

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form 990

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

2024

Do not enter social security numbers on this form as it may be made public.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A For the 2024 calendar year, or tax year beginning and ending

B Check if applicable: C Name of organization MOTION PICTURE AND TELEVISION FUND D Employer identification number 95-1652916 E Telephone number 818-876-4168 G Gross receipts \$ 136,712,837 H(a) Is this a group return for subordinates? H(b) Are all subordinates included? I Tax-exempt status: J Website: K Form of organization: L Year of formation: M State of legal domicile: CA

Part I Summary

Table with 3 columns: Description, Prior Year, Current Year. Rows include: 1 Briefly describe the organization's mission... 2 Check this box... 3 Number of voting members... 4 Number of independent voting members... 5 Total number of individuals employed... 6 Total number of volunteers... 7a Total unrelated business revenue... 7b Net unrelated business taxable income... 8 Contributions and grants... 9 Program service revenue... 10 Investment income... 11 Other revenue... 12 Total revenue... 13 Grants and similar amounts paid... 14 Benefits paid... 15 Salaries, other compensation... 16a Professional fundraising fees... 16b Total fundraising expenses... 17 Other expenses... 18 Total expenses... 19 Revenue less expenses... 20 Total assets... 21 Total liabilities... 22 Net assets or fund balances.

Part II Signature Block

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

Sign Here: Signature of officer ROBERT L. BEITCHER, PRESIDENT Date 11/12/2025. Paid: Preparer's name LAUREN A. HAVERLOCK Preparer's signature LAUREN A. HAVERLOCK Date 11/10/25 Check if self-employed PTIN P00545829. Preparer Use Only: Firm's name BAKER TILLY ADVISORY GROUP, LP Firm's EIN 39-0859910 Firm's address 225 S. LAKE AVENUE, SUITE 900 PASADENA, CA 91101 Phone no. 310-477-0450

May the IRS discuss this return with the preparer shown above? See instructions [X] Yes [ ] No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: WE SUPPORT OUR ENTERTAINMENT COMMUNITY IN LIVING AND AGING WELL, WITH DIGNITY AND PURPOSE, AND IN HELPING EACH OTHER IN TIMES OF NEED.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ 33,234,355. including grants of \$ ) (Revenue \$ 27,928,197. ) MPTF PROVIDES INPATIENT MEDICAL SERVICES AT ITS 122 BED FACILITY LOCATED ON THE WASSERMAN CAMPUS IN WOODLAND HILLS. SERVICES INCLUDE GERIATRIC PSYCHIATRY, SKILLED NURSING, ALZHEIMER'S CARE, AND RELATED ANCILLARY SERVICES. 2024 SERVICE VOLUMES INCLUDED 35,637 TOTAL PATIENT DAYS.

4b (Code: ) (Expenses \$ 19,982,700. including grants of \$ ) (Revenue \$ 7,883,795. ) MPTF PROVIDES VARIOUS PROGRAMS AND CHARITABLE SERVICES INCLUDING A 166 UNIT RETIREMENT COMMUNITY, RESIDENTIAL SUBSIDIES AND RESIDENTIAL SOCIAL SERVICES. 2024 SERVICE VOLUMES INCLUDED 51,071 RESIDENTIAL DAYS (SEE SCHEDULE O).

4c (Code: ) (Expenses \$ 9,095,728. including grants of \$ 2,466,600. ) (Revenue \$ 37,170. ) MPTF PROVIDES COMMUNITY PROGRAMS INCLUDING SOCIAL SERVICES, FINANCIAL ASSISTANCE, PALLIATIVE CARE, ELDER CONNECTION, HEALTH INSURANCE COUNSELING, SOCIAL ISOLATION PROGRAMS.

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )
4e Total program service expenses 62,312,783.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Yes, No. Contains 21 rows of questions regarding organizational requirements and schedules.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question, Yes, No. Rows 22-38 covering various IRS schedule requirements.

Note: All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with 3 columns: Question, Yes, No. Rows 1a-1c regarding Form 1096, Forms W-2G, and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No columns. Includes questions 2a through 17 regarding employee counts, tax returns, business income, foreign accounts, prohibited transactions, and charitable contributions.

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

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year; 1b Enter the number of voting members included on line 1a, above, who are independent; 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?; 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?; 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?; 5 Did the organization become aware during the year of a significant diversion of the organization's assets?; 6 Did the organization have members or stockholders?; 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?; b Each committee with authority to act on behalf of the governing body?; 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?; 10b 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?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?; 11b 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; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 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?; 15a The organization's CEO, Executive Director, or top management official; 15b Other officers or key employees of the organization; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed CA, NY
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. [X] Own website [ ] Another's website [X] Upon request [ ] Other (explain on Schedule O)
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records
JEFF ARNETT - (818)876-4168
23388 MULHOLLAND DRIVE, WOODLAND HILLS, CA 91364-2792

**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 neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ROBERT L. BEITCHER PRESIDENT / CEO	40.00	X		X				849,576.	0.	28,522.
(2) LINDA K. HEALY VP, CHIEF NURSING OFFICER	40.00					X		287,266.	0.	23,064.
(3) SHARON A. SIEFERT VP, LEGAL AFFAIRS	40.00			X				270,935.	0.	25,568.
(4) JEFF ARNETT CHIEF FINANCIAL OFFICER	40.00			X				260,747.	0.	26,902.
(5) CHRIS G. LIVANOS CHIEF INFORMATION OFFICER	40.00				X			248,060.	0.	29,844.
(6) JOEL HERNANDEZ-ROMERO BEHAVIORAL HEALTH	40.00					X		228,460.	0.	15,569.
(7) JENNIFER S. CALIXTO DIRECTOR, LONG TERM CARE	40.00					X		213,127.	0.	25,819.
(8) COURTENEY D. BAILEY CHIEF DEVELOPMENT OFFICER	40.00				X			208,982.	0.	25,026.
(9) SHEILA MARTIN RISK MGT & REGULATORY AFFAIRS	40.00					X		197,103.	0.	21,117.
(10) JULIA KYLE DIRECTOR, PHARMACY SERVICE	40.00					X		197,898.	0.	18,923.
(11) JIM GIANOPULOS CHAIR	1.00	X		X				0.	0.	0.
(12) MICHAEL KARLIN SECRETARY	1.00	X		X				0.	0.	0.
(13) CASEY WASSERMAN DIRECTOR	1.00	X						0.	0.	0.
(14) DUNCAN CRABREE-IRELAND DIRECTOR	1.00	X						0.	0.	0.
(15) EMMA THOMAS DIRECTOR	1.00	X						0.	0.	0.
(16) ERIC ESRAILIAN DIRECTOR	1.00	X						0.	0.	0.
(17) GEORGE CLOONEY DIRECTOR	1.00	X						0.	0.	0.

**Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) HAWK KOCH DIRECTOR	1.00	X						0.	0.	0.
(19) HENRY MUNOZ III DIRECTOR (THRU 12/24)	1.00	X						0.	0.	0.
(20) JESSIE KORNBURG DIRECTOR	1.00	X						0.	0.	0.
(21) JOHN GOLDWYN DIRECTOR	1.00	X						0.	0.	0.
(22) JOHN WELLS DIRECTOR	1.00	X						0.	0.	0.
(23) KAREN ROSENFELT DIRECTOR	1.00	X						0.	0.	0.
(24) KEVIN MCCORMICK DIRECTOR	1.00	X						0.	0.	0.
(25) LISA PIEROZZI DIRECTOR	1.00	X						0.	0.	0.
(26) MARIA RODRIGUEZ DIRECTOR	1.00	X						0.	0.	0.
<b>1b Subtotal</b>								2,962,154.	0.	240,354.
<b>c Total from continuation sheets to Part VII, Section A</b>								0.	0.	0.
<b>d Total (add lines 1b and 1c)</b>								2,962,154.	0.	240,354.

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 86

	Yes	No
<b>3</b> Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
<b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	X	
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
MORRISON MANAGEMENT SPECIALISTS PO BOX 102289, ATLANTA, GA 30368-2289	DIETARY AND HOUSEKEEPING	2,813,317.
UNIVERSAL PROTECTION SERVICE, 1551 N TUSTIN AVE STE 650, SANTA ANA, CA 92705	SECURITY SERVICES	874,061.
STUDIO KOMOREBI LLC, 5029 WILLOWCREST AVE, NORTH HOLLYWOOD, CA 91601	OTHER PURCHASED SERVICES	815,926.
COMMUNITY LIVING HOLDINGS LLC, 1500 LIBERTY RIDGE DR STE 210, WAYNE, PA 19087	HOUSEKEEPING AND LAUNDRY	704,009.
PROFESSIONAL STAFFING, 17645 CHATSWORTH ST, GRANADA HILLS, CA 91344	OTHER PURCHASED SERVICES	608,771.

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 25

SEE PART VII, SECTION A CONTINUATION SHEETS Form 990 (2024)



**Part VIII Statement of Revenue**

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

			(A)	(B)	(C)	(D)		
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514		
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns						
		1a						
	b	Membership dues						
		1b						
	c	Fundraising events	9,913,208.					
		1c						
	d	Related organizations						
		1d						
e	Government grants (contributions)							
	1e							
f	All other contributions, gifts, grants, and similar amounts not included above	27,567,487.						
	1f							
g	Noncash contributions included in lines 1a-1f	\$ 1,574,886.						
	1g							
h Total. Add lines 1a-1f			37,480,695.					
Program Service Revenue			Business Code					
	2 a	INPATIENT REVENUE	623000	27,928,197.	27,928,197.			
	b	RESIDENTIAL REVENUE	623990	7,883,795.	7,883,795.			
	c	MANAGEMENT SERVICE FEE	551112	37,170.	37,170.			
	d							
	e							
	f	All other program service revenue						
g Total. Add lines 2a-2f			35,849,162.					
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		3,263,208.		520.	3,262,688.	
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties		1,429,719.			1,429,719.	
	6 a	Gross rents	(i) Real	198,698.				
			(ii) Personal					
	b	Less: rental expenses		8,923.				
	c	Rental income or (loss)		189,775.				
	d	Net rental income or (loss)		189,775.			189,775.	
	7 a	Gross amount from sales of assets other than inventory	(i) Securities	57,392,911.				
			(ii) Other	83,172.				
	b	Less: cost or other basis and sales expenses		57,335,190.	48,933.			
	c	Gain or (loss)		57,721.	34,239.			
	d	Net gain or (loss)		91,960.			91,960.	
8 a	Gross income from fundraising events (not including \$ 9,913,208. of contributions reported on line 1c). See Part IV, line 18							
		8a	921,170.					
		8b	4,759,082.					
b	Less: direct expenses							
c	Net income or (loss) from fundraising events		-3,837,912.			-3,837,912.		
9 a	Gross income from gaming activities. See Part IV, line 19							
		9a	52,441.					
		9b	7,408.					
b	Less: direct expenses							
c	Net income or (loss) from gaming activities		45,033.			45,033.		
10 a	Gross sales of inventory, less returns and allowances							
		10a						
		10b						
b	Less: cost of goods sold							
c	Net income or (loss) from sales of inventory							
Miscellaneous Revenue			Business Code					
	11 a	CONTRACT AND OTHER REV	541900	41,157.		41,157.		
	b	HOSPITAL AND GIFT SHOP	459420	504.		504.		
	c							
	d	All other revenue						
e Total. Add lines 11a-11d			41,661.					
12 Total revenue. See instructions			74,553,301.	35,849,162.	520.	1,222,924.		

**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 X

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>				
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22	2,466,600.	2,466,600.		
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	1,974,163.		1,740,154.	234,009.
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>7</b> Other salaries and wages	32,234,501.	28,647,267.	3,337,931.	249,303.
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	2,448,407.	2,249,302.	177,046.	22,059.
<b>9</b> Other employee benefits	9,693,482.	8,774,020.	808,538.	110,924.
<b>10</b> Payroll taxes	2,559,941.	2,317,121.	213,526.	29,294.
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management	176,990.	176,990.		
<b>b</b> Legal	412,125.	186.	411,939.	
<b>c</b> Accounting	294,931.		294,931.	
<b>d</b> Lobbying	10,191.	10,191.		
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees	95,000.		95,000.	
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	8,277,012.	7,708,729.	370,403.	197,880.
<b>12</b> Advertising and promotion	1,457,292.	954,342.	305,408.	197,542.
<b>13</b> Office expenses	887,939.	46,055.	721,136.	120,748.
<b>14</b> Information technology				
<b>15</b> Royalties				
<b>16</b> Occupancy	2,925,683.	2,925,683.		
<b>17</b> Travel	33,178.	18,897.	11,311.	2,970.
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials				
<b>19</b> Conferences, conventions, and meetings				
<b>20</b> Interest	385,878.	385,878.		
<b>21</b> Payments to affiliates				
<b>22</b> Depreciation, depletion, and amortization	2,445,519.	2,216,210.	145,027.	84,282.
<b>23</b> Insurance	763,019.		763,019.	
<b>24</b> 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.)				
<b>a</b> REPAIRS AND MAINTENANCE	1,523,844.	1,446,722.	76,922.	200.
<b>b</b> PHARMACEUTICALS	669,580.	669,580.		
<b>c</b> SOFTWARE HOSTING FEES	582,394.		582,394.	
<b>d</b> MEDICAL SUPPLIES	530,687.	530,687.		
<b>e</b> All other expenses	1,110,554.	768,323.	167,508.	174,723.
<b>25</b> Total functional expenses. Add lines 1 through 24e	73,958,910.	62,312,783.	10,222,193.	1,423,934.
<b>26</b> 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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year	
Assets	1	Cash - non-interest-bearing	6,610,573.	1	4,560,438.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net	15,909,953.	3	30,788,001.
	4	Accounts receivable, net	8,603,578.	4	7,898,230.
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net	5,000,000.	7	5,150,000.
	8	Inventories for sale or use	298,761.	8	295,921.
	9	Prepaid expenses and deferred charges	4,662,022.	9	1,607,130.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	130,664,278.		
	10b	Less: accumulated depreciation	115,020,964.		
			17,371,549.	10c	15,643,314.
	11	Investments - publicly traded securities	47,170,504.	11	23,295,038.
	12	Investments - other securities. See Part IV, line 11	12,869,610.	12	32,315,251.
	13	Investments - program-related. See Part IV, line 11	2,700,000.	13	2,700,000.
	14	Intangible assets		14	
15	Other assets. See Part IV, line 11	1,447,058.	15	1,191,262.	
16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 33)	122,643,608.	16	125,444,585.	
Liabilities	17	Accounts payable and accrued expenses	10,053,470.	17	9,984,762.
	18	Grants payable		18	
	19	Deferred revenue	1,644,000.	19	475,000.
	20	Tax-exempt bond liabilities	6,775,045.	20	6,047,248.
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	25,328,933.	25	21,695,304.
	26	<b>Total liabilities.</b> Add lines 17 through 25	43,801,448.	26	38,202,314.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/>				
	and complete lines 27, 28, 32, and 33.				
	27	Net assets without donor restrictions	25,537,102.	27	19,457,800.
	28	Net assets with donor restrictions	53,305,058.	28	67,784,471.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/>				
	and complete lines 29 through 33.				
	29	Capital stock or trust principal, or current funds		29	
	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
31	Retained earnings, endowment, accumulated income, or other funds		31		
32	<b>Total net assets or fund balances</b>	78,842,160.	32	87,242,271.	
33	<b>Total liabilities and net assets/fund balances</b>	122,643,608.	33	125,444,585.	

**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)	1	74,553,301.
2	Total expenses (must equal Part IX, column (A), line 25)	2	73,958,910.
3	Revenue less expenses. Subtract line 2 from line 1	3	594,391.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	78,842,160.
5	Net unrealized gains (losses) on investments	5	1,433,315.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	6,372,405.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	87,242,271.

**Part XII Financial Statements and Reporting**

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

- 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 on Schedule O.
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant? \_\_\_\_\_  
 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? \_\_\_\_\_  
 If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? \_\_\_\_\_  
 If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F? \_\_\_\_\_
- 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 \_\_\_\_\_

	Yes	No
2a		x
2b	x	
2c	x	
3a		x
3b		

Form 990 (2024)



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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	29,149,359.	28,866,603.	32,227,708.	32,161,048.	37,480,695.	159,885,413.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 <b>Total.</b> Add lines 1 through 3	29,149,359.	28,866,603.	32,227,708.	32,161,048.	37,480,695.	159,885,413.
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)						13,212,768.
6 <b>Public support.</b> Subtract line 5 from line 4.						146,672,645.

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
7 Amounts from line 4	29,149,359.	28,866,603.	32,227,708.	32,161,048.	37,480,695.	159,885,413.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	2,188,517.	2,436,886.	3,244,342.	3,423,209.	4,891,105.	16,184,059.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	2,219,368.	414,000.	636,386.	27,928.	41,661.	3,339,343.
11 <b>Total support.</b> Add lines 7 through 10						179,408,815.
12 Gross receipts from related activities, etc. (see instructions)					12	159,806,042.
13 <b>First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b>						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f))	14	81.75 %
15 Public support percentage from 2023 Schedule A, Part II, line 14	15	82.92 %
16a <b>33 1/3% support test - 2024.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization	<input checked="" type="checkbox"/>	
b <b>33 1/3% support test - 2023.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
17a <b>10% -facts-and-circumstances test - 2024.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
b <b>10% -facts-and-circumstances test - 2023.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
18 <b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	<input type="checkbox"/>	

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.)

Section A. Public Support

Table with 7 columns: (a) 2020, (b) 2021, (c) 2022, (d) 2023, (e) 2024, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total. Add lines 1 through 5; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 8 Public support. (Subtract line 7c from line 6.)

Section B. Total Support

Table with 7 columns: (a) 2020, (b) 2021, (c) 2022, (d) 2023, (e) 2024, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on; 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.); 13 Total support. (Add lines 9, 10c, 11, and 12.)

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Row 15: Public support percentage for 2024 (line 8, column (f), divided by line 13, column (f)) 15%. Row 16: Public support percentage from 2023 Schedule A, Part III, line 15 16%.

Section D. Computation of Investment Income Percentage

Table with 2 columns: Line number, Percentage. Row 17: Investment income percentage for 2024 (line 10c, column (f), divided by line 13, column (f)) 17%. Row 18: Investment income percentage from 2023 Schedule A, Part III, line 17 18%.

19a 33 1/3% support tests - 2024. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2023. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

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

	Yes	No
1		
2		
3a		
3b		
3c		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9c		
10a		
10b		

Part IV Supporting Organizations (continued)

- 11 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?
b A family member of a person described on line 11a above?
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.

Table with 3 columns: Question, Yes, No. Rows 11a, 11b, 11c.

Section B. Type I Supporting Organizations

- 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.
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

Table with 3 columns: Question, Yes, No. Rows 1, 2.

Section C. Type II Supporting Organizations

- 1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).

Table with 3 columns: Question, Yes, No. Row 1.

Section D. All Type III Supporting Organizations

- 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?
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).
3 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.

Table with 3 columns: Question, Yes, No. Rows 1, 2, 3.

Section E. Type III Functionally Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
a [ ] The organization satisfied the Activities Test. Complete line 2 below.
b [ ] The organization is the parent of each of its supported organizations. Complete line 3 below.
c [ ] The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).

- 2 Activities Test. Answer lines 2a and 2b below.
a 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.
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.
3 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.
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Table with 3 columns: Question, Yes, No. Rows 2a, 2b, 3a, 3b.

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

1  Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 ( explain in Part VI). See instructions.  
All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section 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	<b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> 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	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	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	<b>Distributable Amount.</b> 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-functionally integrated Type III supporting organization (see instructions).

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	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	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i> )	5
6	Other distributions (describe in <b>Part VI</b> ). See instructions.	6
7	<b>Total annual distributions.</b> Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive ( <i>provide details in Part VI</i> ). See instructions.	8
9	Distributable amount for 2024 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2024	(iii) Distributable Amount for 2024
1	Distributable amount for 2024 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2024 (reasonable cause required - <i>explain in Part VI</i> ). See instructions.		
3	Excess distributions carryover, if any, to 2024		
a	From 2019		
b	From 2020		
c	From 2021		
d	From 2022		
e	From 2023		
f	<b>Total</b> of lines 3a through 3e		
g	Applied to under distributions of prior years		
h	Applied to 2024 distributable amount		
i	Carryover from 2019 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2024 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2024 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.		
6	Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.		
7	<b>Excess distributions carryover to 2025.</b> Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2020		
b	Excess from 2021		
c	Excess from 2022		
d	Excess from 2023		
e	Excess from 2024		

Schedule A (Form 990) 2024

**Part VI** **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part 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 A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

OTHER INCOME

2020 AMOUNT: \$ 2,219,368.

2021 AMOUNT: \$ 414,000.

2022 AMOUNT: \$ 636,386.

2023 AMOUNT: \$ 27,928.

2024 AMOUNT: \$ 41,661.

Schedule B (Form 990)

(Rev. December 2024) Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Name of the organization

MOTION PICTURE AND TELEVISION FUND

Employer identification number

95-1652916

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

[X] 501(c)( 3 ) (enter number) organization

[ ] 4947(a)(1) nonexempt charitable trust not treated as a private foundation

[ ] 527 political organization

Form 990-PF

[ ] 501(c)(3) exempt private foundation

[ ] 4947(a)(1) nonexempt charitable trust treated as a private foundation

[ ] 501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

[ ] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

[X] For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

[ ] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

[ ] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

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

Name of organization

Employer identification number

MOTION PICTURE AND TELEVISION FUND

95-1652916

**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 5,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2		\$ 5,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3		\$ 5,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4		\$ 5,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5		\$ 1,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6		\$ 750,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

MOTION PICTURE AND TELEVISION FUND

95-1652916

**Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_____	_____ _____ _____ _____	\$ _____	_____
_____	_____ _____ _____ _____	\$ _____	_____
_____	_____ _____ _____ _____	\$ _____	_____
_____	_____ _____ _____ _____	\$ _____	_____
_____	_____ _____ _____ _____	\$ _____	_____
_____	_____ _____ _____ _____	\$ _____	_____
_____	_____ _____ _____ _____	\$ _____	_____
_____	_____ _____ _____ _____	\$ _____	_____
_____	_____ _____ _____ _____	\$ _____	_____

Name of organization

Employer identification number

MOTION PICTURE AND TELEVISION FUND

95-1652916

**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
_____	_____
_____	_____
_____	_____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
_____	_____
_____	_____
_____	_____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
_____	_____
_____	_____
_____	_____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
_____	_____
_____	_____
_____	_____

**SCHEDULE C**  
**(Form 990)**

**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

**2024**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

For Organizations Exempt From Income Tax Under Section 501(c) and Section 527  
Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

If the organization answered "Yes" on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then:

- Section 501(c)(3) organizations: Complete Parts I-A and I-B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and I-C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then:

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions), or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then:

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization <p style="text-align:center">MOTION PICTURE AND TELEVISION FUND</p>	Employer identification number (EIN) <p style="text-align:center">95-1652916</p>
---	---

**Part I-A** Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political campaign activity expenditures ..... \$ \_\_\_\_\_
- 3 Volunteer hours for political campaign activities .....

