses. Subtract line 2 from line 1		-39,264
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4		184,834
5	Net unrealized gains (losses) on investments		0
6	Donated services and use of facilities		0
7	Investment expenses		0
8	Prior period adjustments		0
9	Other changes in net assets or fund balances (explain on Schedule O)		0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line		
	32, column (B))		145,570
Part	XII Financial Statements and Reporting		
	Check if Schedule O contains a response or note to any line in this Part XII		<u> </u>
			Yes No
1	Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain or	_	
	Schedule O.	'	
22	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	V
Zu	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	V
-	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a	a	
	separate basis, consolidated basis, or both:		
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of	of	
	the audit, review, or compilation of its financial statements and selection of an independent accountant? .	2c	
	If the organization changed either its oversight process or selection process during the tax year, explain or	n 📉	
	Schedule O.		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the	e	
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	3a	'
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits.	3b	000

Form **990** (2022)

SCHEDULE A (Form 990)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

OMB No. 1545-0047

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-E2.

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

Open to Public Inspection

Employer identification number Name of the organization **WILLIAMS PROJECT** 47-3954408 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).) 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.) ☐ 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.) 8 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 university: An organization that normally receives (1) more than 331/3% 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 33½% 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). 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 12a, Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving а 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. 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) d 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 III, 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). (iii) Type of organization (vi) Amount of (i) Name of supported organization (ii) EIN (iv) Is the organization (v) Amount of monetary (described on lines 1-10 listed in your governing support (see other support (see above (see instructions)) document? instructions) instructions) Yes No (A) (B) (C) (D)

(E)
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.) Section A. Public Support Calendar 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.") . . Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge **Total.** Add lines 1 through 3 . . . 4 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) **Public support.** Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2018 **(b)** 2019 (c) 2020 (d) 2021 (e) 2022 (f) Total 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Net income from unrelated business 9 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.) **Total support.** Add lines 7 through 10 11 Gross receipts from related activities, etc. (see instructions) 12 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage 14 Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f)) % Public support percentage from 2021 Schedule A, Part II, line 14 15 331/3% support test - 2022. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this 331/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check 17a 10%-facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see 18

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.)

Secti	on A. Public Support						
Calen	dar 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.")	129,614	162,938	165,953	240,791	270,340	969,636
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose	24,714	25,022	0	29,350	70,185	149,271
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513					3,002	3,002
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5	154,328	187,960	165,953	270,141	343,527	1,121,909
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .	34,310	44,455	18,522	61,021	38,824	197,132
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						
	Add lines 7a and 7b	34,310	44,455	18,522	61,021	38,824	197,132
8	Public support. (Subtract line 7c from line 6.)						004
Socti	on B. Total Support						924,777
	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6	154,328	187,960	165,953	270,141	343,527	1,121,909
10a	Gross income from interest, dividends,	134,320	107,900	105,955	270,141	343,321	1,121,909
IVa	payments received on securities loans, rents,						
	royalties, and income from similar sources .						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included on line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	154,328	187,960	165,953	270,141	343,527	1,121,909
14	First 5 years. If the Form 990 is for the	•	•		,		n 501(c)(3)
	organization, check this box and stop he						
	on C. Computation of Public Suppor			10 1 (0)		145	
15	Public support percentage for 2022 (line 8		•			15	82.43 %
16 Sooti	Public support percentage from 2021 Schon D. Computation of Investment Inc				<u></u>	16	75.06 %
17	Investment income percentage for 2022 (v lino 12 colu	mn (fl)	17	0.0%
18	Investment income percentage for 2022 (-		18	0 %
19a	33 ¹ / ₃ % support tests—2022. If the organ						
130	17 is not more than 33 ¹ / ₃ %, check this box						
b	331/3% support tests—2021. If the organiz	_	=	-		-	_
~	line 18 is not more than 33 ¹ / ₃ %, check this l						
20	Private foundation. If the organization di	_	_	· ·		-	_

Supporting Organizations Part IV

(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.)

Se

Jecu	on A. All Supporting Organizations		Yes	No
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.	1	163	NO
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).	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.	3a		
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.	3b		
С	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.	3c		
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.	4a		
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.	4b		
С	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.	4c		
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).	5a		
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?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
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			
7	benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI . Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part Lef School Lef Legem 200)	6		
8	with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990). Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).	8		
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 .	9a		
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 .	9b		
С	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 .	9c		
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)? <i>If "Yes," answer line 10b below.</i>	10a		
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.)