**Part I-B** Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ..... \$ \_\_\_\_\_
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ..... \$ \_\_\_\_\_
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? .....  Yes  No
- 4a Was a correction made? .....  Yes  No
- b If "Yes," describe in Part IV.

**Part I-C** Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... \$ \_\_\_\_\_
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ..... \$ \_\_\_\_\_
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ..... \$ \_\_\_\_\_
- 4 Did the filing organization file Form 1120-POL for this year? .....  Yes  No
- 5 Enter the names, addresses, and EINs of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC).  
If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

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

Schedule C (Form 990) 2024

**Part II-A** Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check  if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check  if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals												
<b>1a</b> Total lobbying expenditures to influence public opinion (grassroots lobbying) .....														
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying) .....														
<b>c</b> Total lobbying expenditures (add lines 1a and 1b) .....														
<b>d</b> Other exempt purpose expenditures .....														
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d) .....														
<b>f</b> Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">If the amount on line 1e, column (a) or (b), is:</th> <th style="text-align: left;">THEN the lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b), is:	THEN the lobbying nontaxable amount is:	not over \$500,000	20% of the amount on line 1e.	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.	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	\$1,000,000.		
If the amount on line 1e, column (a) or (b), is:	THEN the lobbying nontaxable amount is:													
not over \$500,000	20% of the amount on line 1e.													
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.													
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	\$1,000,000.													
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f) .....														
<b>h</b> Subtract line 1g from line 1a. If zero or less, enter -0- .....														
<b>i</b> Subtract line 1f from line 1c. If zero or less, enter -0- .....														
<b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? .....		<input type="checkbox"/> Yes <input type="checkbox"/> No												

**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 separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2021	(b) 2022	(c) 2023	(d) 2024	(e) Total
<b>2a</b> Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots nontaxable amount					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					
<b>f</b> Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

Table with 3 main columns: (a) Yes/No, (b) Amount. Rows include: 1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation...; a Volunteers?; b Paid staff or management...; c Media advertisements?; d Mailings to members, legislators, or the public?; e Publications, or published or broadcast statements?; f Grants to other organizations for lobbying purposes?; g Direct contact with legislators, their staffs, government officials, or a legislative body?; h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?; i Other activities?; j Total. Add lines 1c through 1i; 2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?; b If "Yes," enter the amount of any tax incurred under section 4912; c If "Yes," enter the amount of any tax incurred by organization managers under section 4912; d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

Table with 3 columns: Question, Yes, No. Rows include: 1 Were substantially all (90% or more) dues received nondeductible by members?; 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?; 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No;" OR (b) Part III-A, line 3, is answered "Yes."

Table with 2 main columns: Question, Amount. Rows include: 1 Dues, assessments, and similar amounts from members; 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid): a Current year; b Carryover from last year; c Total; 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues; 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year?; 5 Taxable amount of lobbying and political expenditures. See instructions.

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

PART II-B, LINE 1, LOBBYING ACTIVITIES:

THE LOBBYING ACTIONS OF THE MOTION PICTURE AND TELEVISION FUND FOR THE YEAR ENDED DECEMBER 31, 2024 WERE COMPRISED OF PAYING MEMBERSHIP DUES TO VARIOUS HEALTHCARE ASSOCIATIONS WHO IN TURN PAY OUTSIDE LOBBYISTS TO REPRESENT THE INTERESTS OF THE ASSOCIATION WITH STATE LEGISLATORS WITH RESPECT TO GOVERNMENT REIMBURSEMENT PROGRAMS.

**Supplemental Financial Statements**

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

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**Open to Public  
 Inspection**

Name of the organization MOTION PICTURE AND TELEVISION FUND Employer identification number 95-1652916

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year .....		
2 Aggregate value of contributions to (during year) .....		
3 Aggregate value of grants from (during year) .....		
4 Aggregate value at end of year .....		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? .....		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? .....		<input type="checkbox"/> Yes <input type="checkbox"/> No

**Part II Conservation Easements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 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

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements .....	
b Total acreage restricted by conservation easements .....	
c Number of conservation easements on a certified historic structure included on line 2a .....	
d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register .....	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year \_\_\_\_\_

4 Number of states where property subject to conservation easement is located \_\_\_\_\_

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? .....

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year \_\_\_\_\_

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year \_\_\_\_\_

8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? .....

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.** Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 ..... \$ \_\_\_\_\_

(ii) Assets included in Form 990, Part X ..... \$ \_\_\_\_\_

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ..... \$ \_\_\_\_\_

b Assets included in Form 990, Part X ..... \$ \_\_\_\_\_

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).
- a  Public exhibition
  - b  Scholarly research
  - c  Preservation for future generations
  - d  Loan or exchange program
  - e  Other \_\_\_\_\_
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements** Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- |                                 | Amount |
|---------------------------------|--------|
| c Beginning balance             |        |
| d Additions during the year     |        |
| e Distributions during the year |        |
| f Ending balance                |        |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

**Part V Endowment Funds** Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	31,996,528.	29,998,666.	32,915,998.	28,458,317.	28,147,361.
b Contributions	1,141,599.		13,468.	4,476,028.	168,165.
c Net investment earnings, gains, and losses	1,924,119.	2,265,862.	-2,930,800.	1,427,939.	802,791.
d Grants or scholarships					
e Other expenditures for facilities and programs		268,000.		1,446,285.	660,000.
f Administrative expenses					
g End of year balance	35,062,246.	31,996,528.	29,998,666.	32,915,998.	28,458,317.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment 0.0000 %
  - b Permanent endowment 100 %
  - c Term endowment 0.0000 %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |                              | Yes | No |
|------------------------------|-----|----|
| (i) Unrelated organizations? |     | X  |
| (ii) Related organizations?  |     | X  |
- b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?
- 3b
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		1,821,411.		1,821,411.
b Buildings		95,512,975.	84,543,901.	10,969,074.
c Leasehold improvements		708,520.	688,990.	19,530.
d Equipment		19,939,182.	18,391,554.	1,547,628.
e Other		12,682,190.	11,396,519.	1,285,671.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				15,643,314.

**Part VII Investments - Other Securities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, 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		
(2) Closely held equity interests		
(3) Other		
(A) ALTERNATIVE INVESTMENTS	32,315,251.	END-OF-YEAR MARKET VALUE
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, line 12, col. (B))	32,315,251.	

**Part VIII Investments - Program Related.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, line 13, col. (B))		

**Part IX Other Assets**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, line 15, col. (B))	

**Part X Other Liabilities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

(a) Description of liability	(b) Book value
1. (1) Federal income taxes	11,020,281.
(2) DUE TO RETIREMENT PLANS	5,653,000.
(3) ACCRUED WORKER'S COMPENSATION	3,868,561.
(4) ACCRUED GENERAL LIABILITY INSURANCE	713,742.
(5) DUE TO AFFILIATES	85,676.
(6) ACTUARIAL LIABILITY UNDER SPLIT-INTEREST AGREEMENTS	354,044.
(7) OPERATING LEASE LIABILITIES	
(8)	
(9)	21,695,304.
<b>Total.</b> (Column (b) must equal Form 990, Part X, line 25, col. (B))	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b		4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5

**Part XIII 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.

**PART V, ENDOWMENT FUNDS:**

THE ORGANIZATION'S ENDOWMENTS ARE DONOR-RESTRICTED AND WERE ESTABLISHED FOR A VARIETY OF PURPOSES, INCLUDING CHILDCARE, PATIENT AND RESIDENT SUPPORT, GROUNDS MAINTENANCE, AND OTHER GENERAL OPERATING PURPOSES. THE ORGANIZATION HAS ADOPTED INVESTMENT AND SPENDING POLICIES FOR ENDOWMENT ASSETS THAT ATTEMPT TO PROVIDE LONG TERM INVESTMENT APPRECIATION AND A PREDICTABLE STREAM OF FUNDING TO PROGRAMS SUPPORTED BY THE RESPECTIVE ENDOWMENT.

**SCHEDULE F  
(Form 990)**

(Rev. December 2024)  
Department of the Treasury  
Internal Revenue Service

**Statement of Activities Outside the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**Open to Public  
Inspection**

Name of the organization

Employer identification number

MOTION PICTURE AND TELEVISION FUND

95-1652916

**Part I** **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

**1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? .....  Yes  No

**2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

**3 Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA, BAHAMAS,	0	0	INVESTMENTS		32,315,251.
<b>3 a Subtotal</b> .....	0	0			32,315,251.
<b>b Total from continuation sheets to Part I</b> .....	0	0			0.
<b>c Totals (add lines 3a and 3b)</b> .....	0	0			32,315,251.

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

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





**Part IV Foreign Forms**

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see the Instructions for Form 926)* .....  Yes  No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see the Instructions for Forms 3520 and 3520-A; don't file with Form 990)* .....  Yes  No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see the Instructions for Form 5471)* .....  Yes  No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see the Instructions for Form 8621)* .....  Yes  No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see the Instructions for Form 8865)* .....  Yes  No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see the Instructions for Form 5713; don't file with Form 990)* .....  Yes  No

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





**Part II Fundraising Events.** Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		THE NIGHT BEFORE (event type)	HEATBEAT OF HOLLYWOOD (event type)	3 (total number)	
Revenue	1	4,373,560.	644,101.	5,764,276.	10,781,937.
	2	4,193,825.	568,132.	5,098,811.	9,860,768.
	3	179,735.	75,969.	665,465.	921,169.
Direct Expenses	4				
	5	20,082.	35,273.	53,857.	109,212.
	6	5,915.	25,904.	221,588.	253,407.
	7	173,821.	50,065.	443,878.	667,764.
	8	5,500.	0.	19,156.	24,656.
	9	1,303,256.	96,388.	2,304,399.	3,704,043.
	10	Direct expense summary. Add lines 4 through 9 in column (d)			
11	Net income summary. Subtract line 10 from line 3, column (d)				-3,837,913.

**Part III Gaming.** Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
		1			52,441.
Direct Expenses	2				
	3			7,408.	7,408.
	4				
	5				
6	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input checked="" type="checkbox"/> No		
7	Direct expense summary. Add lines 2 through 5 in column (d)				7,408.
8	Net gaming income summary. Subtract line 7 from line 1, column (d)				45,033.

9 Enter the state(s) in which the organization conducts gaming activities: CA  
 a Is the organization licensed to conduct gaming activities in each of these states?  Yes  No  
 b If "No," explain: \_\_\_\_\_  
 \_\_\_\_\_  
 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?  Yes  No  
 b If "Yes," explain: \_\_\_\_\_  
 \_\_\_\_\_





**SCHEDULE H  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Hospitals**

Complete if the organization answered "Yes" on Form 990, Part IV, question 20a.  
Attach to Form 990.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2024**

Open to Public  
Inspection

Name of the organization <b>MOTION PICTURE AND TELEVISION FUND</b>	Employer identification number <b>95-1652916</b>
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**Part I Financial Assistance and Certain Other Community Benefits at Cost**

	Yes	No
1a Did the organization have a financial assistance policy (FAP) during the tax year? If "No," skip to question 6a	X	
b If "Yes," was it a written policy?	X	
2 If the organization had multiple hospital facilities, indicate which of the following best describes application of the FAP to its various hospital facilities during the tax year: <input type="checkbox"/> Applied uniformly to all hospital facilities <input type="checkbox"/> Applied uniformly to most hospital facilities <input type="checkbox"/> Generally tailored to individual hospital facilities		
3 Answer the following based on the financial assistance eligibility criteria that applied to the largest number of the organization's patients during the tax year.		
a Did the organization use federal poverty guidelines (FPG) as a factor in determining eligibility for providing <i>free</i> care? If "Yes," indicate which of the following was the FPG family income limit for eligibility for free care: <input type="checkbox"/> 100% <input type="checkbox"/> 150% <input checked="" type="checkbox"/> 200% <input type="checkbox"/> Other _____ %	X	
b Did the organization use FPG as a factor in determining eligibility for providing <i>discounted</i> care? If "Yes," indicate which of the following was the family income limit for eligibility for discounted care: <input type="checkbox"/> 200% <input type="checkbox"/> 250% <input type="checkbox"/> 300% <input type="checkbox"/> 350% <input checked="" type="checkbox"/> 400% <input type="checkbox"/> Other _____ %	X	
c If the organization used factors other than FPG in determining eligibility, describe in Part VI the criteria used for determining eligibility for free or discounted care. Include in the description whether the organization used an asset test or other threshold, regardless of income, as a factor in determining eligibility for free or discounted care.		
4 Did the organization's FAP that applied to the largest number of its patients during the tax year provide for free or discounted care to the "medically indigent"?	X	
5a Did the organization budget amounts for free or discounted care provided under its FAP during the tax year?	X	
b If "Yes," did the organization's financial assistance expenses exceed the budgeted amount?	X	
c If "Yes" to line 5b, as a result of budget considerations, was the organization unable to provide free or discounted care to a patient who was eligible for free or discounted care?		X
6a Did the organization prepare a community benefit report during the tax year?		X
b If "Yes," did the organization make it available to the public?		

Complete the following table using the worksheets provided in the Schedule H instructions. Do not submit these worksheets with the Schedule H.

7 Financial Assistance and Certain Other Community Benefits at Cost						
Financial Assistance and Means-Tested Government Programs	(a) Number of activities or programs (optional)	(b) Persons served (optional)	(c) Total community benefit expense	(d) Direct offsetting revenue	(e) Net community benefit expense	(f) Percent of total expense
a Financial assistance at cost (from Worksheet 1)						
b Medicaid (from Worksheet 3, column a)			25,032,147.	21,773,286.	3,258,861.	4.41%
c Costs of other means-tested government programs (from Worksheet 3, column b)						
<b>d Total.</b> Financial assistance and means-tested government programs			25,032,147.	21,773,286.	3,258,861.	4.41%
<b>Other Benefits</b>						
e Community health improvement services and community benefit operations (from Worksheet 4)			10,370,597.	188,440.	10,182,157.	13.77%
f Health professions education (from Worksheet 5)						
g Subsidized health services (from Worksheet 6)						
h Research (from Worksheet 7)						
i Cash and in-kind contributions for community benefit (from Worksheet 8)						
<b>j Total.</b> Other benefits			10,370,597.	188,440.	10,182,157.	13.77%
<b>k Total.</b> Add lines 7d and 7j			35,402,744.	21,961,726.	13,441,018.	18.18%

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

432091 01-03-24

Schedule H (Form 990) 2024





**Part V Facility Information** (continued)

**Section B. Facility Policies and Practices**

(complete a separate Section B for each of the hospital facilities or facility reporting groups listed in Part V, Section A)

Name of hospital facility or letter of facility reporting group: MOTION PICTURE AND TELEVISION HOSPITAL

Line number of hospital facility, or line numbers of hospital facilities in a facility reporting group (from Part V, Section A): 1

	Yes	No
<b>Community Health Needs Assessment (CHNA)</b>		
1 Was the hospital facility first licensed, registered, or similarly recognized by a state as a hospital facility in the current tax year or the immediately preceding tax year? .....	1	X
2 Was the hospital facility acquired or placed into service as a tax-exempt hospital in the current tax year or the immediately preceding tax year? If "Yes," provide details of the acquisition in Section C .....	2	X
3 During the tax year or either of the 2 immediately preceding tax years, did the hospital facility conduct a CHNA? If "No," skip to line 12 .....	3	X
If "Yes," indicate what the CHNA report describes (check all that apply):		
a <input checked="" type="checkbox"/> A definition of the community served by the hospital facility		
b <input checked="" type="checkbox"/> Demographics of the community		
c <input checked="" type="checkbox"/> Existing health care facilities and resources within the community that are available to respond to the health needs of the community		
d <input checked="" type="checkbox"/> How data was obtained		
e <input checked="" type="checkbox"/> The significant health needs of the community		
f <input checked="" type="checkbox"/> Primary and chronic disease needs and other health issues of uninsured persons, low-income persons, and minority groups		
g <input checked="" type="checkbox"/> The process for identifying and prioritizing community health needs and services to meet the community health needs		
h <input checked="" type="checkbox"/> The process for consulting with persons representing the community's interests		
i <input type="checkbox"/> The impact of any actions taken to address the significant health needs identified in the hospital facility's prior CHNA		
j <input type="checkbox"/> Other (describe in Section C)		
4 Indicate the tax year the hospital facility last conducted a CHNA: 20 <u>22</u>		
5 In conducting its most recent CHNA, did the hospital facility take into account input from persons who represent the broad interests of the community served by the hospital facility, including those with special knowledge of or expertise in public health? If "Yes," describe in Section C how the hospital facility took into account input from persons who represent the community, and identify the persons the hospital facility consulted .....	5	X
6a Was the hospital facility's CHNA conducted with one or more other hospital facilities? If "Yes," list the other hospital facilities in Section C .....	6a	X
b Was the hospital facility's CHNA conducted with one or more organizations other than hospital facilities? If "Yes," list the other organizations in Section C .....	6b	X
7 Did the hospital facility make its CHNA report widely available to the public? .....	7	X
If "Yes," indicate how the CHNA report was made widely available (check all that apply):		
a <input checked="" type="checkbox"/> Hospital facility's website (list url): <u>HTTPS://MPTF.COM/ANNUAL-REPORT/</u>		
b <input type="checkbox"/> Other website (list url): .....		
c <input checked="" type="checkbox"/> Made a paper copy available for public inspection without charge at the hospital facility		
d <input type="checkbox"/> Other (describe in Section C)		
8 Did the hospital facility adopt an implementation strategy to meet the significant community health needs identified through its most recently conducted CHNA? If "No," skip to line 11 .....	8	X
9 Indicate the tax year the hospital facility last adopted an implementation strategy: 20 <u>22</u>	10	X
10 Is the hospital facility's most recently adopted implementation strategy posted on a website? .....		
a If "Yes," list url: <u>HTTP://WWW.MPTF.COM/FINANCIALS</u>	10b	
b If "No," is the hospital facility's most recently adopted implementation strategy attached to this return? .....		
11 Describe in Section C how the hospital facility is addressing the significant needs identified in its most recently conducted CHNA and any such needs that are not being addressed together with the reasons why such needs are not being addressed.		
12a Did the organization incur an excise tax under section 4959 for the hospital facility's failure to conduct a CHNA as required by section 501(r)(3)? .....	12a	X
b If "Yes" to line 12a, did the organization file Form 4720 to report the section 4959 excise tax? .....	12b	
c If "Yes" to line 12b, what is the total amount of section 4959 excise tax the organization reported on Form 4720 for all of its hospital facilities? \$		

**Part V Facility Information** (continued)

**Financial Assistance Policy (FAP)**

Name of hospital facility or letter of facility reporting group: MOTION PICTURE AND TELEVISION HOSPITAL

		Yes	No
Did the hospital facility have in place during the tax year a written FAP that:			
<b>13</b>	Explained eligibility criteria for financial assistance, and whether such assistance included free or discounted care? .....	X	
If "Yes," indicate the eligibility criteria explained in the FAP:			
a	<input checked="" type="checkbox"/> FPG, with FPG family income limit for eligibility for free care of and FPG family income limit <u>400</u> % for eligibility for discounted care of _____ %		
b	<input type="checkbox"/> Income level other than FPG (describe in Section C)		
c	<input checked="" type="checkbox"/> Asset level		
d	<input checked="" type="checkbox"/> Medical indigency		
e	<input checked="" type="checkbox"/> Insurance status		
f	<input checked="" type="checkbox"/> Underinsurance status		
g	<input type="checkbox"/> Residency		
h	<input type="checkbox"/> Other (describe in Section C)		
<b>14</b>	Explained the basis for calculating amounts charged to patients? .....	X	
<b>15</b>	Explained the method for applying for financial assistance? .....	X	
If "Yes," indicate how the hospital facility's FAP or FAP application form (including accompanying instructions) explained the method for applying for financial assistance (check all that apply):			
a	<input checked="" type="checkbox"/> Described the information the hospital facility may require an individual to provide as part of their application		
b	<input checked="" type="checkbox"/> Described the supporting documentation the hospital facility may require an individual to submit as part of their application		
c	<input checked="" type="checkbox"/> Provided the contact information of hospital facility staff who can provide an individual with information about the FAP and FAP application process		
d	<input checked="" type="checkbox"/> Provided the contact information of nonprofit organizations or government agencies that may be sources of assistance with FAP applications		
e	<input type="checkbox"/> Other (describe in Section C)		
<b>16</b>	Was widely publicized within the community served by the hospital facility? .....	X	
If "Yes," indicate how the hospital facility publicized the policy (check all that apply):			
a	<input checked="" type="checkbox"/> The FAP was widely available on a website (list url): <u>HTTPS://WWW.MPTF.COM/SERVICES/</u>		
b	<input checked="" type="checkbox"/> The FAP application form was widely available on a website (list url): <u>HTTPS://WWW.MPTF.COM/SERVICES/</u>		
c	<input checked="" type="checkbox"/> A plain language summary of the FAP was widely available on a website (list url): <u>SEE PART V, PAGE 8</u>		
d	<input checked="" type="checkbox"/> The FAP was available upon request and without charge (in public locations in the hospital facility and by mail)		
e	<input checked="" type="checkbox"/> The FAP application form was available upon request and without charge (in public locations in the hospital facility and by mail)		
f	<input checked="" type="checkbox"/> A plain language summary of the FAP was available upon request and without charge (in public locations in the hospital facility and by mail)		
g	<input checked="" type="checkbox"/> Individuals were notified about the FAP by being offered a paper copy of the plain language summary of the FAP, by receiving a conspicuous written notice about the FAP on their billing statements, and via conspicuous public displays or other measures reasonably calculated to attract patients' attention		
h	<input type="checkbox"/> Notified members of the community who are most likely to require financial assistance about availability of the FAP		
i	<input checked="" type="checkbox"/> The FAP, FAP application form, and plain language summary of the FAP were translated into the primary language(s) spoken by limited-English proficiency (LEP) populations		
j	<input checked="" type="checkbox"/> Other (describe in Section C)		

Schedule H (Form 990) 2024

**Part V Facility Information** (continued)

**Billing and Collections**

Name of hospital facility or letter of facility reporting group: MOTION PICTURE AND TELEVISION HOSPITAL

	Yes	No
17 Did the hospital facility have in place during the tax year a separate billing and collections policy, or a written FAP that explained all of the actions the hospital facility or other authorized party may take upon nonpayment? .....	x	
18 Check all of the following actions against an individual that were permitted under the hospital facility's policies during the tax year before making reasonable efforts to determine the individual's eligibility under the facility's FAP:		
a <input type="checkbox"/> Reporting to credit agency(ies)		
b <input type="checkbox"/> Selling an individual's debt to another party		
c <input type="checkbox"/> Deferring, denying, or requiring a payment before providing medically necessary care due to nonpayment of a previous bill for care covered under the hospital facility's FAP		
d <input type="checkbox"/> Actions that require a legal or judicial process		
e <input type="checkbox"/> Other similar actions (describe in Section C)		
f <input checked="" type="checkbox"/> None of these actions or other similar actions were permitted		
19 Did the hospital facility or other authorized party perform any of the following actions during the tax year before making reasonable efforts to determine the individual's eligibility under the facility's FAP? .....		x
If "Yes," check all actions in which the hospital facility or a third party engaged:		
a <input type="checkbox"/> Reporting to credit agency(ies)		
b <input type="checkbox"/> Selling an individual's debt to another party		
c <input type="checkbox"/> Deferring, denying, or requiring a payment before providing medically necessary care due to nonpayment of a previous bill for care covered under the hospital facility's FAP		
d <input type="checkbox"/> Actions that require a legal or judicial process		
e <input type="checkbox"/> Other similar actions (describe in Section C)		
20 Indicate which efforts the hospital facility or other authorized party made before initiating any of the actions listed (whether or not checked) on line 19 (check all that apply):		
a <input type="checkbox"/> Provided a written notice about upcoming extraordinary collection actions (ECAs) and a plain language summary of the FAP at least 30 days before initiating those ECAs (if not, describe in Section C)		
b <input checked="" type="checkbox"/> Made a reasonable effort to orally notify individuals about the FAP and FAP application process (if not, describe in Section C)		
c <input type="checkbox"/> Processed incomplete and complete FAP applications (if not, describe in Section C)		
d <input type="checkbox"/> Made presumptive eligibility determinations (if not, describe in Section C)		
e <input type="checkbox"/> Other (describe in Section C)		
f <input type="checkbox"/> None of these efforts were made		

**Policy Relating to Emergency Medical Care**

	Yes	No
21 Did the hospital facility have in place during the tax year a written policy relating to emergency medical care that required the hospital facility to provide, without discrimination, care for emergency medical conditions to individuals regardless of their eligibility under the hospital facility's FAP? .....	x	
If "No," indicate why:		
a <input type="checkbox"/> The hospital facility did not provide care for any emergency medical conditions		
b <input type="checkbox"/> The hospital facility's policy was not in writing		
c <input type="checkbox"/> The hospital facility limited who was eligible to receive care for emergency medical conditions (describe in Section C)		
d <input type="checkbox"/> Other (describe in Section C)		

**Part V Facility Information** *(continued)*

**Charges to Individuals Eligible for Assistance Under the FAP (FAP-Eligible Individuals)**

Name of hospital facility or letter of facility reporting group: MOTION PICTURE AND TELEVISION HOSPITAL

22 Indicate how the hospital facility determined, during the tax year, the maximum amounts that can be charged to FAP-eligible individuals for emergency or other medically necessary care:

- a  The hospital facility used a look-back method based on claims allowed by Medicare fee-for-service during a prior 12-month period
- b  The hospital facility used a look-back method based on claims allowed by Medicare fee-for-service and all private health insurers that pay claims to the hospital facility during a prior 12-month period
- c  The hospital facility used a look-back method based on claims allowed by Medicaid, either alone or in combination with Medicare fee-for-service and all private health insurers that pay claims to the hospital facility during a prior 12-month period
- d  The hospital facility used a prospective Medicare or Medicaid method

23 During the tax year, did the hospital facility charge any FAP-eligible individual to whom the hospital facility provided emergency or other medically necessary services more than the amounts generally billed to individuals who had insurance covering such care? .....

If "Yes," explain in Section C.

24 During the tax year, did the hospital facility charge any FAP-eligible individual an amount equal to the gross charge for any service provided to that individual? .....

If "Yes," explain in Section C.

	Yes	No
23		X
24		X

Schedule H (Form 990) 2024

**Part V Facility Information** (continued)

**Section C. Supplemental Information for Part V, Section B.** Provide descriptions required for Part V, Section B, lines 2, 3j, 5, 6a, 6b, 7d, 11, 13b, 13h, 15e, 16j, 18e, 19e, 20a, 20b, 20c, 20d, 20e, 21c, 21d, 23, and 24. If applicable, provide separate descriptions for each hospital facility in a facility reporting group, designated by facility reporting group letter and hospital facility line number from Part V, Section A ("A, 1," "A, 4," "B, 2," "B, 3," etc.) and name of hospital facility.

**MOTION PICTURE AND TELEVISION HOSPITAL:**

PART V, SECTION B, LINE 5: THE CHNA WAS PREPARED IN 2022 BASED ON INTERVIEWS WITH SENIOR MANAGEMENT, ENTERTAINMENT INDUSTRY HEALTH PLAN LEADERS, NONPROFIT ORGANIZATIONS, LA COUNTY HEALTH OFFICIALS AND REGIONAL HEALTHCARE LEADERS: LA COUNTY DEPARTMENT OF MENTAL HEALTH, PROJECT ANGEL FOOD, USC FAMILY CAREGIVER SUPPORT CENTER, ONEGENERATION, USC LEONARD DAVIS SCHOOL OF GERONTOLOGY, UCLA HEALTH GERONTOLOGY, CENTER FOR INFORMATION TECHNOLOGY RESEARCH IN THE INTEREST OF SOCIETY, FRONT PORCH, LGBT CENTER OF HOLLYWOOD, SAN FERNANDO VALLEY MENTAL HEALTH CLINIC AND LOS ANGELES COUNTY DEPARTMENT OF AGING AND COMMUNITY SERVICES. FEEDBACK WAS USED TO DETERMINE BOTH IMMEDIATE AND SHORT-TERM HEALTH NEEDS FOR INDUSTRY'S MEMBER AND AREAS OF FOCUS FOR MPTF.

**MOTION PICTURE AND TELEVISION HOSPITAL:**

PART V, SECTION B, LINE 11: MPTF SERVES CURRENT AND RETIRED ENTERTAINMENT INDUSTRY WORKERS AND THEIR FAMILIES. HEALTH CARE SERVICES PROVIDED DIRECTLY BY MPTF ARE PRIMARILY ORIENTED TO OLDER ADULTS, MANY OF WHOM EXPERIENCE FRAILTY, COGNITIVE IMPAIRMENT, MOBILITY ISSUES, HEARING IMPAIRMENT AND VISION LOSS. MPTF SOCIAL SERVICES EXTEND TO A GREATER POPULATION OF RETIRED AND WORKING INDUSTRY MEMBERS AND THEIR FAMILIES. IN CONJUNCTION WITH UCLA HEALTH, MPTF SOCIAL WORKERS PROVIDE CRISIS INTERVENTION. THE SAMUEL GOLDWYN JR CENTER FOR BEHAVIORAL HEALTH PROVIDES INPATIENT GERIATRIC PSYCHIATRY SERVICES (55+) TO ENTERTAINMENT INDUSTRY AND THE GENERAL POPULATION.

MPTF SERVES A POPULATION WHOSE WORK ENTAILS INCONSISTENT EMPLOYMENT, TIGHTENING UNION ELIGIBILITY, AGEISM, JOB LOSS, AND COMPETITION FROM EMERGING TECHNOLOGIES. THE INDUSTRY WORK STOPPAGES IN 2024 REDUCED INCOME, SAVINGS, AND QUALIFYING HOURS FOR BENEFIT COVERAGE. THE ONGOING CONTRACTION OF PRODUCTIONS CARRYING OVER INTO 2025 HAS CAUSED MANY WORKERS AND THEIR FAMILIES TO LOOK FOR WAYS TO DEAL WITH ESSENTIALS LIKE CAR PAYMENTS, RENT, UTILITY BILLS, AND MORE WITH A WIDE RANGE OF PEOPLE WHO HAVEN'T WORKED FOR WELL OVER A YEAR STILL STRUGGLING TO FIND WORK IN 2025 WITH NO WORK ON THE HORIZON.

MPTF REMAINS FOCUSED ON IMPROVING THE WELL-BEING OF THE INDUSTRY WORKER AND RETIREE POPULATION BY ADDRESSING SOCIAL DETERMINANTS OF HEALTH. MPTF'S WORK IS ORGANIZED AROUND FIVE GOALS, WITH THE ENTERTAINMENT INDUSTRY WORKFORCE AT ITS CENTER; SAFETY NET, WELLNESS, SUPPORTIVE COMMUNITY, EXTENDING CREATIVITY AND EDUCATION.

MPTF CONTINUALLY GAUGES COMMUNITY NEEDS THROUGH FOCUS GROUPS, SURVEYS, AND ONGOING DIALOGUE WITH ENTERTAINMENT INDUSTRY GUILDS, UNIONS AND HEALTH PLANS. MPTF WORKS WITH LA COUNTY DEPARTMENT OF HEALTH, AARP, AARP FOUNDATION, ALZHEIMER'S GREATER LOS ANGELES, ALZHEIMER'S NATIONAL, USC CAREGIVER RESOURCE CENTER, LOS ANGELES ALLIANCE FOR COMMUNITY HEALTH AND AGING, THE DEPARTMENT OF AGING AND DISABILITIES, AND OTHERS TO MONITOR AND GATHER RELEVANT DATA RELATED TO AREA HEALTH CARE NEEDS. MAJOR IDENTIFIED HEALTH NEEDS: DIABETES, HYPERTENSION, HIGH CHOLESTEROL, DEPRESSION AND ANXIETY, DEMENTIA, ARTHRITIS MANAGEMENT AND HEALTH MANAGEMENT.

ADDITIONAL NEEDS: MEDICAL MANAGEMENT AND OUT-OF-NETWORK COVERAGE ISSUES

**Part V Facility Information** (continued)

**Section C. Supplemental Information for Part V, Section B.** Provide descriptions required for Part V, Section B, lines 2, 3j, 5, 6a, 6b, 7d, 11, 13b, 13h, 15e, 16j, 18e, 19e, 20a, 20b, 20c, 20d, 20e, 21c, 21d, 23, and 24. If applicable, provide separate descriptions for each hospital facility in a facility reporting group, designated by facility reporting group letter and hospital facility line number from Part V, Section A ("A, 1," "A, 4," "B, 2," "B, 3," etc.) and name of hospital facility.

REMAIN PROBLEMATIC; GROWING NEED AND UNDERSUPPLY OF SENIOR SERVICES, INCLUDING SKILLED NURSING AND ACUTE MENTAL HEALTH CARE; RISE IN INSURANCE PREMIUMS, CO-PAYMENTS AND DEDUCTIBLES; TRANSPORTATION ACCESS; SOCIAL ISOLATION FOR OLDER ADULTS; ALZHEIMER'S DISEASE AND RELATED DEMENTIAS (ADRD) IDENTIFIED AS THE THIRD LEADING CAUSE OF DEATH IN LA COUNTY. SAFETY ISSUES AROUND AGING IN COMMUNITY AND CAREGIVING DEMANDS.

PLAN TO ADDRESS NEEDS: BASED ON INTERNAL DISCUSSION, DELIBERATIONS WITH ITS BOARD, INPUT FROM KEY CONSTITUENTS, MARKET ANALYSIS, AND DISCUSSIONS WITH OTHER REGIONAL CARE PROVIDERS, MPTF IS FOCUSING ON THE FOLLOWING AREAS VIS--VIS THE COMMUNITY THAT IT SERVES:

BUILDING ON ITS NATIONALLY-RECOGNIZED PLATFORM OF COMMUNITY-BASED PALLIATIVE CARE SERVICES TO INCREASE EARLY INTERVENTIONS IN THE LIVES OF INDUSTRY MEMBERS AND THEIR FAMILIES WHO HAVE RECEIVED SERIOUS MEDICAL DIAGNOSES. CONTINUE PROGRAM EXPANSION AS CONTEMPLATED UNDER THE UNIHEALTH PLANNING GRANT. ADVOCATING FOR A LONG-TERM SUSTAINABLE REIMBURSEMENT MODEL.

THE PALLIATIVE CARE TEAM HELD AN ADVANCE CARE PLANNING WORKSHOP VIA ZOOM FOR INDUSTRY MEMBERS. THIS WORKSHOP HELPED INDIVIDUALS AND FAMILIES DEFINE THEIR GOALS FOR THEIR CARE AND COMPLETE THE NECESSARY DOCUMENTS TO ENSURE THEIR WISHES GUIDE THEIR FUTURE MEDICAL TREATMENT.

PALLIATIVE CARE AND THE INNOVATION DEPARTMENT LAUNCHED A SERIES OF EDUCATIONAL VIRTUAL PRESENTATIONS DIRECTED AT FAMILY CAREGIVERS. COMMUNITY EXPERTS ON TOPICS SUCH AS MEDI-CAL AND SEPARATION OF ASSETS PRESENTED VIA AN INTERACTIVE ZOOM FORMAT. SESSIONS WERE RECORDED WITH THE GOAL OF CREATING A VIDEO LIBRARY TO BENEFIT FUTURE CAREGIVERS. THE SERIES OF PRESENTATIONS WILL CONTINUE IN 2025.

THE IMPACT OF THE FIRST DUAL STRIKE SINCE 1960, WITH THE WGA ON STRIKE FOR 148 DAYS AND SAG-AFTRA FOR 118 DAYS, CREATED IMMEDIATE HARDSHIPS FOR BELOW-THE-LINE WORKERS, AFFECTING TENS OF THOUSANDS OF CREW MEMBERS. RENT, MORTGAGES, EDUCATION COSTS, CAR PAYMENTS, HEALTH INSURANCE, AND MEDICAL EXPENSES BECAME MAJOR OBSTACLES, AND MPTF'S TEAM OF SOCIAL WORKERS STEPPED IN TO OFFER RELIEF AND RESOURCES. MPTF RECEIVED 3,501 CALLS FROM INDUSTRY MEMBERS AFFECTED BY THE WORK CONTRACTION. 74% OF THE INDUSTRY MEMBERS RECEIVING ASSISTANCE WERE BELOW-THE-LINE CREW.

MPTF DELIVERED OVER \$1.4 MILLION IN FINANCIAL AID TO INDUSTRY MEMBERS IN NEED. EMERGENCY FINANCIAL ASSISTANCE GRANTS ARE AVAILABLE TO QUALIFYING ENTERTAINMENT INDUSTRY INDIVIDUALS WHO ARE EXPERIENCING DIFFICULTY IN MEETING LIVING EXPENSES DUE TO ILLNESS, DISABILITY, UNEMPLOYMENT, OR INSUFFICIENT INCOME AND RESOURCES. GRANTS COVER A VARIETY OF ISSUES INCLUDING: IMMEDIATE NEEDS (FOOD, RENT, MORTGAGE PAYMENT, OR UTILITY BILLS) AS WELL AS INSURANCE PREMIUM GAPS, HOME CARE OR ROOM & BOARD IN RETIREMENT FACILITIES.

MPTF'S CAMPUS TV STATION PROVIDES LIVE SHOWS FOR AND BY RESIDENTS. INDUSTRY MEMBERS VOLUNTEER THEIR TIME TO HOST A VARIETY OF PROGRAMS. THE STATION OFFERS INTERACTIVE, LIVE PROGRAMING PROVIDED SEVERAL DAYS PER WEEK TO STRENGTHEN SOCIAL CONNECTIVITY AND TO PROVIDE A CREATIVE OUTLET FOR SENIORS AND INDUSTRY MEMBER VOLUNTEERS OF ALL AGES.

**Part V Facility Information** (continued)

**Section C. Supplemental Information for Part V, Section B.** Provide descriptions required for Part V, Section B, lines 2, 3j, 5, 6a, 6b, 7d, 11, 13b, 13h, 15e, 16j, 18e, 19e, 20a, 20b, 20c, 20d, 20e, 21c, 21d, 23, and 24. If applicable, provide separate descriptions for each hospital facility in a facility reporting group, designated by facility reporting group letter and hospital facility line number from Part V, Section A ("A, 1," "A, 4," "B, 2," "B, 3," etc.) and name of hospital facility.

MPTF'S COLLABORATION WITH AN INDEPENDENT DEVELOPER AND OPERATOR WAS COMPLETED IN 2024. THE PROCEEDS OF THE LAND SALE WILL SUPPORT MPTF'S MISSION. THE NEW OWNER WILL DEVELOP A SENIOR LIVING DEVELOPMENT ADJACENT TO THE MPTF WASSERMAN CAMPUS HILLS THAT WILL PROVIDE INDEPENDENT LIVING, ASSISTED LIVING AND MEMORY CARE.

THE SOCIAL SERVICES DEPARTMENT CONTINUES TO REACH OUT TO INDUSTRY MEMBERS IN THE COMMUNITY THROUGH EDUCATIONAL AND INFORMATIONAL PRESENTATIONS AT PROFESSIONAL GATHERING IN THE LOS ANGELES AREA. IN 2024, WE REACHED OUT TO OVER 1,614 INDUSTRY MEMBERS AT DIFFERENT EVENTS, INCLUDING IATSE LOCALS, TEAMSTERS, AND MPIPH.

MPTF ADDRESSES NEEDS THROUGH ITS INSURANCE COUNSELING AND PREMIUM SUPPORT, CRISIS SUPPORT AND CONFIDENTIAL REFERRALS. IN 2024, MPTF ENROLLED 1,089 LOW-INCOME OR UNINSURED CLIENTS INTO COVERAGE.

MPTF'S VETERANS BENEFITS PROGRAM ASSISTS ENTERTAINMENT COMMUNITY MEMBERS IN OBTAINING THE GOVERNMENT BENEFITS FOR WHICH THEY QUALIFY. SINCE ITS INCEPTION, MPTF'S VETERANS BENEFITS PROGRAM HAS SECURED OVER \$2,057,501 IN RETROACTIVE BENEFITS. IN 2024, MPTF SCREENED 561 VETERANS/SPOUSES FOR CURRENT OR FUTURE BENEFITS, CONNECTED VETERANS TO \$248,866 IN RETROACTIVE BENEFITS, AND SECURED \$15,505 IN ONGOING MONTHLY BENEFITS.

MPTF CONTINUES TO PROVIDE HIGH QUALITY INPATIENT SERVICES TO THOSE INDUSTRY MEMBERS SUFFERING MEMORY IMPAIRMENT OR RELATED ISSUES. MPTF ALSO PROVIDES INPATIENT GERIATRIC PSYCHIATRY SERVICES IN ITS 12 BED PRIVATE ROOM DEDICATED UNIT.

MPTF IS A CENTER OF EXCELLENCE UNDER THE SOUTHERN CALIFORNIA GERIATRIC SOCIAL WORK EDUCATION CONSORTIUM. DURING THE 2024/25 ACADEMIC YEAR, MPTF OFFERED TRAINING AND SPECIALIZED INTERNSHIPS TO 3 GSWEK STUDENTS FROM 3 DIFFERENT UNIVERSITIES (UCLA, USC, AND CAL STATE NORTHRIDGE). SINCE JOINING THE CONSORTIUM IN 2004, MPTF HAS HOSTED OVER 65 GRADUATE STUDENTS IN THIS IMPORTANT TRAINING PROGRAM. ON AVERAGE, THEY EACH CONTRIBUTE UP TO 600 HOURS OF SOCIAL SERVICE WORK PER INTERNSHIP DEPENDING ON THE CRITERIA OF THEIR UNIVERSITY.

THE DAILY CALL SHEET MATCHES ISOLATED OLDER ADULTS AND DISABLED MEMBERS OF THE ENTERTAINMENT COMMUNITY WITH INDUSTRY VOLUNTEERS WHO CONDUCT PHONE CALLS TO ENSURE A MODEL OF SOCIAL ENGAGEMENT. IN 2024, 106 VOLUNTEERS MADE 2,650 CALLS PROVIDING 2,818 HOURS OF SOCIAL CONVERSATION, REDUCING THE SOCIAL ISOLATION WHILE AT THE SAME TIME PROVIDING A SENSE OF PURPOSE AND MEANING TO BOTH VOLUNTEERS AND RECIPIENTS.

IN 2024, MPTF'S 711 VOLUNTEERS PROVIDED 42,729 HOURS AND MADE OVER 50,000 DIRECT SERVICE CONNECTIONS WITH MEMBERS OF THE ENTERTAINMENT COMMUNITY. THESE DEDICATED VOLUNTEERS ENHANCE THE QUALITY OF LIFE FOR SENIORS BY PROVIDING SOCIAL ENGAGEMENT, FOSTERING CREATIVITY, BUILDING TECHNOLOGY SKILLS, AND HELPING THEM STAY RELEVANT. THEIR EFFORTS ALLOW MPTF TO EXPAND ITS SERVICES, REACH AND SERVE MORE CLIENTS, AND ENGAGE INDUSTRY MEMBERS IN MEANINGFUL WAYS, ULTIMATELY SUPPORTING THE HEALTHY LIVING AND AGING OF OUR ENTERTAINMENT INDUSTRY FAMILY.

PASSING THE TORCH, MPTF'S NEWEST INITIATIVE, IS AN INTERGENERATIONAL

**Part V Facility Information** (continued)

**Section C. Supplemental Information for Part V, Section B.** Provide descriptions required for Part V, Section B, lines 2, 3j, 5, 6a, 6b, 7d, 11, 13b, 13h, 15e, 16j, 18e, 19e, 20a, 20b, 20c, 20d, 20e, 21c, 21d, 23, and 24. If applicable, provide separate descriptions for each hospital facility in a facility reporting group, designated by facility reporting group letter and hospital facility line number from Part V, Section A ("A, 1," "A, 4," "B, 2," "B, 3," etc.) and name of hospital facility.

MENTORSHIP PROGRAM ADDRESSING THE URGENT NEED TO INCREASE DIVERSITY AND DECREASE AGEISM IN THE ENTERTAINMENT INDUSTRY, FOCUSING ON UNDERSERVED COMMUNITIES. BY CONNECTING RETIREES WITH STUDENTS FROM HISTORICALLY UNDERREPRESENTED COMMUNITIES THE PROGRAM CHAMPIONS RELEVANCE, DIGNITY, AND PURPOSE FOR OLDER AND YOUNGER GENERATIONS. PASSING THE TORCH RECEIVED THE GENERATIONS UNITED INTERGENERATIONAL INNOVATION AWARD AND WAS RECOGNIZED BY THE NATIONAL COUNCIL ON AGING.