10b

Schedule A (Form 990) 2022 Page 5 Part IV **Supporting Organizations** (continued) Yes No Has the organization accepted a gift or contribution from any of the following persons? a 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 **b** A family member of a person described on line 11a above? 11b c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI. 11c Section B. Type I Supporting Organizations Yes No 1 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 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? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization. 2 Section C. Type II Supporting Organizations Yes No Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). 1 Section 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 supported organizations played in this regard. 3 Section E. Type III Functionally Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). The organization satisfied the Activities Test. *Complete line 2 below.* The organization is the parent of each of its supported organizations. *Complete line 3 below.* С The organization supported a governmental entity. Describe in **Part VI** how you supported a governmental entity (see instructions). 2 Activities Test. Answer lines 2a and 2b below. 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 Parent of Supported Organizations. Answer lines 3a and 3b below. a 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

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

				. ago -
Part	Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jani	izations	
1	\Box Check here if the organization satisfied the Integral Part Test as a qualifying			
	instructions. All other Type III non-functionally integrated supporting organ	nizat	ions must complete Sect	
Sect	tion 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 collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7_	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	tion 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):			
а	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	tion 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	ally i	integrated Type III suppor	ting organization
	(see instructions).			

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Part V Section D-Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes 1 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 2 3 Administrative expenses paid to accomplish exempt purposes of supported organizations 4 Amounts paid to acquire exempt-use assets 4 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) 5 5 Other distributions (describe in Part VI). See instructions. 6 6 7 Total annual distributions. Add lines 1 through 6. 7 Distributions to attentive supported organizations to which the organization is responsive 8 (provide details in Part VI). See instructions. 8 Distributable amount for 2022 from Section C, line 6 9 9 10 10 Line 8 amount divided by line 9 amount (ii) (iii) Section E—Distribution Allocations (see instructions) **Underdistributions Distributable Excess Distributions** Pre-2022 Amount for 2022 Distributable amount for 2022 from Section C, line 6 2 Underdistributions, if any, for years prior to 2022 (reasonable cause required - explain in Part VI). See instructions. Excess distributions carryover, if any, to 2022 a From 2017 From 2018 **c** From 2019 **d** From 2020 **e** From 2021 Total of lines 3a through 3e Applied to underdistributions of prior years Applied to 2022 distributable amount Carryover from 2017 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. Distributions for 2022 from Section D, line 7: Applied to underdistributions of prior years Applied to 2022 distributable amount Remainder. Subtract lines 4a and 4b from line 4. Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result 5 greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. Excess distributions carryover to 2023. Add lines 3j and 4c. Breakdown of line 7: Excess from 2018 . . . Excess from 2019 . . . Excess from 2020 . . . Excess from 2021 . . . Excess from 2022 . . .

Schedule A (Form 990) 2022 Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part Part VI III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE D (Form 990)

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.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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

WILLIAMS PROJECT 47-3954408 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised 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) . . Aggregate value at end of year 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 5 funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose ☐ Yes ☐ No Part II **Conservation Easements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements . . . 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after July 25, 2006, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) ☐ Yes ☐ No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: \$ If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

Schedu	le D (Form 990) 2022								Page	
	Organizations Maintaining									
3	Using the organization's acquisition, collection items (check all that apply):		ssion, and ot	ther reco	rds, chec	k any of th	e follov	ving that make	significant use of	it
а	☐ Public exhibition			d	☐ Loan	or exchang	e prog	ram		
b	☐ Scholarly research			е	☐ Other					
С	☐ Preservation for future generations	3								
4	Provide a description of the organization	tion's	collections	and expla	ain how t	hey further	the org	ganization's exe	empt purpose in Pa	aı
	XIII.									
5	During the year, did the organization assets to be sold to raise funds rather									۷c
Part	ESCrow and Custodial Arra	ange	ments.							_
	Complete if the organization	_		on For	m 990, I	Part IV, line	e 9, or	reported an a	amount on Form	
	990, Part X, line 21.							·		
1a	Is the organization an agent, trustee	, cust	odian or oth	ner intern	nediary fo	or contribut	tions o	r other assets	not	
	included on Form 990, Part X?								· Yes N	٧c
b	If "Yes," explain the arrangement in P	art XII	II and compl	ete the fo	ollowing to	able:				
	,								Amount	
С	Beginning balance						10	:		
d	Additions during the year						10	k		
е	Distributions during the year						16	•		
f	Ending balance						11	f		
2a	Did the organization include an amoun	nt on	Form 990, P	art X, line	21, for e	escrow or c	ustodia	ıl account liabili	ity? 🗌 Yes 🔲 N	٧c
b	If "Yes," explain the arrangement in P	art XII	II. Check her	e if the e	xplanatio	n has been	provid	ed on Part XIII	.	
Par					•		•			
	Complete if the organization	ans	wered "Yes	on For	m 990, I	Part IV, line	e 10.			
		(a)	Current year	(b) Pri	or year	(c) Two yea	rs back	(d) Three years ba	ack (e) Four years bac	ck
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									_
e	Other expenditures for facilities and									_
Ū	programs									
f	Administrative expenses									_
g	End of year balance									_
2	Provide the estimated percentage of t	the cu	irrent vear er	l nd halanc	o (line 1c	r column (s)) bold	36.		_
2	Board designated or quasi-endowmer		•	%	e (iii e i g	y, Columni (a	i)) Heid	as.		
a b	Permanent endowment			70						
	Term endowment %	70								
С	The percentages on lines 2a, 2b, and	20 ob	ould squal 1	000/						
За	Are there endowment funds not in the				zation th	at are held	and ac	Iministered for	the	
ou	organization by:	c pos	30331011 01 11	ne organi	Zation tin	at are ricia	and ac		Yes N	_
	(i) Unrelated organizations								. 3a(i)	ŏ
	.,									_
b	If "Yes" on line 3a(ii), are the related o									_
4	Describe in Part XIII the intended uses	_		•					. 00	_
Pari				on 3 enac	JWITIGHT I	unus.				_
- CII	Complete if the organization			" on For	m 990 I	Part IV line	e 11a	See Form 990	0 Part X line 10	
	Description of property	. 4113	(a) Cost or o		1	or other basis		Accumulated	(d) Book value	_
	besonption of property		(investm		1	other)		epreciation	(d) DOOK value	
	Land		•		+ `					_
b	Buildings				-					_
C	Leasehold improvements				-					_
d	Equipment	•								_
u e		•			-					_
	Other		agual Form 0	100 Part	X column	1 (R) line 11)c)			_
i Utal.	Aud intes la tillough le. (Column (a) h	nust 6	quai i oiiii 9	ou, rail	n, coluitii	י נ <i>טן,</i> ווווכ ול				