MOTION PICTURE AND TELEVISION HOSPITAL  
PART V, LINE 16C, FAP PLAIN LANGUAGE SUMMARY WEBSITE:  
[HTTPS://WWW.MPTF.COM/SERVICES/](https://www.mptf.com/services/)

MOTION PICTURE AND TELEVISION HOSPITAL:  
PART V, SECTION B, LINE 16J: A PLAN LANGUAGE FAP SUMMARY IS PROVIDED TO ALL PATIENTS ON ADMISSION. THE FAP IS ON CONSPICUOUS DISPLAY IN THE HOSPITAL ADMISSIONS AREA. THE HOSPITAL PATIENT BUSINESS SERVICES DEPARTMENT ALSO NOTIFIES PATIENTS ABOUT THE FAP DURING COMMUNICATIONS WITH PATIENTS RELATED TO OUTSTANDING BALANCES. THE FINANCIAL ASSISTANCE APPLICATION IS ALSO POSTED AT [HTTPS://MPTF.COM/HELP-PAYING-YOUR-BILL/](https://mptf.com/help-paying-your-bill/)



**Part VI Supplemental Information**

Provide the following information.

- 1 **Required descriptions.** Provide the descriptions required for Part I, lines 3c, 6a, and 7; Part II and Part III, lines 2, 3, 4, 8, and 9b.
- 2 **Needs assessment.** Describe how the organization assesses the health care needs of the communities it serves, in addition to any CHNAs reported in Part V, Section B.
- 3 **Patient education of eligibility for assistance.** Describe how the organization informs and educates patients and persons who may be billed for patient care about their eligibility for assistance under federal, state, or local government programs or under the organization's FAP.
- 4 **Community information.** Describe the community the organization serves, taking into account the geographic area and demographic constituents it serves.
- 5 **Promotion of community health.** Provide any other information important to describing how the organization's hospital facilities or other health care facilities further its exempt purpose by promoting the health of the community (for example, open medical staff, community board, use of surplus funds, etc.).
- 6 **Affiliated health care system.** If the organization is part of an affiliated health care system, describe the respective roles of the organization and its affiliates in promoting the health of the communities served.
- 7 **State filing of community benefit report.** If applicable, identify all states with which the organization, or a related organization, files a community benefit report.

**PART I, LINE 7:**

THE COSTING METHODOLOGY UTILIZED FOR PART I, LINE 7 AND PART II REPRESENTS DIRECT COST OF THE PROGRAMS PLUS AN ALLOCATION OF OVERHEAD AND INFORMATION TECHNOLOGY APPLIED USING RELEVANT COST DRIVERS. A COST-TO-CHARGE RATIO, DERIVED FROM FORM 990 INSTRUCTIONS, WORKSHEET 3, RATIO OF PATIENT CARE COST-TO-CHARGES, WAS USED TO CALCULATE THE AMOUNTS PRESENTED IN PART I, LINE 7B.

**PART II, COMMUNITY BUILDING ACTIVITIES:**

MPTF PROVIDES VARIOUS COMMUNITY BUILDING PROGRAMS AND SERVICES INCLUDING SUBSIDIES FOR RETIREMENT COMMUNITY RESIDENTS, SUBSIDIZED RETIREE ACTIVITIES, SAFETY ASSESSMENTS AND PHYSICAL IMPROVEMENTS TO RETIREES' HOMES IN THE COMMUNITY AND CHILDCARE SERVICES. APPROXIMATELY 51% OF MPTF'S RETIREMENT COMMUNITY RESIDENTS RECEIVE SOME LEVEL OF FINANCIAL SUBSIDY FROM MPTF (SUBSIDIES ON RENT, HEALTH INSURANCE PREMIUMS, CAREGIVING SUPPORT, MEDICATION, AND OTHER NECESSITIES). MPTF PROVIDES A VARIETY OF RETIREE ACTIVITIES DESIGNED TO ENCOURAGE MENTAL AND PHYSICAL ENGAGEMENT. THESE ACTIVITIES INCLUDE THE SABAN HEALTH AND WELLNESS CENTER OFFERING STATE OF THE ART AQUATIC AND LAND-BASED FITNESS PROGRAMS, VARIOUS LIFESTYLE AND FAMILY LEARNING COURSES, AND A MEDIA CENTER WHICH ENGAGES RETIREES IN WRITING, DEVELOPING, DIRECTING, AND PRODUCING PROGRAMMING FOR AN IN-HOUSE TELEVISION CHANNEL AND EXTERNAL OUTLETS. IN ADDITION, MPTF PROVIDES CHILDCARE SERVICES FOR APPROXIMATELY 63 CHILDREN AT THE SAMUEL GOLDWYN FOUNDATION CHILDCARE CENTER.

**PART III, LINE 2:**

AMOUNT REPORTED REPRESENTS ACTUAL AMOUNTS OWED THAT HAVE BEEN WRITTEN OFF.

**PART III, LINE 3:**

SINCE THERE WERE NO BAD DEBTS IN THE CURRENT YEAR, NONE WERE APPLICABLE TO THE PATIENTS ELIGIBLE UNDER THE FINANCIAL ASSISTANCE POLICY AND NO BAD DEBT WAS REPORTED AS COMMUNITY BENEFIT.

**PART III, LINE 4:**

THE ORGANIZATION DOES NOT HAVE A FOOTNOTE IN THE FINANCIAL STATEMENTS RELATED TO BAD DEBT. AMOUNTS ARE IMMATERIAL.

**PART III, LINE 8:**

432100 01-03-25

**Part VI Supplemental Information** (Continuation)

THE SHORTFALL REPORTED IS CONSIDERED COMMUNITY BENEFIT AS THE SERVICES PROVIDED MEET THE NEEDS OF THE COMMUNITY MPTF SERVES BUT ARE NOT EXPECTED TO BE FINANCIALLY SELF-SUPPORTING. THE SOURCE FOR THE SHORTFALL REPORTED ON LINE 7 IS THE AMOUNT AS FILED ON THE MEDICARE COST REPORT FOR 2024.

## PART III, LINE 9B:

DURING THE COLLECTION PROCESS, IF A PATIENT INDICATES AN INABILITY TO PAY THEY ARE PROVIDED AN OPPORTUNITY TO COMPLETE THE APPLICATION FOR HOSPITAL CHARITY. AFTER REVIEWING THE PACKAGE, AND IF THE PATIENT QUALIFIES, THE AMOUNTS FORGIVEN ARE RECORDED AS CHARITY.

## PART VI, LINE 2:

## NEEDS ASSESSMENT:

AS DESCRIBED IN SCHEDULE O, MPTF PROVIDES VARIOUS PROGRAMS AND CHARITABLE SERVICES TO THE ENTERTAINMENT COMMUNITY. MPTF REGULARLY EVALUATES THOSE SERVICES WITH INPUT FROM ENTERTAINMENT INDUSTRY-BASED HEALTH PLANS AND FRONT-LINE STAFF, INCLUDING PHYSICIANS AND OTHER CLINICAL STAFF, TO ENSURE THEY BEST MEET THE NEEDS OF THOSE SERVED. IN ADDITION, MPTF SOLICITS FEEDBACK FROM THOSE SERVED THROUGH REGULARLY CONDUCTED SATISFACTION SURVEYS. RESULTS OF THOSE SURVEYS ARE USED TO EVALUATE THE EFFECTIVENESS OF SERVICES AND IMPLEMENT IMPROVEMENTS WHEN NECESSARY.

## PART VI, LINE 3:

## PATIENT EDUCATION OF ELIGIBILITY FOR ASSISTANCE:

MPTF NOTIFIES PATIENTS OF THE OPPORTUNITY TO QUALIFY FOR CHARITY AT THE POINT OF REGISTRATION/ADMITTING. IN EACH SUCH AREA, SIGNS DESIGNED TO INFORM THE PATIENT OF THE AVAILABILITY OF CHARITY ARE POSTED. IN ADDITION, AFTER SERVICES HAVE BEEN PROVIDED, MPTF'S BILLING DEPARTMENT STAFF MAY BECOME AWARE THAT THE PATIENT MAY QUALIFY FOR CHARITY. IN SUCH CASES THE CHARITY APPLICATION IS COMPLETED, AND IF THE PATIENT QUALIFIES, THE BALANCE OF THE ACCOUNT WILL BE TREATED AS CHARITY. MPTF ALSO NOTIFIES PATIENTS OF FEDERAL, STATE AND LOCAL GOVERNMENT PROGRAMS AT THE POINT OF REGISTRATION/ ADMITTING INCLUDING MEDICARE AND MEDI-CAL, IF APPLICABLE. MPTF ALSO OFFERS SOCIAL SERVICES WHERE PATIENTS ARE INFORMED OF A WIDER ARRAY OF SERVICES AND PROGRAMS IN ADDITION TO THOSE FOCUSED ON HEALTH CARE.

## PART VI, LINE 4:

## COMMUNITY INFORMATION:

AS DESCRIBED IN SCHEDULE O, MPTF PROVIDES VARIOUS PROGRAMS AND CHARITABLE SERVICES TO THE ENTERTAINMENT COMMUNITY.

## PART VI, LINE 5:

## PROMOTION OF COMMUNITY HEALTH:

MPTF OPERATES A HOSPITAL LICENSED BY THE STATE OF CALIFORNIA AND REPORTS INFORMATION REGARDING THIS HOSPITAL ON FORM 990, SCHEDULE H, BUT MPTF IS NOT EXEMPT FROM TAXATION AS A HOSPITAL DESCRIBED IN INTERNAL REVENUE CODE IRC SECTION 170(B)(1)(A)(III). MPTF HAS BEEN RECOGNIZED BY THE IRS FOR THE PAST 103 YEARS AS A PUBLICLY SUPPORTED ORGANIZATION EXEMPT FROM TAXATION UNDER IRC SECTION 170(B)(1)(A)(VI).

MPTF PROVIDES VARIOUS PROGRAMS AND SERVICES DESIGNED TO POSITIVELY IMPACT THE OVERALL HEALTH OF THOSE SERVED. MPTF'S WASSERMAN CAMPUS PROVIDES RETIREES WITH A VIBRANT COMMUNITY AND BEAUTIFUL CAMPUS OFFERING FACILITIES, PROGRAMS AND SERVICES WHICH MAXIMIZE THE QUALITY OF RETIREMENT LIVING AND PROMOTE ENGAGEMENT.

Schedule H (Form 990)

**Part VI** Supplemental Information (Continuation)

PART VI, LINE 6:

THE ORGANIZATION DOES NOT HAVE AN AFFILIATED HEALTH SYSTEM.



Schedule I (Form 990) (Rev. 12-2024) MOTION PICTURE AND TELEVISION FUND

**Part III** Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SHELTER, MEDICAL CARE AND FOOD FOR INDIGENTS	1553	2,466,600.	0.	NONE	NONE

**Part IV** Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:  
 MPTF MANAGES THE USE OF FINANCIAL ASSISTANCE FUNDS THROUGH ITS SOCIAL SERVICES FUNCTION AND CASE COMMITTEE OF THE BOARD. MPTF'S SOCIAL SERVICE FUNCTION IS STAFFED WITH MASTERS LEVEL SOCIAL SERVICE PROFESSIONALS. AN APPLICANT COMPLETES A DETAILED APPLICATION WITH SUPPORTING DOCUMENT COPIES. THE SCREENING PROCESS FOR EACH APPLICANT INCLUDES A SOCIAL WORKER REVIEWING THE INFORMATION PRESENTED AND INTERVIEWING THE APPLICANT. ALL NEW CASES INCLUDE A REVIEW AND APPROVAL BY A MANAGER OR SUPERVISOR PRIOR TO PROVISION OF ANY FINANCIAL ASSISTANCE. IF THE CUMULATIVE AMOUNT OF FINANCIAL ASSISTANCE TO THE INDIVIDUAL EXCEEDS \$7,500 THE RELATED APPLICATION IS SUBMITTED TO MPTF'S SOCIAL SERVICES GOVERNING BODY FOR REVIEW AND APPROVAL. THE SOCIAL SERVICES GOVERNING BODY WILL REVISIT CASES AT LATER TIMES AND AMOUNT INTERVALS, AS SET FORTH BY BOARD COMMITTEE ACTION OR GUIDELINES.

**SCHEDULE J  
(Form 990)**

(Rev. December 2024)  
Department of the Treasury  
Internal Revenue Service

**Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest  
Compensated Employees  
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.  
Attach to Form 990.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

Open to Public  
Inspection

Name of the organization

MOTION PICTURE AND TELEVISION FUND

Employer identification number

95-1652916

**Part I Questions Regarding Compensation**

**1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- |  |  |
|--|--|
| <input type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use   |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence   |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees     |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

**b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

**3** Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee              | <input type="checkbox"/> Written employment contract                                |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input checked="" type="checkbox"/> Form 990 of other organizations     | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**4** During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

**Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.**

**5** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

**6** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

**7** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

**8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

**9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1a		
1b		
2		
3		
4a		X
4b	X	
4c		X
5a		X
5b		X
6a		X
6b		X
7	X	
8		X
9		

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

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



Schedule J (Form 990) (Rev. 12-2024) MOTION PICTURE AND TELEVISION FUND

**Part III Supplemental Information**

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 4B:

MPTF PROVIDES A STANDARD PROGRAM OF HEALTH, WELFARE AND RETIREMENT BENEFITS TO ALL OF ITS EMPLOYEES AND LIMITED PERQUISITES TO SOME OF ITS EXECUTIVES. PRIOR TO 2017, MPTF OFFERED A SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN (EXECUTIVE SERP). DURING THE YEAR, AN AGGREGATE AMOUNT OF \$25,757 WAS DISTRIBUTED TO FORMER MPTF EMPLOYEES. UNDER THE EXECUTIVE SERP, MPTF IS CONTRACTUALLY OBLIGATED TO MAKE THESE DISTRIBUTIONS.

PART I, LINE 7:

MPTF MAINTAINS AN ANNUAL INCENTIVE PLAN THAT ALLOWS CERTAIN EXECUTIVES TO EARN AN INCENTIVE AWARD. THE CEO'S INCENTIVE PAY FOR THE 2024 PLAN YEAR WAS APPROVED BY THE COMPENSATION COMMITTEE AND THE FULL BOARD AND PAID IN 2024.

**SCHEDULE K  
(Form 990)**

(Rev. December 2024)  
Department of the Treasury  
Internal Revenue Service

**Supplemental Information on Tax-Exempt Bonds**

Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI. Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

MOTION PICTURE AND TELEVISION FUND

Employer identification number  
95-1652916

**Part I Bond Issues** SEE PART VI FOR COLUMN (F) CONTINUATIONS

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled financing	
						Yes	No	Yes	No	Yes	No
CALIFORNIA STATEWIDE COMMUNITIES A DEVELOPMENT AUTHORITY	68-0164610	NONE	12/28/17	19,805,000.	PROCEEDS USED TO CURRENTLY REFUND PRIOR BO		X		X		X
B											
C											
D											

**Part II Proceeds**

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Amount of bonds retired		13,590,000.						
2 Amount of bonds legally defeased								
3 Total proceeds of issue		19,805,000.						
4 Gross proceeds in reserve funds								
5 Capitalized interest from proceeds								
6 Proceeds in refunding escrows		358,173.						
7 Issuance costs from proceeds								
8 Credit enhancement from proceeds								
9 Working capital expenditures from proceeds								
10 Capital expenditures from proceeds		19,446,827.						
11 Other spent proceeds								
12 Other unspent proceeds								
13 Year of substantial completion		2017						

- 14 Were the bonds issued as part of a refunding issue of tax-exempt bonds (or, if issued prior to 2018, a current refunding issue)?
- 15 Were the bonds issued as part of a refunding issue of taxable bonds (or, if issued prior to 2018, an advance refunding issue)?
- 16 Has the final allocation of proceeds been made?
- 17 Does the organization maintain adequate books and records to support the final allocation of proceeds?

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

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

**Part III Private Business Use**

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X						
2 Are there any lease arrangements that may result in private business use of bond-financed property?		X						
3a Are there any management or service contracts that may result in private business use of bond-financed property?	X							
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?	X							
c Are there any research agreements that may result in private business use of bond-financed property?		X						
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		.00	%				%	
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government		.00	%				%	
6 Total of lines 4 and 5		.00	%				%	
7 Does the bond issue meet the private security or payment test?		X						
8a Has there been a sale or disposition of any of the bond-financed property to a non-governmental person other than a 501(c)(3) organization since the bonds were issued?		X						
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of			%				%	
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?	X							

**Part IV Arbitrage**

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X						
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?	X							
b Exception to rebate?		X						
c No rebate due?		X						
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
3 Is the bond issue a variable rate issue?	X							

**Part IV Arbitrage** (continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X						
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X						
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?		X						
6 Were any gross proceeds invested beyond an available temporary period?								
7 Has the organization established written procedures to monitor the requirements of section 148?	X							

**Part V Procedures To Undertake Corrective Action**

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation isn't available under applicable regulations?	X							

**Part VI Supplemental Information.** Provide additional information for responses to questions on Schedule K. See instructions.

SCHEDULE K, PART I, BOND ISSUES:

(A) ISSUER NAME: CALIFORNIA STATEWIDE COMMUNITIES DEVELOPMENT AUTHORITY

(F) DESCRIPTION OF PURPOSE:  
 PROCEEDS USED TO CURRENTLY REFUND PRIOR BOND ISSUE

**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2024**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

Complete if the organizations answered "Yes" on Form 990, Part IV, line 29 or 30.  
Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Name of the organization

MOTION PICTURE AND TELEVISION FUND

Employer identification number

95-1652916

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art .....				
2 Art - Historical treasures .....				
3 Art - Fractional interests .....				
4 Books and publications .....	X		400.	SEE PART II
5 Clothing and household goods .....	X		23,536.	SEE PART II
6 Cars and other vehicles .....				
7 Boats and planes .....				
8 Intellectual property .....				
9 Securities - Publicly traded .....	X	13	1,174,226.	SEE PART II
10 Securities - Closely held stock .....				
11 Securities - Partnership, LLC, or trust interests .....				
12 Securities - Miscellaneous .....				
13 Qualified conservation contribution - Historic structures .....				
14 Qualified conservation contribution - Other .....				
15 Real estate - Residential .....				
16 Real estate - Commercial .....				
17 Real estate - Other .....				
18 Collectibles .....	X	3	68,300.	
19 Food inventory .....				
20 Drugs and medical supplies .....				
21 Taxidermy .....				
22 Historical artifacts .....				
23 Scientific specimens .....				
24 Archeological artifacts .....				
25 Other ( DONOR GIFTS ) .....	X	81	308,424.	SEE PART II
26 Other ( ) .....				
27 Other ( ) .....				
28 Other ( ) .....				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement .....

29

0

- 30a During the year, did the organization receive by contribution any property reported on Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? .....
- b If "Yes," describe the arrangement in Part II.
- 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? .....
- 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? .....
- b If "Yes," describe in Part II.
- 33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

	Yes	No
30a		X
31	X	
32a	X	

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

Schedule M (Form 990) 2024

**Part II** **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, LINE 30B:

THE NUMBERS REPORTED IN PART I, COLUMN (B) REPRESENT THE NUMBER OF CONTRIBUTIONS.

IN ADDITION, ALL NONCASH CONTRIBUTIONS WERE RECORDED AT THE ESTIMATED VALUE PROVIDED BY THE DONOR.

Lined area for supplemental information.

**SCHEDULE O**  
**(Form 990)**

(Rev. December 2024)

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

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

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

Open to Public  
Inspection

Name of the organization

MOTION PICTURE AND TELEVISION FUND

Employer identification number

95-1652916

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

MPTF PROVIDES VARIOUS PROGRAMS AND CHARITABLE SERVICES INCLUDING RETIREMENT COMMUNITY ACCOMODATIONS, TEMPORARY FINANCIAL ASSISTANCE BASED ON NEED, SOCIAL SERVICES, CHILD CARE AND VARIOUS WELLNESS AND EDUCATION PROGRAMS. MPTF'S RETIREMENT COMMUNITY, LOCATED ON THE WASSERMAN CAMPUS IN WOODLAND HILLS (OFTEN REFERRED TO AS 'THE HOME'), OFFERS INDEPENDENT AND ASSISTED LIVING ACCOMODATIONS FOR ENTERTAINMENT INDUSTRY RETIREES AND THEIR SPOUSES BASED ON YEARS OF SERVICE REGARDLESS OF THEIR ABILITY TO PAY THE FEES. MPTF PROVIDED OVER \$2.8 MILLION IN RESIDENTIAL CARE SUBSIDY IN 2024. TOTAL 2024 RESIDENTIAL DAYS WERE 51,071. MPTF PROVIDED TEMPORARY FINANCIAL ASSISTANCE TO INDUSTRY MEMBERS OF APPROXIMATELY \$2.5 MILLION IN 2024 FOR RENT, FOOD, HOUSING, HEALTH INSURANCE PREMIUMS AND OTHER NEEDS. MPTF'S COMMUNITY-BASED SOCIAL SERVICE ACTIVITIES INCLUDE INDIVIDUAL AND CASE MANAGEMENT, ASSESSMENTS, INFORMATION REFERRALS, AND INCREASED ASSISTANCE FOR SENIORS WISHING TO REMAIN IN THEIR OWN HOMES THROUGH HOME MODIFICATIONS AND VOLUNTEER VISITING PROGRAMS. TOTAL SOCIAL SERVICE CONTACTS IN 2024 WERE 33,180.

MPTF IS ALSO COMMITTED TO BUILDING GEOGRAPHICALLY-BASED COMMUNITIES OF INTEREST AMONG INDUSTRY RETIREES. THESE INCLUDE ACTIVITIES LIKE WALKING GROUPS, COMMUNITY "CONVERSATIONS" WITH PROGRAMS OF SPEAKERS, MOVIE NIGHTS, BOOK CLUBS, AND OTHER SOCIAL EVENTS. THESE ACTIVITIES TARGET INDUSTRY RETIREES WHO ARE CHOOSING TO "AGE IN PLACE" IN THEIR HOMES AS OPPOSED TO CHOOSING INSTITUTIONAL SETTINGS.

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

MPTF PROVIDES SERVICES TO THE ENTERTAINMENT COMMUNITY AND THERE ARE MPTF ENTITY DIRECTORS WHO HAVE VARYING ROLES WITH OTHER ENTERTAINMENT RELATED ENTITIES. THERE MAY BE OTHER DIRECT TRANSACTIONS RESULTING IN ADDITIONAL BUSINESS RELATIONSHIPS. SOME OF THESE ENTERTAINMENT RELATED ENTITIES INCLUDE INDUSTRY-BASED PENSION AND HEALTH PLANS, INDUSTRY RELATED UNIONS AND FOR PROFIT ENTERTAINMENT INDUSTRY COMPANIES.

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

THE FORM 990 WAS PREPARED BY BAKER TILLY ADVISORY GROUP, LP, BASED ON INFORMATION PROVIDED BY THE ORGANIZATION'S STAFF. THE DRAFT FORM 990 AND ALL SUPPORTING SCHEDULES WERE REVIEWED IN DETAIL BY MPTF MANAGEMENT AND THE CHAIR OF THE AUDIT COMMITTEE. THE COMPLETED FORM 990 WAS APPROVED BY THE AUDIT COMMITTEE AND WAS PROVIDED TO THE FULL BOARD OF DIRECTORS FOR REVIEW AND COMMENT PRIOR TO FILING.

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

AN ANNUAL CONFLICT OF INTEREST QUESTIONNAIRE IS SENT TO ALL BOARD MEMBERS AND EMPLOYEES AT THE LEVEL OF MANAGER AND ABOVE. THE VICE PRESIDENT OF LEGAL AFFAIRS COLLECTS AND REVIEWS THE QUESTIONNAIRES AND THEN PROVIDES A SUMMARY OF THE ANSWERS TO THE CEO. IN CONSULTATION WITH THE CHAIR OF THE BOARD, THE CEO PURSUES ANY NECESSARY FOLLOW-UP. THE BOARD'S BYLAWS ALSO REQUIRE NOTIFICATION TO THE CHAIR OF ANY POTENTIAL CONFLICTS AT THE TIME THE CONFLICT ARISES. ONCE NOTICE OF A POTENTIAL CONFLICT IS RECEIVED, THE CHAIR OF THE BOARD APPOINTS A DISINTERESTED PERSON OR COMMITTEE TO PERFORM DUE DILIGENCE ON THE POTENTIAL CONFLICT. ONCE THE DUE DILIGENCE IS

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

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

LHA 432211 01-15-25

Name of the organization MOTION PICTURE AND TELEVISION FUND	Employer identification number 95-1652916
--	--

PERFORMED A DISCUSSION OF THE FACTS IS PRESENTED TO THE REMAINDER OF THE BOARD MEMBERS (WITH THE MEMBER POTENTIALLY CONFLICTED NOT PRESENT) WHO VOTE ON WHETHER THE TRANSACTION IS IN THE BEST INTEREST OF THE CORPORATION. IF A CONFLICT IS DISCOVERED WHICH WAS NOT REPORTED, THE BOARD MAY TAKE APPROPRIATE DISCIPLINARY OR CORRECTIVE ACTION.

FORM 990, PART VI, SECTION B, LINE 15:  
 THE COMPENSATION COMMITTEE OF THE BOARD OF DIRECTORS ("COMPENSATION COMMITTEE") IS RESPONSIBLE FOR ESTABLISHING THE EXECUTIVE COMPENSATION POLICY AND PROGRAMS FOR SENIOR EXECUTIVES OF MPTF, AND THE MPTF COMPENSATION COMMITTEE OF MANAGEMENT (THE "MANAGEMENT COMMITTEE") IS RESPONSIBLE FOR ADMINISTERING THE COMPENSATION POLICY AND PROGRAMS FOR ALL OTHER MPTF EXECUTIVES AND EMPLOYEES. THE COMPENSATION COMMITTEE ANNUALLY REVIEWS THE PERFORMANCE AND COMPENSATION OF THE CEO AND OTHER SENIOR EXECUTIVES AND APPROVES ANY CHANGES TO BASE SALARY, INCENTIVE PLAN GOALS, OBJECTIVES AND AWARDS, AND EMPLOYMENT AGREEMENTS. THE MANAGEMENT COMMITTEE PERFORMS THE SAME TASKS FOR ALL OTHER MPTF EXECUTIVES AND EMPLOYEES. AN INDEPENDENT OUTSIDE CONSULTANT IS RETAINED TO PROVIDE MARKET COMPARABILITY DATA AND ADVISE ON EXTERNAL MARKET PRACTICES, INCLUDING RELEVANT INFORMATION FROM THE FORM 990S OF OTHER ORGANIZATIONS. THE GENERAL POLICY AND/OR PRACTICE OF THE COMPENSATION COMMITTEE AND THE MANAGEMENT COMMITTEE IS TO COMPENSATE MPTF'S EXECUTIVES AT APPROXIMATELY THE MEDIAN OF THE MARKET FOR COMPARABLE ROLES AND RESPONSIBILITIES, WITH SUCH EXCEPTIONS AS THE COMPENSATION COMMITTEE OR, AS APPLICABLE, THE MANAGEMENT COMMITTEE, DEEMS TO BE REASONABLE IN CONSULTATION WITH THE OUTSIDE CONSULTANT.

FORM 990, PART VI, SECTION C, LINE 19:  
 THE ORGANIZATION MAKES ITS AUDITED CONSOLIDATED FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC ON ITS WEBSITE. THE ORGANIZATION'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE NOT CURRENTLY AVAILABLE TO THE PUBLIC.

FORM 990, PART IX, LINE 11G, OTHER FEES:

OTHER PROFESSIONAL FEES:	
PROGRAM SERVICE EXPENSES	2,143,082.
MANAGEMENT AND GENERAL EXPENSES	370,403.
FUNDRAISING EXPENSES	197,880.
TOTAL EXPENSES	2,711,365.

REGISTRY NURSES:	
PROGRAM SERVICE EXPENSES	1,778,124.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	1,778,124.

OTHER PURCHASES SERVICES:	
PROGRAM SERVICE EXPENSES	3,787,523.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	3,787,523.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	8,277,012.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
MINIMUM PENSION LIABILITY	6,381,562.
CHANGE IN SPLIT INTEREST AGREEMENTS	-2,637.
NET LOSS FROM UNCOLLECTIBLE PLEDGES	-6,000.







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

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

- 1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
  - a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
  - b Gift, grant, or capital contribution to related organization(s)
  - c Gift, grant, or capital contribution from related organization(s)
  - d Loans or loan guarantees to or for related organization(s)
  - e Loans or loan guarantees by related organization(s)
  - f Dividends from related organization(s)
  - g Sale of assets to related organization(s)
  - h Purchase of assets from related organization(s)
  - i Exchange of assets with related organization(s)
  - j Lease of facilities, equipment, or other assets to related organization(s)
  - k Lease of facilities, equipment, or other assets from related organization(s)
  - l Performance of services or membership or fundraising solicitations for related organization(s)
  - m Performance of services or membership or fundraising solicitations by related organization(s)
  - n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
  - o Sharing of paid employees with related organization(s)
  - p Reimbursement paid to related organization(s) for expenses
  - q Reimbursement paid by related organization(s) for expenses
  - r Other transfer of cash or property to related organization(s)
  - s Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	Yes	No
(1)						X
(2)						X
(3)						X
(4)						X
(5)						X
(6)						X



EXTENDED TO NOVEMBER 17, 2025
Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))

OMB No. 1545-0047

2024

For calendar year 2024 or other tax year beginning and ending

Department of the Treasury
Internal Revenue Service

Go to www.irs.gov/Form990T for instructions and the latest information.
Do not enter SSN numbers on this form as it may be made public if your organization is an 501(c)(3).

Open to Public Inspection for
501(c)(3) Organizations Only

A Check box if address changed. B Exempt under section 501(c)(3) 408(e) 220(e) 408A 530(a) 529(a) 529A. Print or Type Name of organization MOTION PICTURE AND TELEVISION FUND. Number, street, and room or suite no. 23388 MULHOLLAND DR, MAIL STOP 218. City or town, state or province, country, and ZIP or foreign postal code WOODLAND HILLS, CA 91364-2792. C Book value of all assets at end of year 125,444,585.

G Check organization type 501(c) corporation 501(c) trust 401(a) trust Other trust State college/university. H Check if filing only to claim Credit from Form 8941 Refund shown on Form 2439 Elective payment amount from Form 3800. I Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation. J Enter the number of attached Schedules A (Form 990-T) 2. K During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes No. L The books are in care of JEFF ARNETT Telephone number (818) 876-4168.

Part I Total Unrelated Business Taxable Income

Table with 11 rows and 2 columns. Row 1: Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions) 47. Row 2: Reserved. Row 3: Add lines 1 and 2 47. Row 4: Charitable contributions (see instructions for limitation rules) 0. Row 5: Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3 47. Row 6: Deduction for net operating loss. See instructions. Row 7: Total of unrelated business taxable income before specific deduction and section 199A deduction. Subtract line 6 from line 5 47. Row 8: Specific deduction (generally \$1,000, but see instructions for exceptions) 1,000. Row 9: Trusts. Section 199A deduction. See instructions. Row 10: Total deductions. Add lines 8 and 9 1,000. Row 11: Unrelated business taxable income. Subtract line 10 from line 7. If line 10 is greater than line 7, enter zero 0.

Part II Tax Computation

Table with 7 rows and 2 columns. Row 1: Organizations taxable as corporations. Multiply Part I, line 11 by 21% (0.21) 0. Row 2: Trusts taxable at trust rates. See instructions for tax computation. Income tax on the amount on Part I, line 11, from: Tax rate schedule or Schedule D (Form 1041). Row 3: Proxy tax. See instructions. Row 4a: Amount from Form 4255, Part I, line 3, column (q). Row 4b: Other tax amounts. See instructions. Row 5: Alternative minimum tax. Row 6: Tax on noncompliant facility income. See instructions. Row 7: Total. Add lines 3 through 6 to line 1 or 2, whichever applies 0.

Part III Tax and Payments

Table with 4 main rows and sub-rows. Row 1a: Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116). Row 1b: Other credits (see instructions). Row 1c: General business credit. Attach Form 3800 (see instructions). Row 1d: Credit for prior-year minimum tax (attach Form 8801 or 8827). Row 1e: Total credits. Add lines 1a through 1d. Row 2: Subtract line 1e from Part II, line 7. Row 3a: Amount from Form 4255, Part I, line 3, column (r) (see instructions). Row 3b: Amount due from Form 8611. Row 3c: Amount due from Form 8697. Row 3d: Amount due from Form 8866. Row 3e: Other amounts due (see instructions). Row 3f: Total amounts due. Add lines 3a through 3e. Row 4: Total tax. Add lines 2 and 3f (see instructions). Check if includes tax previously deferred under section 1294. Enter tax amount here.

<b>Part III Tax and Payments</b> (continued)			
5	Current net 965 tax liability paid from Form 965-A, Part II, column (k) .....	5	0.
6a	Payments: Preceding year's overpayment credited to the current year .....	6a	
b	Current year's estimated tax payments. Check if section 643(g) election applies <input type="checkbox"/> .....	6b	
c	Tax deposited with Form 8868 .....	6c	
d	Foreign organizations: Tax paid or withheld at source (see instructions) .....	6d	
e	Backup withholding (see instructions) .....	6e	
f	Credit for small employer health insurance premiums (attach Form 8941) .....	6f	
g	Elective payment election amount from Form 3800 .....	6g	
h	Payment from Form 2439 .....	6h	
i	Credit from Form 4136 .....	6i	
j	Other (see instructions) .....	6j	
7	<b>Total payments.</b> Add lines 6a through 6j .....	7	
8	Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/> .....	8	
9	<b>Tax due.</b> If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed .....	9	
10	<b>Overpayment.</b> If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid .....	10	
11	Enter the amount of line 10 you want: <b>Credited to 2025 estimated tax</b> <span style="float: right;"><b>Refunded</b></span> .....	11	

<b>Part IV Statements Regarding Certain Activities and Other Information</b> (see instructions)			
1	At any time during the 2024 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here .....	Yes	No
2	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? .....		x
3	Enter the amount of tax-exempt interest received or accrued during the tax year ..... \$ .....		
4	Enter available pre-2018 NOL carryovers here \$ ..... Do not include any post-2017 NOL carryover shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by any deduction reported on Part I, line 6.		
5	Post-2017 NOL carryovers. Enter the Business Activity Code and available post-2017 NOL carryovers. Don't reduce the amounts shown below by any NOL claimed on any Schedule A, Part II, line 17 for the tax year. See instructions.		
Business Activity Code		Available post-2017 NOL carryover	
525990		\$ 410.	
525990		\$ 37,184.	
		\$	
		\$	
6a	Reserved for future use .....		
6b	Reserved for future use .....		

**Part V Supplemental Information**  
Provide any additional information. See instructions.

<b>Sign Here</b>	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.			
	Signature of officer	Date	Title	PRESIDENT
				May the IRS discuss this return with the preparer shown below (see instructions)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed
	LAUREN A. HAVERLOCK	LAUREN A. HAVERLOCK	11/10/25	PTIN P00545829
	Firm's name	Firm's address		Firm's EIN
BAKER TILLY ADVISORY GROUP, LP	225 S. LAKE AVENUE, SUITE 900 PASADENA, CA 91101		39-0859910	
			Phone no.	310-477-0450

SCHEDULE A (Form 990-T)

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

2024

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990T for instructions and the latest information. Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

A Name of the organization MOTION PICTURE AND TELEVISION FUND B Employer identification number 95-1652916 C Unrelated business activity code (see instructions) 525990 D Sequence: 1 of 2

E Describe the unrelated trade or business TELEVISION PRODUCTION

Table with 4 columns: Part I Unrelated Trade or Business Income, (A) Income, (B) Expenses, (C) Net. Rows include Gross receipts or sales, Cost of goods sold, Gross profit, Capital gain net income, Net gain (loss), Income (loss) from a partnership, Rent income, Unrelated debt-financed income, Interest, annuities, royalties, and rents, Investment income, Exploited exempt activity income, Advertising income, Other income, and Total.

Part II Deductions Not Taken Elsewhere. See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income

Table with 18 rows of deductions: Compensation of officers, directors, and trustees; Salaries and wages; Repairs and maintenance; Bad debts; Interest; Taxes and licenses; Depreciation; Less depreciation claimed; Depletion; Contributions to deferred compensation plans; Employee benefit programs; Excess exempt expenses; Excess readership costs; Other deductions; Total deductions; Unrelated business income before net operating loss deduction; Deduction for net operating loss; Unrelated business taxable income.

For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2024

Part III Cost of Goods Sold Enter method of inventory valuation

Table with 8 rows for inventory valuation: 1 Inventory at beginning of year, 2 Purchases, 3 Cost of labor, 4 Additional section 263A costs, 5 Other costs, 6 Total, 7 Inventory at end of year, 8 Cost of goods sold. Includes a Yes/No checkbox for section 263A rules.

Part IV Rent Income (From Real Property and Personal Property Leased With Real Property)

Table for rent income with 5 rows and 4 columns (A, B, C, D). Rows include: 1 Description of property, 2 Rent received or accrued (a, b, c), 3 Total rents received or accrued, 4 Deductions directly connected with the income, 5 Total deductions.

Part V Unrelated Debt-Financed Income (see instructions)

Table for unrelated debt-financed income with 11 rows and 4 columns (A, B, C, D). Rows include: 1 Description of debt-financed property, 2 Gross income, 3 Deductions, 4 Amount of average acquisition debt, 5 Average adjusted basis, 6 Division of line 4 by line 5, 7 Gross income reportable, 8 Total gross income, 9 Allocable deductions, 10 Total allocable deductions, 11 Total dividends-received deductions.

**Part VI Interest, Annuities, Royalties, and Rents From Controlled Organizations** (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			6. Deductions directly connected with income in column 5
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	
(1)					
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations				
7. Taxable income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				
			Add columns 5 and 10. Enter here and on Part I, line 8, column (A).	Add columns 6 and 11. Enter here and on Part I, line 8, column (B).
			0.	0.

Totals

**Part VII Investment Income of a Section 501(c)(7), (9), or (17) Organization** (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach statement)	4. Set-asides (attach statement)	5. Total deductions and set-asides (add cols 3 and 4)
(1)				
(2)				
(3)				
(4)				
		Add amounts in column 2. Enter here and on Part I, line 9, column (A).		Add amounts in column 5. Enter here and on Part I, line 9, column (B).
		0.		0.

**Part VIII Exploited Exempt Activity Income, Other Than Advertising Income** (see instructions)

1	Description of exploited activity:	
2	Gross unrelated business income from trade or business. Enter here and on Part I, line 10, column (A)	
3	Expenses directly connected with production of unrelated business income. Enter here and on Part I, line 10, column (B)	
4	Net income (loss) from unrelated trade or business. Subtract line 3 from line 2. If a gain, complete lines 5 through 7	
5	Gross income from activity that is not unrelated business income	
6	Expenses attributable to income entered on line 5	
7	Excess exempt expenses. Subtract line 5 from line 6, but do not enter more than the amount on line 4. Enter here and on Part II, line 12	

Part IX Advertising Income

1 Name(s) of periodical(s). Check box if reporting two or more periodicals on a consolidated basis.

A B C D

Enter amounts for each periodical listed above in the corresponding column.

Table with 4 columns (A, B, C, D) and 2 rows (2, a)

Table with 4 columns (A, B, C, D) and 2 rows (3, a)

Table with 4 columns (A, B, C, D) and 8 rows (4, 5, 6, 7, 8, a)

Part X Compensation of Officers, Directors, and Trustees (see instructions)

Table with 4 columns (1. Name, 2. Title, 3. Percentage of time devoted to business, 4. Compensation attributable to unrelated business)

Total. Enter here and on Part II, line 1

Part XI Supplemental Information (see instructions)

Blank lines for supplemental information

FORM 990-T (A)	INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT 1
DESCRIPTION		NET INCOME OR (LOSS)
CAMPBELL DEVON PRODUCTIONS, INC - ORDINARY BUSINESS INCOME (LOSS)		958.
CAMPBELL DEVON PRODUCTIONS, INC - INTEREST INCOME		4.
TOTAL INCLUDED ON SCHEDULE A, PART I, LINE 5		962.

FORM 990-T (A)	OTHER DEDUCTIONS	STATEMENT 2
DESCRIPTION		AMOUNT
ACCOUNTING FEES		727.
TOTAL TO SCHEDULE A, PART II, LINE 14		727.

FORM 990-T (A)	POST 2017 NOL SCHEDULE	STATEMENT 3
PRIOR YEAR POST 2017 NOL	NOL DEDUCTION	CARRYFORWARD OF POST 2017 NOL
410.	188.	222.

990-T SCH A	POST-2017 NET OPERATING LOSS DEDUCTION			STATEMENT 4
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
12/31/23	410.	0.	410.	410.
NOL CARRYOVER AVAILABLE THIS YEAR			410.	410.

SCH A (990-T)

SCHEDULE A NOL DETAIL

STATEMENT 5

TAXABLE INCOME FROM ALL ENTITIES	235.
THIS ENTITIES PORTION OF TAXABLE INCOME	235.
THIS ENTITIES PERCENTAGE OF PRE-2018 NET OPERATING LOSS	100.00%
THIS ENTITIES ALLOWED PRE-2018 NET OPERATING LOSS	0.
TAXABLE INCOME AFTER PRE-2018 NET OPERATING LOSS	235.
80% INCOME LIMITATION	188.
POST-2017 AVAILABLE	410.
LESSER OF POST-2017 NET OPERATING LOSS OR 80% LIMITATION	188.

SCHEDULE A (Form 990-T)

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

2024

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990T for instructions and the latest information. Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

A Name of the organization MOTION PICTURE AND TELEVISION FUND B Employer identification number 95-1652916 C Unrelated business activity code (see instructions) 525990 D Sequence: 2 of 2

E Describe the unrelated trade or business S CORP & PSHIP INVEST

Table with 4 columns: Part I Unrelated Trade or Business Income, (A) Income, (B) Expenses, (C) Net. Rows include Gross receipts or sales, Cost of goods sold, Capital gain net income, Income (loss) from a partnership or an S corporation, etc.

Part II Deductions Not Taken Elsewhere. See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income

Table with 18 rows for deductions: Compensation of officers, directors, and trustees; Salaries and wages; Repairs and maintenance; Bad debts; Interest; Taxes and licenses; Depreciation; Less depreciation claimed; Depletion; Contributions to deferred compensation plans; Employee benefit programs; Excess exempt expenses; Excess readership costs; Other deductions; Total deductions; Unrelated business income before net operating loss deduction; Deduction for net operating loss; Unrelated business taxable income.

For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2024

Part III Cost of Goods Sold Enter method of inventory valuation

Table with 8 rows for Cost of Goods Sold: 1 Inventory at beginning of year, 2 Purchases, 3 Cost of labor, 4 Additional section 263A costs, 5 Other costs, 6 Total, 7 Inventory at end of year, 8 Cost of goods sold. Includes a Yes/No checkbox for section 263A rules.

Part IV Rent Income (From Real Property and Personal Property Leased With Real Property)

Table for Rent Income with 4 columns (A, B, C, D) and 5 rows. Rows include: 1 Description of property, 2 Rent received or accrued (a, b, c), 3 Total rents received or accrued, 4 Deductions directly connected with the income, 5 Total deductions.

Part V Unrelated Debt-Financed Income (see instructions)

Table for Unrelated Debt-Financed Income with 4 columns (A, B, C, D) and 11 rows. Rows include: 1 Description of debt-financed property, 2 Gross income from or allocable to debt-financed property, 3 Deductions directly connected with or allocable to debt-financed property (a, b, c), 4 Amount of average acquisition debt, 5 Average adjusted basis, 6 Divide line 4 by line 5, 7 Gross income reportable, 8 Total gross income, 9 Allocable deductions, 10 Total allocable deductions, 11 Total dividends-received deductions.

**Part VI Interest, Annuities, Royalties, and Rents From Controlled Organizations** (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations				
7. Taxable income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				
			Add columns 5 and 10. Enter here and on Part I, line 8, column (A).	Add columns 6 and 11. Enter here and on Part I, line 8, column (B).
<b>Totals</b>			0.	0.

**Part VII Investment Income of a Section 501(c)(7), (9), or (17) Organization** (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach statement)	4. Set-asides (attach statement)	5. Total deductions and set-asides (add cols 3 and 4)
(1)				
(2)				
(3)				
(4)				
		Add amounts in column 2. Enter here and on Part I, line 9, column (A).		Add amounts in column 5. Enter here and on Part I, line 9, column (B).
<b>Totals</b>		0.		0.

**Part VIII Exploited Exempt Activity Income, Other Than Advertising Income** (see instructions)

1	Description of exploited activity: _____	
2	Gross unrelated business income from trade or business. Enter here and on Part I, line 10, column (A) _____	2
3	Expenses directly connected with production of unrelated business income. Enter here and on Part I, line 10, column (B) _____	3
4	Net income (loss) from unrelated trade or business. Subtract line 3 from line 2. If a gain, complete lines 5 through 7 _____	4
5	Gross income from activity that is not unrelated business income _____	5
6	Expenses attributable to income entered on line 5 _____	6
7	Excess exempt expenses. Subtract line 5 from line 6, but do not enter more than the amount on line 4. Enter here and on Part II, line 12 _____	7



FORM 990-T (A)	INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT 6
DESCRIPTION		NET INCOME OR (LOSS)
K-1 INVESTMENT INCOME - ORDINARY BUSINESS INCOME (LOSS)		-473.
K-1 INVESTMENT INCOME - INTEREST INCOME		23.
K-1 INVESTMENT INCOME - OTHER PORTFOLIO INCOME (LOSS)		16.
TOTAL INCLUDED ON SCHEDULE A, PART I, LINE 5		-434.