Part VII	Investments – Other Securities. Complete if the organization answered "Yes" on Form 990, Part I	V line 11h See F	orm 000 Part V line 12
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial	derivatives		
	eld equity interests		
(3) Other			
(A)			
(B)			
(C)			
(D) (E)			
(F)			
(G)			
(H)			
Total. (Colu	mn (b) must equal Form 990, Part X, col. (B) line 12.)		
Part VIII	Investments—Program Related. Complete if the organization answered "Yes" on Form 990, Part I	V. line 11c. See F	orm 990. Part X. line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(4)			Cost of cha of year market value
(1)			
(2)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
	mn (b) must equal Form 990, Part X, col. (B) line 13.)		
Part IX	Other Assets.		
	Complete if the organization answered "Yes" on Form 990, Part I	V, line 11d. See F	
	(a) Description		(b) Book value
	able Actors' Bond		17,935
(2) Event D	•		10,891
	ble Security Deposits		500
(4)			
(5) (6)			
(7)			
(8)			
(9)			
	mn (b) must equal Form 990, Part X, col. (B) line 15.)		. 29,326
Part X	Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part I	V, line 11e or 11f.	See Form 990, Part X,
	line 25.		
1.	(a) Description of liability		(b) Book value
(1) Federal in	ncome taxes		
(2)			
(3)			
(4)			
(5)			
(6)			
<u>(7)</u>			
(8) (9)			
	mn (b) must equal Form 990, Part X, col. (B) line 25.)		_
	uncertain tax positions. In Part XIII, provide the text of the footnote to the organ		tements that reports the
	s liability for uncertain tax positions under FASB ASC 740. Check here if the text		

Schedule D (Form 990) 2022 Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Part XI Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total revenue, gains, and other support per audited financial statements . . . 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: Net unrealized gains (losses) on investments Donated services and use of facilities h Recoveries of prior year grants Other (Describe in Part XIII.) Add lines 2a through 2d 2e Subtract line **2e** from line **1** 3 3 Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a 4b Add lines 4a and 4b 4c Total revenue, Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.) 5 Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Part XII Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Amounts included on line 1 but not on Form 990, Part IX, line 25: 2 Donated services and use of facilities 2a Prior year adjustments 2b Other losses 2c Other (Describe in Part XIII.) 2d Add lines 2a through 2d 2e 3 Subtract line **2e** from line **1** 3 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a 4b Add lines **4a** and **4b** 4c Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) . Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

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

Inspection
Employer identification number

WILLIAMS PROJECT	47-3954408
Form 990, Part VI, Section B, Line 11b - The Form 990 is provided to Board Members for their review and of	comment prior to filing.
Form 990, Part VI, Section B, Line 15 - Compensation is proposed in an annual budget prepared by staff a	nd based on data for comparable
salaries and positions and presented to the Board of Directors for approval. The Board's deliberation and	
documented in meeting minutes.	
Form 990, Part VI, Section C, Line 19 - The Organization's governing documents, conflict of interest policy	v. and financial statements are
made available upon request.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Form 990, Part IX, Line 11g - Theatrical - Artists & Production Techs	