FORM 990-T (A)	OTHER DEDUCTIONS	STATEMENT 7
DESCRIPTION		AMOUNT
ACCOUNTING FEES		773.
OTHER DEDUCTIONS - PORTFOLIO FROM K-1 INVESTMENT INCOME		8.
TOTAL TO SCHEDULE A, PART II, LINE 14		781.

990-T SCH A	POST-2017 NET OPERATING LOSS DEDUCTION		STATEMENT 8	
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
12/31/19	4,301.	0.	4,301.	4,301.
12/31/20	5,158.	0.	5,158.	5,158.
12/31/22	27,659.	0.	27,659.	27,659.
12/31/23	66.	0.	66.	66.
NOL CARRYOVER AVAILABLE THIS YEAR			37,184.	37,184.

**SCHEDULE D**  
**(Form 1120)**

Department of the Treasury  
Internal Revenue Service

**Capital Gains and Losses**  
Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L,  
1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T.  
Go to [www.irs.gov/Form1120](http://www.irs.gov/Form1120) for instructions and the latest information.

OMB No. 1545-0123

**2024**

Name  MOTION PICTURE AND TELEVISION FUND	Employer identification number  95-1652916
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Did the corporation dispose of any investment(s) in a qualified opportunity fund during the tax year?  Yes  No  
If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

<b>Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less</b>				
See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b .....				
1b Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked .....				
2 Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked .....				
3 Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked .....				-4.
4 Short-term capital gain from installment sales from Form 6252, line 26 or 37 .....				4
5 Short-term capital gain or (loss) from like-kind exchanges from Form 8824 .....				5
6 Unused capital loss carryover (attach computation) .....				6 ( )
7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column h .....				-4.

<b>Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year</b>				
See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b .....				
8b Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked .....				
9 Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked .....				
10 Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked .....				-51.
11 Enter gain from Form 4797, line 7 or 9 .....				11
12 Long-term capital gain from installment sales from Form 6252, line 26 or 37 .....				12
13 Long-term capital gain or (loss) from like-kind exchanges from Form 8824 .....				13
14 Capital gain distributions .....				14
15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column h .....				-51.

<b>Part III Summary of Parts I and II</b>				
16 Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15) .....				16
17 Net capital gain. Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7) .....				17
18 Add lines 16 and 17. Enter here and on Form 1120, page 1, line 8, or the applicable line on other returns .....				18 0.

Note: If losses exceed gains, see *Capital Losses* in the instructions.





**SCHEDULE D**  
**(Form 1120)**

Department of the Treasury  
Internal Revenue Service

**Capital Gains and Losses**

Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T.  
Go to [www.irs.gov/Form1120](http://www.irs.gov/Form1120) for instructions and the latest information.

OMB No. 1545-0123

**2024**

Name

Employer identification number

MOTION PICTURE AND TELEVISION FUND

95-1652916

Did the corporation dispose of any investment(s) in a qualified opportunity fund during the tax year?  Yes  No  
If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

**Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less**

See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b				
1b Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked				
2 Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked				
3 Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked				-4.
4 Short-term capital gain from installment sales from Form 6252, line 26 or 37				4
5 Short-term capital gain or (loss) from like-kind exchanges from Form 8824				5
6 Unused capital loss carryover (attach computation)				6 ( )
7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column h				7 -4.

**Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year**

See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b				
8b Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked				
9 Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked				
10 Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked				-51.
11 Enter gain from Form 4797, line 7 or 9				11
12 Long-term capital gain from installment sales from Form 6252, line 26 or 37				12
13 Long-term capital gain or (loss) from like-kind exchanges from Form 8824				13
14 Capital gain distributions				14
15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column h				15 -51.

**Part III Summary of Parts I and II**

16 Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15)	16	
17 Net capital gain. Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7)	17	
18 Add lines 16 and 17. Enter here and on Form 1120, page 1, line 8, or the applicable line on other returns	18	0.

Note: If losses exceed gains, see *Capital Losses* in the instructions.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 1120.

Schedule D (Form 1120) 2024



Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on page 1

Social security number or taxpayer identification no.

95-1652916

MOTION PICTURE AND TELEVISION FUND

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part II Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

[ ] (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

[ ] (E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

[X] (F) Long-term transactions not reported to you on Form 1099-B

Table with 8 columns: (a) Description of property, (b) Date acquired, (c) Date sold or disposed of, (d) Proceeds (sales price), (e) Cost or other basis, (f) Code(s), (g) Amount of adjustment, (h) Gain or (loss). Includes row for INCOME (LOSS) FROM SCHEDULES K-1 with value <51.>

2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) <51.>

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

# **Motion Picture and Television Fund and Affiliated Entities**

**Consolidated Financial Statements  
December 31, 2024 and 2023**

# Motion Picture and Television Fund and Affiliated Entities

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## **Report of Independent Auditors**

The Board of Directors  
Motion Picture and Television Fund and Affiliated Entities

### **Report on the Audit of the Financial Statements**

#### ***Opinion***

We have audited the consolidated financial statements of Motion Picture and Television Fund and Affiliated Entities, which comprise the consolidated balance sheets as of December 31, 2024 and 2023, the related consolidated statements of operations and changes in net assets and cash flows for the years then ended, and the related notes to the consolidated financial statements.

In our opinion, the accompanying consolidated financial statements present fairly, in all material respects, the financial position of Motion Picture and Television Fund and Affiliated Entities as of December 31, 2024 and 2023, and the results of their operations and their cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

#### ***Basis for Opinion***

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Motion Picture and Television Fund and Affiliated Entities and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

#### ***Responsibilities of Management for the Financial Statements***

Management is responsible for the preparation and fair presentation of the consolidated financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Motion Picture and Television Fund and Affiliated Entities' ability to continue as a going concern within one year after the date that the financial statements are issued.

### ***Auditor's Responsibilities for the Audit of the Financial Statements***

Our objectives are to obtain reasonable assurance about whether the consolidated financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the consolidated financial statements.

In performing an audit in accordance with GAAS, we:

- ⊛ Exercise professional judgment and maintain professional skepticism throughout the audit.
- ⊛ Identify and assess the risks of material misstatement of the consolidated financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the consolidated financial statements.
- ⊛ Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of Motion Picture and Television Fund and Affiliated Entities' internal control. Accordingly, no such opinion is expressed.
- ⊛ Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the consolidated financial statements.
- ⊛ Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about Motion Picture and Television Fund and Affiliated Entities' ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

*Moss Adams LLP*

Los Angeles, California

May 5, 2025

**Motion Picture and Television Fund and Affiliated Entities**  
**Consolidated Balance Sheets**  
**December 31, 2024 and 2023**

	2024	2023
<b>Assets</b>		
Current assets		
Cash and cash equivalents	\$ 4,560,000	\$ 6,611,000
Patient accounts receivable	2,398,000	3,404,000
Other receivables	872,000	851,000
Pledges receivable, net	6,883,000	2,557,000
Other current assets	1,207,000	1,194,000
Total current assets	15,920,000	14,617,000
Investments		
Land, buildings, and equipment, net	55,610,000	60,040,000
Insurance recoveries receivable, net of current portion	15,469,000	17,197,000
Pledges receivable, net of current portion	4,628,000	4,348,000
Note receivable	23,905,000	13,353,000
Assets limited as to use, noncurrent	5,150,000	5,000,000
Assets held under split-interest agreements	697,000	3,767,000
Operating lease right-of-use assets, net	131,000	136,000
Other assets	339,000	600,000
	383,000	410,000
Total assets	\$ 122,232,000	\$ 119,468,000
<b>Liabilities and net assets</b>		
Current liabilities		
Accounts payable	\$ 3,750,000	\$ 3,857,000
Accrued liabilities	6,708,000	7,839,000
Current portion of operating lease liabilities	206,000	264,000
Current portion of long-term debt	790,000	755,000
Total current liabilities	11,454,000	12,715,000
Long-term debt, net of current portion		
Operating lease liabilities, net of current portion	5,257,000	6,020,000
Accrued pension benefits, net of current portion	148,000	354,000
Insurance claim liability, net of current portion	11,020,000	15,715,000
Actuarial liability under split-interest agreements	9,522,000	8,105,000
	86,000	88,000
Total liabilities	37,487,000	42,997,000
Commitments and contingencies (Note 17)		
Net assets		
Without donor restrictions	16,959,000	23,167,000
With donor restrictions	67,786,000	53,304,000
Total net assets	84,745,000	76,471,000
Total liabilities and net assets	\$ 122,232,000	\$ 119,468,000

The accompanying notes are an integral part of these consolidated financial statements.

**Motion Picture and Television Fund and Affiliated Entities**  
**Consolidated Statement of Operations and Changes in Net Assets**  
**Year Ended December 31, 2024**

	<u>Without Donor Restrictions</u>	<u>With Donor Restrictions</u>	<u>Total</u>
<b>Revenues, gains, and other support</b>			
Patient service and resident revenue	\$ 35,413,000	\$ -	\$ 35,413,000
Other operating revenue	902,000	-	902,000
Contributions	19,761,000	21,245,000	41,006,000
Investment income	1,097,000	1,419,000	2,516,000
Interest income	150,000	-	150,000
Gain (loss) on sale of investments	218,000	(160,000)	58,000
Unrealized gain (loss) on investments	1,910,000	(477,000)	1,433,000
Net assets released from restrictions used for operations	<u>7,419,000</u>	<u>(7,419,000)</u>	<u>-</u>
Total revenues, gains, and other support	<u>66,870,000</u>	<u>14,608,000</u>	<u>81,478,000</u>
<b>Expenses</b>			
Salaries, wages, and benefits	49,663,000	-	49,663,000
Purchased services	15,743,000	-	15,743,000
Professional fees	5,563,000	-	5,563,000
Supplies	2,389,000	-	2,389,000
Depreciation	2,446,000	-	2,446,000
Interest and financing costs	386,000	-	386,000
Other expenses	<u>3,393,000</u>	<u>-</u>	<u>3,393,000</u>
Total expenses	<u>79,583,000</u>	<u>-</u>	<u>79,583,000</u>
(Deficiency) excess of revenues, gains, and other support over expenses	(12,713,000)	14,608,000	1,895,000
<b>Other changes in net assets</b>			
Minimum pension liability adjustment	6,382,000	-	6,382,000
Net assets released from restrictions used for purchase of property and equipment	123,000	(123,000)	-
Change in split-interest agreements	<u>-</u>	<u>(3,000)</u>	<u>(3,000)</u>
Total other changes in net assets	<u>6,505,000</u>	<u>(126,000)</u>	<u>6,379,000</u>
Total changes in net assets	(6,208,000)	14,482,000	8,274,000
<b>Net assets</b>			
Beginning of year	<u>23,167,000</u>	<u>53,304,000</u>	<u>76,471,000</u>
End of year	<u>\$ 16,959,000</u>	<u>\$ 67,786,000</u>	<u>\$ 84,745,000</u>

The accompanying notes are an integral part of these consolidated financial statements.

**Motion Picture and Television Fund and Affiliated Entities**  
**Consolidated Statement of Operations and Changes in Net Assets**  
**Year Ended December 31, 2023**

	<u>Without Donor Restrictions</u>	<u>With Donor Restrictions</u>	<u>Total</u>
<b>Revenues, gains, and other support</b>			
Patient service and resident revenue	\$ 33,894,000	\$ -	\$ 33,894,000
Other operating revenue	1,680,000	-	1,680,000
Contributions	28,617,000	5,458,000	34,075,000
Investment income	450,000	1,158,000	1,608,000
(Loss) gain on sale of investments	(228,000)	427,000	199,000
Unrealized gain on investments	351,000	681,000	1,032,000
Gain on sale of real estate	25,779,000	-	25,779,000
Net assets released from restrictions used for operations	<u>5,037,000</u>	<u>(5,037,000)</u>	<u>-</u>
Total revenues, gains, and other support	<u>95,580,000</u>	<u>2,687,000</u>	<u>98,267,000</u>
<b>Expenses</b>			
Salaries, wages, and benefits	47,509,000	-	47,509,000
Purchased services	13,373,000	-	13,373,000
Professional fees	4,732,000	-	4,732,000
Supplies	2,231,000	-	2,231,000
Depreciation	2,441,000	-	2,441,000
Market adjustment on interest rate swap	(9,000)	-	(9,000)
Interest and financing costs	410,000	-	410,000
Other expenses	<u>9,472,000</u>	<u>-</u>	<u>9,472,000</u>
Total expenses	<u>80,159,000</u>	<u>-</u>	<u>80,159,000</u>
Excess of revenues, gains, and other support over expenses	15,421,000	2,687,000	18,108,000
<b>Other changes in net assets</b>			
Minimum pension liability adjustment	932,000	-	932,000
Net assets released from restrictions used for purchase of property and equipment	178,000	(178,000)	-
Change in split-interest agreements	<u>-</u>	<u>135,000</u>	<u>135,000</u>
Total other changes in net assets	<u>1,110,000</u>	<u>(43,000)</u>	<u>1,067,000</u>
Total changes in net assets	16,531,000	2,644,000	19,175,000
<b>Net assets</b>			
Beginning of year	<u>6,636,000</u>	<u>50,660,000</u>	<u>57,296,000</u>
End of year	<u>\$ 23,167,000</u>	<u>\$ 53,304,000</u>	<u>\$ 76,471,000</u>

The accompanying notes are an integral part of these consolidated financial statements.

**Motion Picture and Television Fund and Affiliated Entities**  
**Consolidated Statements of Cash Flows**  
**Years Ended December 31, 2024 and 2023**

	2024	2023
<b>Cash flows from operating activities</b>		
Changes in net assets	\$ 8,274,000	\$ 19,175,000
Adjustments to reconcile change in net assets to net cash from operating activities		
Unrealized gain on investments, net	(1,433,000)	(1,032,000)
Gain on sale of investments, net	(58,000)	(199,000)
Gain on sale of real estate	-	(25,779,000)
Minimum pension liability adjustment	(6,382,000)	(932,000)
Depreciation and amortization, including bond issuance costs	2,473,000	2,468,000
Amortization of operating lease right-of-use assets	261,000	258,000
Receipt of contributed securities	(1,163,000)	(121,000)
Change in fair value of interest rate swap	-	(13,000)
Contributions restricted for buildings and equipment	(180,000)	(1,119,000)
Changes in annuity and trust liabilities	25,000	(111,000)
Contributions restricted for long-term investment	(500,000)	(200,000)
Changes in assets and liabilities		
Patient accounts receivable	1,006,000	898,000
Other receivables	29,000	16,000
Notes receivable	(150,000)	-
Insurance recoveries receivable	(330,000)	(547,000)
Pledges receivable	(14,878,000)	2,029,000
Other current assets and other assets	14,000	532,000
Operating lease right-of-use assets and lease liabilities, net	(264,000)	(253,000)
Accounts payable and accrued liabilities	(1,563,000)	2,302,000
Accrued pension benefits	1,687,000	1,928,000
Insurance claim liability	1,764,000	1,244,000
	(11,368,000)	544,000
Cash from operating activities		
<b>Cash flows from investing activities</b>		
Purchases of buildings and equipment	(740,000)	(910,000)
Proceeds from sale of real estate	-	20,779,000
Purchases of investments	(71,075,000)	(34,355,000)
Proceeds from sales of investments	78,164,000	17,709,000
	6,349,000	3,223,000
Cash from investing activities		
<b>Cash flows from financing activities</b>		
Principal payment on long-term debt	(755,000)	-
Payments made under split-interest agreements	(27,000)	(27,000)
Proceeds from contributions for		
Buildings and equipment	180,000	1,119,000
Long-term investment	500,000	200,000
	(102,000)	1,292,000
Cash from financing activities		
Net (decrease) increase in cash and cash equivalents	(5,121,000)	5,059,000
<b>Cash and cash equivalents</b>		
Beginning of year	10,378,000	5,319,000
End of year	\$ 5,257,000	\$ 10,378,000
<b>Supplemental disclosures of cash flow information</b>		
Contributed securities	\$ 1,163,000	\$ 121,000
Interest paid	359,000	383,000
Accrued purchases of buildings and equipment	47,000	69,000
Issuance of note receivable in connection with sale of real estate	-	5,000,000

The accompanying notes are an integral part of these consolidated financial statements.

# Motion Picture and Television Fund and Affiliated Entities

## Notes to Consolidated Financial Statements

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### 1. Organization

Founded in 1921, Motion Picture and Television Fund (MPTF) is an integrated health and social service organization that supports eligible active and retiree members of the entertainment industry (the Industry) and their families in Southern California. MPTF's operations include various community-based programs; the MPTF campus, which includes a 122-bed multilevel care hospital offering geriatric psychiatry, skilled nursing, and memory care; and a 186-unit senior living community with independent and assisted living accommodations. MPTF's activities include providing social services, palliative care, temporary financial assistance, various wellness and education programs, and childcare in MPTF's freestanding childcare facility.

MPTF is the sole member of The Industry Advantage, LLC (TIA LLC), f/k/a The Industry Health Network LLC. TIA LLC provides health insurance services to the entertainment community.

Motion Picture and Television Fund and its affiliated entities are consolidated for financial statement presentation. All intercompany balances and transactions have been eliminated in the consolidated financial statements.

### 2. Summary of Significant Accounting Policies

#### Basis of presentation

The accompanying consolidated financial statements are prepared under the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America (U.S. GAAP). MPTF classifies resources into two categories: without donor restrictions and with donor restrictions.

- *Without donor restrictions* – All revenues, expenditures, gains, and losses that are not restricted by donors are included in net assets without donor restrictions. Expenditures funded by restricted contributions are also reported in the without donor restrictions net asset class because funds used in accordance with donor stipulations result in the release of such restrictions.
- *With donor restrictions* – Net assets with donor restrictions can only be used in accordance with stipulations imposed by the donor and include unconditional pledges and accumulated appreciation on restricted endowments. Restrictions may either expire with the passage of time, be satisfied by action of MPTF, or require that the funds be held in perpetuity. The donors of substantially all net assets held in perpetuity permit MPTF to use the income earned on the related investments for specific purposes.

*Expiration of donor-imposed restrictions* – Net assets are released from donor restrictions by incurring expenses to satisfy the restricted purpose and/or by occurrence of an event specified by the donor, including passage of time. Donor restrictions on long-lived assets or cash to construct or acquire long-lived assets are considered to have expired when the assets are placed in service or expenditures exceed the amount of the gift.

MPTF has elected to present contributions with donor-imposed restrictions that are fulfilled in the same period as donated within the net assets without donor restrictions classification.

## Motion Picture and Television Fund and Affiliated Entities

### Notes to Consolidated Financial Statements

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#### Cash and cash equivalents

Cash and cash equivalents include cash on hand and cash in checking and savings accounts. Marketable securities purchased with original maturities of three months or less are considered cash equivalents. At December 31, 2024 and 2023, restricted cash equivalents were comprised of funds held by trustees.

The following table provides a reconciliation of cash and cash equivalents and restricted cash equivalents reported within the accompanying consolidated balance sheets to the accompanying consolidated statements of cash flows as of December 31, 2024 and 2023:

	2024	2023
Cash and cash equivalents	\$ 4,560,000	\$ 6,611,000
Restricted cash and cash equivalents, included in assets limited as to use	697,000	3,767,000
Cash and cash equivalents and restricted cash and cash equivalents as reported in statements of cash flows	\$ 5,257,000	\$ 10,378,000

#### Accounts receivable and allowance for credit losses

MPTF determines the allowance for credit losses based upon historical experience and management's evaluation of, among other factors, current and reasonably supportable expected future economic conditions and patients' willingness or ability to pay. Receivables are written off in the period deemed uncollectible.

#### Assets limited as to use

Assets limited as to use include amounts held by trustees in accordance with indenture requirements for payments related to long-term debt and are classified as noncurrent assets. At December 31, 2024 and 2023, assets limited to use consisted of cash and cash equivalents.

#### Investments

Investments consist of money market funds, mutual funds (including fixed-income and equity funds), equities, U.S. government notes, and other holdings comprised of non-publicly traded investments (alternative investments). Investments are classified as noncurrent as investments are not expected to be used for current operations in the next year. Marketable securities and alternative investments are valued in accordance with the Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) 820, *Fair Value Measurements*. Investment earnings (including gains and losses on investments, interest, and dividends) are included in operating revenue unless the income or loss is restricted by donor or law. MPTF records its investment income, realized and unrealized gains, and losses on investments of donor-restricted funds as additions to or deductions from the appropriate net asset category based on the donor's restriction.

#### Land, buildings, and equipment

Land, buildings, and equipment are stated at cost except for donated assets, which are recorded at fair market value at the date of donation. Depreciation is calculated on the straight-line basis over each asset's estimated useful life, which ranges from 5 to 40 years for building and improvements or 3 to 20 years for furniture and equipment; land improvements are estimated to have a useful life of 10 years. Estimated useful lives are assigned based on the Estimated Useful Lives of Depreciable Hospital Assets guide published by the American Hospital Association. In addition, MPTF records a liability for the fair value of any conditional asset retirement obligation, if determinable.

## Motion Picture and Television Fund and Affiliated Entities

### Notes to Consolidated Financial Statements

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Significant replacements and improvements are capitalized, while maintenance and repairs, which do not improve or extend the life of the respective asset, are charged to expense as incurred. Upon sale or disposal of land, buildings and equipment, the cost and accumulated depreciation are removed from the respective accounts, and any gain or loss is included in the consolidated statements of operations and changes in net assets. MPTF capitalizes all expenditures for land, buildings, and equipment in excess of \$1,000.

#### **Pledges receivable**

Unconditional promises to give (pledges) are recorded as receivables and contribution revenue and require MPTF to distinguish between contributions received for each net asset category in accordance with donors' wishes. Multiyear pledges are recorded at fair value on the date of donation. Contributions to be received after one year or more are discounted at an appropriate discount rate commensurate with the risks involved and applicable to the years in which the pledges are received and recorded in their respective net asset category. Amortization of the discount is calculated using the effective interest method and included in contribution revenue in the consolidated statements of operations and changes in net assets. Conditional promises to give are not included as support until the conditions have been substantially met and any estimated allowances for credit losses have been recorded.

#### **Split-interest agreements**

Split-interest gift agreements consist primarily of irrevocable charitable gift annuities. Using the actuarial method, when a gift is received, the present value of estimated future payments to be made to the beneficiaries is recorded as a liability, based upon life expectancy tables and appropriate discount rates. The remainder is recorded as contribution revenue in the appropriate net asset category.

The actuarial liability is based on the present value of future payments discounted at rates ranging from 2.6% to 5.9% over estimated time periods derived from the Internal Revenue Service (IRS) actuarial tables on life expectancy. Liabilities are adjusted during the term of the agreements for changes in the fair value of the assets, accretion of discounts, and other changes in the estimates of future benefits. Valuation follows generally accepted actuarial methods and is based on the requirements of ASC 958. Assets held under split-interest agreements are stated at fair market value and are invested in publicly traded securities.

#### **Lease accounting**

MPTF accounts for leases in accordance with FASB Accounting Standards Update (ASU) No. 2016-02, *Leases (Topic 842)* (ASC 842). MPTF determines if a contract is a lease or contains a lease at the inception of the contract and reassesses that conclusion if the contract is modified. All leases are assessed for classification as an operating lease or a finance lease. Right-of-use (ROU) assets represent MPTF's right to use an underlying asset for the lease term, and lease liabilities represent its obligation to make lease payments arising from the lease. MPTF does not obtain its right to use and control the asset until the lease commencement date.

MPTF's lease liabilities are recognized at the applicable lease commencement date based on the present value of the lease payments required to be paid over the lease term. As MPTF's leases do not provide an implicit rate, MPTF uses its risk-free rate to discount the lease commencement date. The ROU asset equals the carrying amount of the related lease liability, adjusted for any lease payments made prior to lease commencement and lease incentives provided by the lessor. Variable lease payments are expensed as incurred and do not factor into the measurement of the applicable ROU asset or lease liability.

## Motion Picture and Television Fund and Affiliated Entities

### Notes to Consolidated Financial Statements

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The terms of MPTF's leases equal the noncancelable period of the lease, including any rent-free periods provided by the lessors, and include options to renew or extend the lease (including by not terminating the lease) that MPTF is reasonably certain to exercise. MPTF establishes the term of each lease at lease commencement and reassesses that term in subsequent periods when one of the triggering events outlined in ASC 842 occurs. Operating lease costs for lease payments are recognized on a straight-line basis over the lease term.

#### **Debt issuance costs**

Costs incurred in the issuance of long-term debt, including legal fees, bank fees, and accounting and consulting costs, are amortized on the straight-line basis over the term of the related long-term debt. The straight-line method approximates the effective interest method. Unamortized debt issuance costs are presented as a reduction to long-term debt in accordance with ASU No. 2015-03, *Interest—Imputation of Interest (Subtopic 835-30): Simplifying the Presentation of Debt Issuance Costs*. Unamortized debt issuance costs totaling \$168,000 and \$195,000 at December 31, 2024 and 2023, respectively, are included as a reduction of long-term debt in the consolidated balance sheets.

#### **Interest rate swap agreement**

Prior to its expiration on January 1, 2024, MPTF used an interest rate swap to manage the interest rate exposure of its variable-rate bonds. The swap was recognized on the consolidated balance sheets at its fair value, and changes in the fair value and net cash payments or receipts were recorded in the consolidated statements of operations and changes in net assets.

#### **(Deficiency) excess of revenues, gains, and other support over expenses**

The consolidated statements of operations and changes in net assets include the caption (deficiency) excess of revenues, gains, and other support over expenses (operating indicator). Consistent with industry practice, changes in unrestricted net assets that are excluded from the operating indicator include contributions of long-lived assets (including assets acquired using contributions that, by donor restriction, were to be used for the purpose of acquiring such assets), changes in split-interest agreements, and minimum pension liability adjustments. As such, MPTF's operating indicator was (\$12,713,000) and \$15,421,000 for the years ended December 31, 2024 and 2023, respectively.

#### **Revenue recognition**

Patient service and resident revenue is reported at the estimated net realizable amounts from patients, third-party payors, and others for services rendered, including estimated retroactive adjustments under reimbursement agreements with third-party payors. Retroactive adjustments are accrued on an estimated basis in the period the related services are rendered and are adjusted in future periods as final settlements are determined.

## Motion Picture and Television Fund and Affiliated Entities

### Notes to Consolidated Financial Statements

The following table shows patient service and resident revenue by line of service:

	Year Ended December 31,	
	2024	2023
Long-term care services		
Medi-Cal	\$ 21,096,000	\$ 19,069,000
Private	1,310,000	2,082,000
Other	833,000	491,000
Acute inpatient services		
Medicare	918,000	1,046,000
Kaiser Permanente Health Plan	3,365,000	3,830,000
Other	406,000	284,000
Residential services		
Private	7,485,000	7,092,000
Total	<u>\$ 35,413,000</u>	<u>\$ 33,894,000</u>

Beginning and ending contract balances were as follows:

	<u>December 31, 2024</u>	<u>December 31, 2023</u>	<u>January 1, 2023</u>
Patient accounts receivable	\$ 2,398,000	\$ 3,404,000	\$ 4,302,000

#### Bequests and trusts

Amounts to be received from bequests and trusts are recorded at the time MPTF becomes entitled to the assets and the amounts to be received are assured and reasonably determined. Amounts to be received are recorded as other receivables on the consolidated balance sheets.

At December 31, 2024 and 2023, MPTF has been named as a beneficiary in certain bequests and trusts that have not been recorded as they do not meet all the criteria for income recognition.

#### Charity care and community benefit

MPTF provides charity care for certain non-elective healthcare services to qualifying individuals who complete an application, which is based on federal poverty guidelines. MPTF also provides various community services including retirement housing and assisted living services, as well as various social service and community welfare programs and direct emergency financial assistance to eligible Industry employees, retirees, and their immediate families.

#### Professional and general liability

MPTF has a claims-made policy for all professional and general liability coverage, with nominal deductibles, that was purchased on January 1, 2003. Liabilities for MPTF's retained risk related to the professional and general liability coverage are determined by an actuary. The amounts representing the current portion of the professional and general liability and insurance recoveries receivable were \$385,000 and \$364,000 in both other current assets and accrued liabilities at December 31, 2024 and 2023, respectively. The amounts representing the long-term components of the professional and general liability were \$3,521,000 and \$3,321,000 in insurance recoveries receivable and \$3,869,000 and \$3,647,000 in insurance claims liability, approximating a net liability of \$347,000 and \$326,000, at December 31, 2024 and 2023, respectively.

## Motion Picture and Television Fund and Affiliated Entities

### Notes to Consolidated Financial Statements

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#### Workers' compensation insurance

MPTF maintains a workers' compensation insurance policy that became effective in November 2020 and renews on July 1, 2025. The policy covers MPTF's employees and has a \$250,000 per-occurrence deductible and a \$2,750,000 annual aggregate. During the period of November 2012 through November 2020, MPTF maintained a workers' compensation insurance policy with a \$250,000 per-occurrence deductible and an annual aggregate of \$3,000,000. Liabilities for MPTF's retained risk related to the coverage are determined by an actuary. The amounts representing the current portion of the workers' compensation liability were \$268,000 and \$240,000 in other receivables and \$1,367,000 and \$1,042,000 in accrued liabilities at December 31, 2024 and 2023, respectively. The amounts representing the long-term components of the workers' compensation liability were \$1,107,000 and \$1,027,000 in insurance recoveries receivable and \$5,653,000 and \$4,458,000 in insurance claims liability, approximating a net liability of \$5,645,000 and \$4,233,000, at December 31, 2024 and 2023, respectively.

MPTF allocated \$3,152,000 and \$3,298,000 of its bank deposits for workers' compensation insurance trusts at December 31, 2024 and 2023, respectively. All deposited amounts are included in investments in the consolidated balance sheets.

#### Income taxes

MPTF is a nonprofit organization determined by the IRS and the California Franchise Tax Board to be exempt from federal and state income taxes, except to the extent of any unrelated business income. Certain of the affiliated entities included in the consolidated financial statements are subject to federal and state income taxes.

#### Concentration of credit risk

Financial instruments that potentially subject MPTF to credit risk consist principally of temporary cash investments, receivables, and investments in marketable equity and other securities.

MPTF invests its excess cash in deposits with major financial institutions. MPTF has not experienced any losses on its temporary cash investments. Financial instruments that potentially expose MPTF to concentrations of credit risk consist principally of cash and cash equivalents on deposit in accounts with financial institutions, the balances of which frequently exceed federally insured limits. If any of the financial institutions with which MPTF does business were to be placed into receivership, MPTF might be unable to access the cash it has on deposit with such institution. If MPTF were unable to access its cash and cash equivalents as needed, its financial position and ability to operate its business could be adversely affected.

MPTF receives payment for services rendered to patients from the federal and state governments under the Medicare and Medi-Cal programs and from other payors. The following table summarizes the percentages of gross patient accounts receivable from all payors:

	December 31,	
	2024	2023
Medi-Cal	66 %	72 %
Medicare	20 %	15 %
Kaiser	7 %	9 %
Others	7 %	4 %
Total	100 %	100 %

## Motion Picture and Television Fund and Affiliated Entities

### Notes to Consolidated Financial Statements

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MPTF believes there is no significant credit risk associated with patient receivables from government programs. MPTF continually monitors and adjusts the reserves associated with patient receivables. MPTF estimates bad debt expense and the allowance for doubtful accounts based on historical collection experience.

#### **Use of estimates**

The preparation of financial statements in conformity with U.S. GAAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the consolidated financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

#### **Fair value measurements**

MPTF applies the provisions of ASC 820, *Fair Value Measurements*, which defines fair value as the exchange price that would be received for an asset or paid to transfer a liability (an exit price) in the principal or most advantageous market for the asset or liability in an orderly transaction between market participants at the respective measurement date. The assets reported at fair value by MPTF on a recurring basis include investments, assets held under split-interest agreements, and the interest rate swap obligation. At December 31, 2024 and 2023, MPTF's financial instruments included accounts receivable, accounts payable, and other liabilities. The fair values of these financial instruments approximate their carrying values due to their short-term maturities.

The following describes the hierarchy of inputs and the primary valuation methodologies used by MPTF for financial instruments measured at fair value on a recurring basis. The three level inputs are as follows:

- *Level 1* – Quoted prices in active markets for identical assets or liabilities.
- *Level 2* – Inputs other than Level 1 that are observable, either directly or indirectly, such as quoted prices for similar assets or liabilities, quoted prices in markets that are not active, or other inputs that are observable or can be corroborated by observable market data for substantially the same term of the assets or liabilities.
- *Level 3* – Unobservable inputs that are supported by little or no market activity and that are significant to the fair value of the assets or liabilities. Significant increases or decreases in these inputs in isolation may result in a significantly lower or higher fair value measurement, respectively.

Assets and liabilities measured at fair value are based on one or more of the following three valuation techniques:

- *Market approach* – Prices and other relevant information generated by market transactions involving identical or comparable assets or liabilities;
- *Cost approach* – Amount that would be required to replace the service capacity of an asset (i.e., replacement cost); and
- *Income approach* – Techniques to convert future amounts to a single present value amount based on market expectations (including present value techniques, option-pricing models, and lattice models).

## Motion Picture and Television Fund and Affiliated Entities

### Notes to Consolidated Financial Statements

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The valuation techniques above may be used for assets and liabilities measured using Level 3 inputs and may use unobservable inputs such as projections, estimates, and management's interpretation of current market data. These unobservable inputs are only utilized to the extent that observable inputs are not available or not cost-effective to obtain.

MPTF applies the authoritative guidance contained in ASC 820-10, *Fair Value Measurements and Disclosures*, for estimating the fair value of investment funds that have calculated net asset value (NAV) per share in accordance with ASC 946-10, *Financial Services – Investment Companies* (formerly the American Institute of Certified Public Accountants Audit and Accounting Guide, *Investment Companies*). According to the guidance, in circumstances in which NAV per share of an investment is not determinative of fair value, a reporting entity is permitted to estimate the fair value of an investment in an investment fund using the NAV per share of the investment (or its equivalent) without further adjustment if the NAV per share of the investment is determined in accordance with ASC 946-10 as of the reporting entity's measurement date. Accordingly, MPTF uses NAV, as reported by money managers, as a practical expedient to determine the fair value of investments in investment funds that (a) do not have a readily determinable fair value and (b) either have the attributes of an investment fund or prepare their financial statements consistently with the measurement principles of an investment fund.

The following is a description of the valuation methodologies used for assets and liabilities measured at fair value on a recurring basis:

- *Money market funds* – Valued at the closing price reported on the active market on which the individual securities are traded at the measurement date.
- *Mutual funds* – Mutual funds classified as Level 1 under the fair value hierarchy are valued using the unadjusted quoted prices in active markets that are available at the measurement date. The composition of MPTF's investments in mutual funds at December 31, 2024 and 2023 was approximately 66% and 80% fixed income, 18% and 0% equity securities, and 16% and 20% U.S. notes, respectively. Investments in mutual funds consist primarily of large capitalization securities and are diversified among several industries; issuers; and growth, value, indexed, bond, and international funds.
- *Equities* – Equities include stocks and exchange-traded funds. Exchange-traded funds in this category are comprised primarily of underlying stocks and other ownership interests in companies. Valuation is based on unadjusted quoted prices for identical assets in active markets that MPTF can access at the measurement date.
- *U.S. government notes* – Valuation is based on unadjusted quoted prices for identical assets in active markets that MPTF can access at the measurement date. MPTF considers all U.S. government notes to be based on Level 1 fair value measurements.
- *Alternative investments* – These investments are valued at the NAV of the investments.
- *Interest rate swap obligation* – Valued at the net present value of future cash flows based on quotes from pricing sources and market data.

The following methods were used to estimate the fair value of all other financial instruments:

- *Cash and cash equivalents* – The carrying amount approximates fair value.
- *Long-term debt* – The carrying value of MPTF's long-term debt approximates fair value due to the variable nature of the interest rates.

## Motion Picture and Television Fund and Affiliated Entities

### Notes to Consolidated Financial Statements

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#### Subsequent events

Subsequent events are events or transactions that occur after the consolidated balance sheets date but before consolidated financial statements are issued. MPTF recognizes in the consolidated financial statements the effects of all subsequent events that provide additional evidence about conditions that existed at the date of the consolidated balance sheets, including the estimates inherent in the process of preparing the consolidated financial statements. MPTF's consolidated financial statements do not recognize subsequent events that provide evidence about conditions that did not exist at the date of the consolidated balance sheets but arose after the consolidated balance sheets date and before the consolidated financial statements are issued. MPTF has evaluated subsequent events through May 5, 2025, which is the date the consolidated financial statements were issued.

### 3. Investments

The following is a summary of investments at fair value at December 31:

	2024	2023
Money market funds	\$ 3,877,000	\$ 27,700,000
Mutual funds	28,138,000	15,502,000
Equities	538,000	5,000
U.S. government notes	5,544,000	3,963,000
Alternative investments	17,513,000	12,870,000
Total investments	\$ 55,610,000	\$ 60,040,000

Investment returns consisted of the following for the years ended December 31:

	2024	2023
Investment income	\$ 2,516,000	\$ 1,608,000
Realized gain on investments, net	58,000	199,000
Unrealized gain on investments, net	1,433,000	1,032,000
Total	\$ 4,007,000	\$ 2,839,000

Management fees paid were \$113,000 and \$109,000 for the years ended December 31, 2024 and 2023, respectively, and are presented net of investment income in the consolidated statements of operations and changes in net assets.

## Motion Picture and Television Fund and Affiliated Entities

### Notes to Consolidated Financial Statements

#### 4. Fair Value Measurements

The tables below present the assets and liabilities measured at fair value on a recurring basis at December 31, categorized by the level of inputs used in the valuation:

	2024			Total
	Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)	
<b>Assets</b>				
Assets included in investments				
Money market funds	\$ 3,877,000	\$ -	\$ -	\$ 3,877,000
Mutual funds – domestic fixed-income	28,138,000	-	-	28,138,000
Equities	538,000	-	-	538,000
U.S. government notes	5,544,000	-	-	5,544,000
Total assets included in investments at fair value	<u>\$ 38,097,000</u>	<u>\$ -</u>	<u>\$ -</u>	38,097,000
Investments measured at NAV (practical expedient)				<u>17,513,000</u>
Investments at fair value				<u>\$ 55,610,000</u>

	2023			Total
	Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)	
<b>Assets</b>				
Assets included in investments				
Money market funds	\$ 27,700,000	\$ -	\$ -	\$ 27,700,000
Mutual funds – domestic fixed-income	15,502,000	-	-	15,502,000
Equities	5,000	-	-	5,000
U.S. government notes	3,963,000	-	-	3,963,000
Total assets included in investments at fair value	<u>\$ 47,170,000</u>	<u>\$ -</u>	<u>\$ -</u>	47,170,000
Investments measured at NAV (practical expedient)				<u>12,870,000</u>
Investments at fair value				<u>\$ 60,040,000</u>

## Motion Picture and Television Fund and Affiliated Entities

### Notes to Consolidated Financial Statements

MPTF's policy is to recognize the transfer into and transfers out of fair value hierarchy levels as of the date of the event or change in circumstances that caused the transfer. There were no transfers between fair value levels during the years ended December 31, 2024 and 2023.

The following table shows the fair value and redemption restrictions for investments valued at NAV at December 31:

2024				
	Fair Value	Redemption Frequency	Redemption Notice Period	Strategies and Other Restrictions
<b>Limited partnerships</b>				
Hedge funds	\$ 3,930,000	monthly	10 business days	(1)
Hedge funds	3,927,000	quarterly	65 calendar days	(1)
Hedge funds	3,860,000	quarterly	60 calendar days	(1)
Hedge funds	699,000	closed end	closed end	(1)
Hedge funds	1,400,000	quarterly	30 calendar days	(1)
Hedge funds	3,697,000	monthly	10 business days	(1)
<b>Totals</b>	<u>\$ 17,513,000</u>			
2023				
	Fair Value	Redemption Frequency	Redemption Notice Period	Strategies and Other Restrictions
<b>Limited partnerships</b>				
Hedge funds	\$ 2,194,000	monthly	10 business days	(1)
Hedge funds	2,006,000	monthly	15 calendar days	(1)
Hedge funds	2,223,000	quarterly	65 calendar days	(1)
Hedge funds	2,170,000	quarterly	60 calendar days	(1)
Hedge funds	710,000	closed end	closed end	(1)
Hedge funds	1,473,000	quarterly	30 calendar days	(1)
Hedge funds	2,094,000	monthly	10 business days	(1)
<b>Totals</b>	<u>\$ 12,870,000</u>			

- (1) Limited partnerships are invested with managers whose investment strategies include, but are not limited to, absolute return, capital appreciation with low volatility relative to equity markets, global fixed income and equity, currencies, electronic transfer funds, futures, forwards, options, swaps, asset and security mispricings capture, commodities, and other derivatives.

#### 5. Government Reimbursement Programs

MPTF has contractual agreements with government-sponsored programs, Medicare and Medi-Cal. Some revenues received under these reimbursement agreements are subject to retroactive adjustment based upon cost reports prepared by MPTF and subsequent audits by fiscal intermediaries for these programs.

Acute inpatient services are reimbursed by Medicare under the prospective payment system, which provides for payment at predetermined amounts based on the discharge diagnosis. Medicare reimburses for covered outpatient services rendered to its beneficiaries by way of an outpatient prospective payment system based on ambulatory payment classifications. The difference between customary charges and actual third-party payments is accounted for as a contractual allowance (i.e., explicit price concession), which is a deduction from patient service and resident revenue.

## Motion Picture and Television Fund and Affiliated Entities

### Notes to Consolidated Financial Statements

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Long-term care services are reimbursed by Medi-Cal on a per diem basis. MPTF is licensed as a Distinct-Part Long-Term Care Facility for provision of these services.

Medicare cost reports have been finalized through December 31, 2022. Reserves, where applicable, have been accrued for all years subject to adjustment. Laws and regulations governing the Medicare and Medi-Cal programs are extremely complex and subject to interpretation. As a result, there is a risk that recorded estimates will change in the near term. In the opinion of management, subsequent settlement adjustments, if any, would not have a materially adverse effect on MPTF's consolidated financial position.

#### 6. Assets Limited as to Use

Assets limited as to use include funds in a debt service reserve account pledged to the debt holders to secure payment of the Bonds, as described in Note 11. Assets limited as to use that are available for the payment of principal and interest payments on long-term debt are classified as noncurrent assets and had a balance of approximately \$697,000 and \$3,767,000 at December 31, 2024 and 2023, respectively. Assets limited as to use consist of cash and cash equivalents.

#### 7. Pledges Receivable

Unconditional promises to give are included in the consolidated financial statements as pledges receivable and contribution revenue in the appropriate net asset category. Pledges are recorded at the discounted net present value of the future cash flows, using discount rates ranging from 3.2% to 9.9% at December 31, 2024 and 2023.

Unconditional promises to give are expected to be realized in the following periods:

	2024	2023
In one year or less	\$ 6,883,000	\$ 2,557,000
Between one year and five years	22,898,000	9,634,000
Five years or more	13,000,000	15,250,000
Total pledges receivable, gross	42,781,000	27,441,000
Less discount for pledges receivable	(11,993,000)	(11,531,000)
Total pledges receivable, net	30,788,000	15,910,000
Less current portion	(6,883,000)	(2,557,000)
Pledges receivable, net of current portion	\$ 23,905,000	\$ 13,353,000

## Motion Picture and Television Fund and Affiliated Entities

### Notes to Consolidated Financial Statements

Pledges receivable at December 31 had the following restrictions:

	2024	2023
Program expenses	\$ 11,973,000	\$ 12,435,000
Building construction	3,025,000	3,100,000
Permanent endowment – other program support	2,000,000	-
Time restricted/general benefit	25,783,000	11,906,000
Total pledges receivable, gross	\$ 42,781,000	\$ 27,441,000

#### 8. Note Receivable

In December 2023, MPTF sold an undeveloped land parcel and recognized a gain from the sale for approximately \$25,779,000, which was recorded on the consolidated statement of operations for the year ended December 31, 2023. As consideration, MPTF received total cash proceeds of approximately \$20,779,000 at the time of sale and a \$5,000,000 note receivable maturing on December 15, 2030. The note accrues interest on a noncompounding basis at a rate of 3% per annum. The amounts representing accrued interest on the note receivable balance were \$150,000 and \$0 at December 31, 2024 and 2023, respectively. Principal and interest are due upon maturity. The note is nonrecourse, guaranteed by the buyer, and subordinated to any other debt that the seller may incur to develop the property. MPTF evaluated the creditworthiness of the buyer and determined that the note is fully collectible. No reserves were recorded at December 31, 2024 or 2023.

#### 9. Land, Buildings, and Equipment

A summary of land, buildings, and equipment at December 31 is as follows:

	2024	2023
Buildings and improvements	\$ 80,091,000	\$ 79,843,000
Furniture and equipment	36,070,000	39,674,000
Land and improvements	13,898,000	13,898,000
Construction in progress	431,000	429,000
	130,490,000	133,844,000
Less accumulated depreciation	(115,021,000)	(116,647,000)
Land, buildings, and equipment	\$ 15,469,000	\$ 17,197,000

Total depreciation expense was \$2,446,000 and \$2,441,000 for the years ended December 31, 2024 and 2023, respectively.

## Motion Picture and Television Fund and Affiliated Entities

### Notes to Consolidated Financial Statements

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#### 10. Operating Leases

MPTF has operating leases for corporate offices with lease terms of two to four years. Certain operating leases contain options to extend the lease. As MPTF is not reasonably certain to exercise these options, they are not included in the lease terms of the operating leases.

The components of lease costs during the years ended December 31, 2024 and 2023, were as follows:

	2024	2023
Operating lease minimum rent payments	\$ 261,000	\$ 258,000
Total lease cost	\$ 261,000	\$ 258,000

Other information related to leases as of and for the years ended December 31, 2024 and 2023, is as follows:

	2024	2023
Cash paid for amounts included in the measurement of lease liabilities – operating cash flows from operating leases	\$ 264,000	\$ 253,000
Weighted-average remaining lease terms (in years)	1.69	2.51
Weighted-average discount rate	1.58%	1.43%

To calculate the ROU assets and lease liabilities, MPTF uses the discount rate implicit in lease agreements when available. When the implicit discount rates are not readily determinable, MPTF has elected to use the risk-free rate for all asset classes.

Future maturities of lease liabilities at December 31, 2024, were as follows:

<b>Year Ending December 31,</b>	
2025	\$ 210,000
2026	151,000
Total	361,000
Less amount representing interest	(7,000)
Less lease liabilities, current	(206,000)
Operating lease liabilities, net of current portion	\$ 148,000

## Motion Picture and Television Fund and Affiliated Entities

### Notes to Consolidated Financial Statements

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#### 11. Long-Term Debt

A summary of long-term debt at December 31 follows:

	2024	2023
Series 2017A Variable Rate Revenue Bonds	\$ 6,215,000	\$ 6,970,000
Unamortized debt issuance costs	(168,000)	(195,000)
Long-term debt, including current portion	6,047,000	6,775,000
Current portion of long-term debt	(790,000)	(755,000)
Long-term debt, net of current portion	\$ 5,257,000	\$ 6,020,000

On December 28, 2017, the California Statewide Communities Development Authority (CSCDA) issued, on behalf of MPTF, its Series 2017A Variable Rate Revenue Bonds (the 2017 Bonds) in the aggregate principal amount of \$19,805,000. The 2017 Bonds were purchased by Northern Trust Company (the Purchaser) and MPTF, and the Purchaser entered into a Continuing Covenant Agreement (the CCA). The 2017 Bonds, issued pursuant to a Bond Indenture dated as of December 1, 2017 (the Indenture), were issued for the purpose of retiring the 2001 Bonds and to pay certain costs of issuance related to the 2017 Bonds.

The Indenture required the mandatory tender and remarketing of the 2017 Bonds on December 28, 2022, the date of expiration of the then-current London Interbank Offered Rate (LIBOR) index rate period, unless the Purchaser agreed to a new index rate period. On December 28, 2022, MPTF and the Purchaser agreed to a new index rate period expiring on December 28, 2025. Pursuant to this agreement, the Indenture and CCA were amended to provide for certain terms and conditions including an index rate based on the secured overnight financing rate (SOFR), the establishment and funding of a debt service reserve account, an account pledged to the Purchaser to secure payment of the Bonds, and MPTF's redemption of a portion of the Bonds then outstanding and changes to certain restrictive financial covenants. The redemption payment of \$6,965,000 was made by MPTF in December 2022.

The 2017 Bonds bear interest at variable rates (4.4366% as of December 28, 2023) that are reset monthly; interest is payable monthly in arrears. Principal on the 2017 Bonds is payable March 1 of each year. Principal payment amounts range from \$775,000 to \$990,000, with final payment due in 2031.

The 2017 Bonds may be redeemed early at the request of MPTF through the CSCDA, in whole or part, on any interest payment date. Payment of principal and interest on the 2017 Bonds is collateralized by a pledge against the gross revenue of MPTF.

MPTF used an interest rate swap with a notional value of \$4,000,000 to manage the interest rate exposure of the 2017 Bonds. The swap agreement was amended and restated in October 2012. Under the terms of the restated swap agreement, which expired January 1, 2024, MPTF paid the counterparty a fixed interest rate of 3.53% and received a variable rate, indexed at 67% of the one-month LIBOR (3.65% at December 31, 2023), on the notional principal amount of the swap.

The interest rate swap agreement was recognized on the consolidated balance sheets at its estimated fair market value, corroborated by market data, and therefore classified within Level 2 (see Note 4). The estimated fair value of the interest rate swap was \$0 as of December 31, 2023.

## Motion Picture and Television Fund and Affiliated Entities

### Notes to Consolidated Financial Statements

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The interest rate swap has not been designated as a hedge under ASC 825, *Derivatives and Hedging*, and as such, the change in fair value was recorded as a decrease of \$13,000 in the consolidated statement of operations and changes in net assets for the year ended December 31, 2023. In addition, cash payments and receipts resulted in net cash disbursements of \$4,000 for the year ended December 31, 2023.

The 2017 Bonds are subject to certain restrictive covenants requiring certain quarterly and annual financial information, both unaudited and audited, and compliance with liquidity and debt service coverage requirements.

The amounts due on the 2017 Bonds at December 31, 2024, were as follows:

<u>Year Ending December 31,</u>	
2025	\$ 790,000
2026	820,000
2027	850,000
2028	885,000
2029	920,000
Thereafter	<u>1,950,000</u>
Total long-term debt	<u><u>\$ 6,215,000</u></u>

#### 12. Net Assets with Donor Restrictions

Net assets with donor restrictions were restricted for the following purposes or periods at December 31:

	<u>2024</u>	<u>2023</u>
<b>Subject to expenditure for specified purpose</b>		
Buildings and equipment	\$ 1,247,000	\$ 1,281,000
Patient and resident support	284,000	280,000
Emergency financial assistance	1,319,000	2,978,000
Other program support	<u>926,000</u>	<u>858,000</u>
	<u>3,776,000</u>	<u>5,397,000</u>
<b>Subject to the passage of time</b>	<u>30,788,000</u>	<u>15,910,000</u>
<b>Subject to endowment spending policy and appropriation</b>		
Patient and resident support	8,566,000	8,418,000
Grounds maintenance	4,767,000	4,682,000
Other program support	<u>19,889,000</u>	<u>18,897,000</u>
	<u>33,222,000</u>	<u>31,997,000</u>
Total net assets with donor restrictions	<u><u>\$ 67,786,000</u></u>	<u><u>\$ 53,304,000</u></u>

## Motion Picture and Television Fund and Affiliated Entities

### Notes to Consolidated Financial Statements

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Net assets released from restrictions by incurring expenses satisfying the restricted purpose or by the passage of time comprise the following at December 31:

	2024	2023
Buildings and equipment	\$ 123,000	\$ 178,000
Emergency Financial Assistance	1,754,000	154,000
Other program support	5,665,000	4,883,000
Total releases from restriction	\$ 7,542,000	\$ 5,215,000

### 13. Endowments

As required by U.S. GAAP, net assets associated with endowment funds are classified and reported based on the presence or absence of donor-imposed restrictions. MPTF's 20 endowments are donor-restricted and established for a variety of purposes. MPTF did not have any Board of Directors (Board)-designated endowments at December 31, 2024 or 2023.

MPTF classifies as net assets with donor restrictions: (a) the portion of a gift explicitly stipulated to be retained permanently in the subject gift instrument, or (b) in the absence of such stipulation, the fair value of an endowment gift as of the gift date. Investment income relating to an endowment gift, including interest, dividends, and realized net gains, is temporarily classified as net assets with donor restrictions until such amounts are appropriated for expenditure, unless otherwise explicitly stipulated in the gift instrument.

Changes in endowment net assets with donor restrictions for the years ended December 31 had the following activity:

	2024	2023
Endowment net assets, beginning of year	\$ 31,997,000	\$ 29,999,000
Investment income	1,362,000	1,158,000
Net realized and unrealized appreciation	562,000	1,108,000
Total investment return	1,924,000	2,266,000
Contributions	2,342,000	-
Changes in donor restrictions	-	(268,000)
Appropriation of endowment net assets for expenditure	(1,200,000)	-
Endowment net assets, end of year	\$ 35,063,000	\$ 31,997,000

From time to time, the fair value of endowment funds associated with individual donor-restricted endowment funds may fall below the level that the donor requires MPTF to retain as a fund of perpetual duration, referred to as underwater endowments. When deficiencies of this nature exist, they are reported in net assets without donor restrictions. No such deficiencies existed at December 31, 2024 or 2023.

## Motion Picture and Television Fund and Affiliated Entities

### Notes to Consolidated Financial Statements

MPTF has adopted investment and spending policies for endowment assets that attempt to provide a predictable stream of funding to programs supported by its endowments. Endowment assets include those assets of donor-restricted funds that MPTF must hold in perpetuity or for donor-specified periods. Under the investment policy, as approved by the Board, the endowment assets are invested primarily in fixed income and alternative investments, which are intended to produce results that exceed a policy index that consists of a 60% allocation to the Intercontinental Exchange BofA US Corporate, Government & Mortgage Index; a 30% allocation to the HFRI Fund Weighted Composite Index; and a 10% allocation to the Bloomberg US Corporate High Yield Index. To satisfy its long-term rate-of-return objectives, MPTF relies on a total return strategy in which investment returns are achieved through both capital appreciation (realized and unrealized) and income (from interest and dividends), while seeking to minimize the risk of principal loss.

MPTF's Board has established a spending policy whereby expenditures shall not exceed 7% of the endowment fund's fair market value in any year.

#### 14. Functional Expenses

Expenses incurred comprise the following program and support services for the years ended December 31:

	2024							2024 Total
	Program Services			Program Subtotal	Support Services		Support Subtotal	
	Inpatient	Residential	Other		Management and General	Fundraising		
Salaries, wages, and benefits	\$ 23,940,000	\$ 13,537,000	\$ 4,805,000	\$ 42,282,000	\$ 5,733,000	\$ 1,648,000	\$ 7,381,000	\$ 49,663,000
Purchased services	3,406,000	4,798,000	959,000	9,163,000	1,508,000	5,072,000	6,580,000	15,743,000
Professional fees	3,258,000	927,000	398,000	4,583,000	433,000	547,000	980,000	5,563,000
Supplies	1,639,000	459,000	35,000	2,133,000	95,000	161,000	256,000	2,389,000
Depreciation	1,153,000	476,000	588,000	2,217,000	145,000	84,000	229,000	2,446,000
Other	733,000	250,000	2,681,000	3,664,000	133,000	(18,000)	115,000	3,779,000
<b>Total expenses</b>	<b>\$ 34,129,000</b>	<b>\$ 20,447,000</b>	<b>\$ 9,466,000</b>	<b>\$ 64,042,000</b>	<b>\$ 8,047,000</b>	<b>\$ 7,494,000</b>	<b>\$ 15,541,000</b>	<b>\$ 79,583,000</b>

	2023							2023 Total
	Program Services			Program Subtotal	Support Services		Support Subtotal	
	Inpatient	Residential	Other		Management and General	Fundraising		
Salaries, wages, and benefits	\$ 22,972,000	\$ 12,440,000	\$ 4,558,000	\$ 39,970,000	\$ 5,899,000	\$ 1,640,000	\$ 7,539,000	\$ 47,509,000
Purchased services	3,370,000	4,758,000	1,021,000	9,149,000	1,556,000	2,668,000	4,224,000	13,373,000
Professional fees	2,903,000	734,000	301,000	3,938,000	451,000	343,000	794,000	4,732,000
Supplies	1,581,000	387,000	53,000	2,021,000	153,000	57,000	210,000	2,231,000
Depreciation	1,145,000	480,000	590,000	2,215,000	144,000	82,000	226,000	2,441,000
Other	736,000	391,000	8,513,000	9,640,000	126,000	107,000	233,000	9,873,000
<b>Total expenses</b>	<b>\$ 32,707,000</b>	<b>\$ 19,190,000</b>	<b>\$ 15,036,000</b>	<b>\$ 66,933,000</b>	<b>\$ 8,329,000</b>	<b>\$ 4,897,000</b>	<b>\$ 13,226,000</b>	<b>\$ 80,159,000</b>

Expenses are summarized and categorized based upon their functional classification as either program or support services. Specific expenses readily identifiable to a single program or activity are charged directly to that function. Certain categories of expenses attributable to more than one program or support service require allocation on a reasonable, consistently applied basis. Allocated expenses include salaries, wages, and benefits; dietary; plant maintenance; and housekeeping, which are allocated based on estimates of time and effort and depreciation expense, which is allocated based on usage of the underlying assets. Management and general expenses are support services that are not directly identifiable with any specific program service function but provide for the overall support and direction of MPTF.

## Motion Picture and Television Fund and Affiliated Entities

### Notes to Consolidated Financial Statements

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#### 15. Pension Plan

MPTF sponsors a defined benefit pension plan (the Plan) that was frozen for represented and nonrepresented employees on February 28, 2014, and July 1, 2011, respectively. Benefits are based on an employee's service with MPTF and highest five years of earnings. MPTF's policy is to fund pension costs at a level at least as great as the required minimum contribution under the Employee Retirement Income Security Act (ERISA).

The following table sets forth the Plan's funded status and amounts recognized, shown in MPTF's consolidated financial statements, at December 31:

	2024	2023
<b>Change in benefit obligation</b>		
Projected benefit obligation at beginning of year	\$ 62,630,000	\$ 62,132,000
Service cost	981,000	961,000
Interest cost	2,842,000	2,942,000
Benefits paid	(5,043,000)	(5,055,000)
Actuarial (gain) loss	(3,835,000)	1,650,000
Projected benefit obligation at end of year	57,575,000	62,630,000
<b>Change in plan assets</b>		
Fair value of plan assets at beginning of year	47,344,000	47,845,000
Actual return on Plan assets	4,643,000	4,554,000
Benefits paid	(4,119,000)	(4,142,000)
Administrative expenses	(924,000)	(913,000)
Fair value of Plan assets at end of year	46,944,000	47,344,000
Net unfunded status at year-end	\$ (10,631,000)	\$ (15,286,000)

Amounts recognized in the consolidated balance sheets are included in noncurrent liabilities.

## Motion Picture and Television Fund and Affiliated Entities

### Notes to Consolidated Financial Statements

Net benefit expense for the years ended December 31 includes the following components:

	2024	2023
<b>Components of net periodic benefit cost</b>		
Service cost	\$ 981,000	\$ 961,000
Interest cost	2,842,000	2,942,000
Expected return on Plan assets	(2,736,000)	(2,746,000)
Recognized net actuarial loss	650,000	822,000
Total net periodic benefit cost	1,737,000	1,979,000
Changes in Plan assets and benefit obligations recognized in net assets without donor restrictions		
Net actuarial (loss) gain arising during the year	(4,655,000)	999,000
Amounts recognized as a component of net periodic benefit cost		
Amortization of loss	(1,737,000)	(1,979,000)
Total recognized in net assets without donor restrictions	(6,392,000)	(980,000)
Total recognized in net periodic benefit cost and net assets without donor restrictions	\$ (4,655,000)	\$ 999,000
Estimated amounts that will be amortized from net assets without donor restrictions over the next year		
Unrecognized loss	\$ -	\$ (650,000)
Total	\$ -	\$ (650,000)

Additional information and assumptions are as follows:

	2024	2023
<b>Assumptions</b>		
Weighted-average assumptions used to determine benefit obligations at December 31		
Discount rate	5.4%	4.7%
Rate of compensation increase	N/A	N/A
Weighted-average assumptions used to determine net periodic benefit cost for years ended December 31		
Discount rate	4.7%	4.9%
Expected long-term rate of return on plan assets	6.0%	6.0%
Rate of compensation increase	N/A	N/A

## Motion Picture and Television Fund and Affiliated Entities

### Notes to Consolidated Financial Statements

The expected long-term rate of return on Plan assets was selected by MPTF based on investment return modeling, which incorporates historical returns and future expectations for returns for each asset class, as well as the target asset allocation of the pension portfolio. The compensation increase assumption for the Plan is no longer applicable, as compensation increases and service accruals were frozen as of February 28, 2014, and July 1, 2011, for represented and nonrepresented employees, respectively.

#### Plan assets

The primary investment objective is to provide capital appreciation of the investment portfolio over long periods of time. The portfolio is perpetual in nature and is invested to withstand the loss of purchasing power from inflation.

The table below presents the Plan assets at fair value on a recurring basis at December 31, categorized by inputs used in the valuation of each investment:

	2024			Total
	Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)	
<b>Plan Assets at Fair Value</b>				
Cash equivalents	\$ 1,454,000	\$ -	\$ -	\$ 1,454,000
Mutual funds				
Domestic fixed-income	6,741,000	-	-	6,741,000
Global equity	17,290,000	-	-	17,290,000
Alternative investments	1,656,000	-	-	1,656,000
Plan assets in fair value hierarchy	<u>\$ 27,141,000</u>	<u>\$ -</u>	<u>\$ -</u>	27,141,000
Plan assets measured at NAV (practical expedient)				<u>19,803,000</u>
Total plan assets at fair value				<u>\$ 46,944,000</u>
	2023			
	Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)	Total
<b>Plan Assets at Fair Value</b>				
Cash equivalents	\$ 817,000	\$ -	\$ -	\$ 817,000
Mutual funds				
Domestic fixed-income	8,039,000	-	-	8,039,000
Domestic equity	6,418,000	-	-	6,418,000
Global equity	9,564,000	-	-	9,564,000
Alternative investments	4,190,000	-	-	4,190,000
Plan assets in fair value hierarchy	<u>\$ 29,028,000</u>	<u>\$ -</u>	<u>\$ -</u>	29,028,000
Plan assets measured at NAV (practical expedient)				<u>18,316,000</u>
Total plan assets at fair value				<u>\$ 47,344,000</u>

## Motion Picture and Television Fund and Affiliated Entities

### Notes to Consolidated Financial Statements

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#### Allocation of assets

The year-end asset allocation, which approximates the weighted-average allocation for the Plan assets at December 31 in comparison to the current investment policy—established ranges for each category, is as follows:

	2024	2023
<b>Asset Category</b>		
Equity securities	37.0 %	31.7 %
Debt securities – fixed-income	23.0 %	24.5 %
Alternative investments <sup>(a)</sup>	40.0 %	43.8 %
Total	100.0 %	100.0 %

(a) The Alternatives investment policy range consists of the consolidated ranges for the Balance/Flexible, Private Real Estate, Commodities, Private Credit, and Private Equity asset classes, as reported in the Plan's investment policy statement.

Inappropriate investments, according to the Plan's investment policy, include options, futures and unregistered securities, and short sales or the use of margin. All investments are valued at the closing price reported on the active market on which the mutual funds are traded. As described in Note 2, MPTF uses a hierarchy to report invested assets, including the invested assets of the Plan.

MPTF expects to contribute \$2,441,000 to the Plan in 2025.

#### Estimated future benefit payments

The following benefit payments, which reflect expected future service and compensation, as appropriate, are expected to be paid by MPTF:

<b>Year Ending December 31,</b>	<b>Expected Benefits</b>
2025	\$ 4,515,000
2026	4,560,000
2027	4,524,000
2028	4,557,000
2029	4,493,000
2030–2031	21,736,000

#### 16. Supplemental Executive Retirement Plan

MPTF provides supplemental executive retirement plan (SERP) benefits to certain executives. The SERP provides benefits that are not subject to regulatory controls requiring funding of the obligation, and consequently, the benefits are payable out of general corporate assets. The projected SERP benefit obligation, assuming a 4.70% and 4.90% discount rate and a 0% annual compensation increase, was \$401,000 and \$437,000 at December 31, 2024 and 2023, respectively.

## Motion Picture and Television Fund and Affiliated Entities

### Notes to Consolidated Financial Statements

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The following amounts were recognized, as shown in MPTF's consolidated financial statements, at December 31:

	2024	2023
Benefit cost charged for the year	\$ (9,000)	\$ (8,000)
Accrued benefit cost recognized in accrued pension benefits on the consolidated balance sheets	\$ 401,000	\$ 437,000

#### Estimated future benefit payments

The following benefit payments, which reflect expected future service and compensation, as appropriate, are expected to be paid by MPTF:

	Expected Benefits
<b><u>Year Ending December 31,</u></b>	
2025	\$ 35,000
2026	35,000
2027	35,000
2028	34,000
2029	33,000
2030–2034	157,000

#### 17. Commitments and Contingencies

MPTF is involved in various legal proceedings that are incidental to the conduct of its operations. In the opinion of management, based on the current facts and circumstances known by MPTF, the resolution of these matters will not have a material adverse effect on the financial position or results of operations of MPTF.

## Motion Picture and Television Fund and Affiliated Entities

### Notes to Consolidated Financial Statements

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#### 18. Available Resources and Liquidity

The following reflects MPTF's financial assets as of the consolidated balance sheets date, reduced by amounts not available for general use within one year of the consolidated balance sheets date because of contractual or donor-imposed restrictions:

	<b>2024</b>
Cash and cash equivalents	\$ 4,560,000
Patient accounts receivable	2,398,000
Other receivables	872,000
Pledges receivable, net	6,883,000
Other current assets	1,207,000
Investments	55,610,000
Land, buildings, and equipment, net	15,469,000
Insurance recoveries receivable, net of current portion	4,628,000
Pledges, net of current portion	23,905,000
Note receivable	5,150,000
Assets as to limited use	697,000
Assets held under split-interest agreements	131,000
Operating lease right-of-use asset, net	339,000
Other assets	383,000
Total assets	122,232,000
Less nonfinancial assets	
Other current assets – prepaid insurance and inventory	(1,207,000)
Land, buildings, and equipment, net	(15,469,000)
Operating lease right-of-use asset, net	(339,000)
Other assets	(383,000)
Total assets, excluding nonfinancial assets	104,834,000
Less	
Amounts expected to be available for use in more than one year	
Assets held by a trustee	(697,000)
Insurance recoveries receivable	(5,282,000)
Pledges, net of current portion	(23,905,000)
Note receivable	(5,150,000)
Assets held under split-interest agreements	(131,000)
Investments – endowment funds	(33,222,000)
Investments – workers' compensation insurance trusts	(3,152,000)
Financial assets available to meet cash needs for general expenditures within one year	\$ 33,295,000

Management monitors and reviews MPTF's liquidity requirements with the Board and relevant committees of the Board during the annual budget process and periodically throughout the year. The General Fund investment policy is designed to ensure adequate liquidity to meet obligations of MPTF as they come due.