

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2019Department of the Treasury
Internal Revenue Service

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

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

▶ Go to www.irs.gov/Form990 for instructions and the latest information.**Open to Public Inspection**

A For the 2019 calendar year, or tax year beginning , 2019, and ending , 20																									
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2">C Name of organization: Overnight Productions</td> <td>D Employer identification number: 95-3786721</td> </tr> <tr> <td colspan="2">Doing business as: This Way Out, Intl. Lesbian & Gay Radio Magazine</td> <td rowspan="2">E Telephone number: 818.986.4106</td> </tr> <tr> <td>Number and street (or P.O. box if mail is not delivered to street address): PO Box 1065</td> <td>Room/suite: NA</td> </tr> <tr> <td colspan="2">City or town, state or province, country, and ZIP or foreign postal code: Los Angeles, CA 90782</td> <td>G Gross receipts \$: 205,888</td> </tr> <tr> <td colspan="2" rowspan="2">F Name and address of principal officer: Greg Gordon 4601 Fulton St., Sherman Oaks CA 914232</td> <td>H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</td> </tr> <tr> <td>H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)</td> </tr> <tr> <td colspan="2">I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527</td> <td>H(c) Group exemption number ▶</td> </tr> <tr> <td colspan="3">J Website: ▶ http://www.thiswayout.org</td> </tr> <tr> <td colspan="2">K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶</td> <td>L Year of formation: 1988 M State of legal domicile: CA</td> </tr> </table>	C Name of organization: Overnight Productions		D Employer identification number: 95-3786721	Doing business as: This Way Out, Intl. Lesbian & Gay Radio Magazine		E Telephone number: 818.986.4106	Number and street (or P.O. box if mail is not delivered to street address): PO Box 1065	Room/suite: NA	City or town, state or province, country, and ZIP or foreign postal code: Los Angeles, CA 90782		G Gross receipts \$: 205,888	F Name and address of principal officer: Greg Gordon 4601 Fulton St., Sherman Oaks CA 914232		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)	I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶	J Website: ▶ http://www.thiswayout.org			K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1988 M State of legal domicile: CA
C Name of organization: Overnight Productions		D Employer identification number: 95-3786721																							
Doing business as: This Way Out, Intl. Lesbian & Gay Radio Magazine		E Telephone number: 818.986.4106																							
Number and street (or P.O. box if mail is not delivered to street address): PO Box 1065	Room/suite: NA																								
City or town, state or province, country, and ZIP or foreign postal code: Los Angeles, CA 90782		G Gross receipts \$: 205,888																							
F Name and address of principal officer: Greg Gordon 4601 Fulton St., Sherman Oaks CA 914232		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																							
		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)																							
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶																							
J Website: ▶ http://www.thiswayout.org																									
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1988 M State of legal domicile: CA																							

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: To educate and entertain general audiences through the presentation of information and cultural works via radio broadcast and related media on the lives, accomplishments, and contributions of LGBT+ communities around the world.		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	5
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	3
	5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	0
	6	Total number of volunteers (estimate if necessary)	6	20
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 39	7b	0	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	25,347	205,888
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	775	0
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0	0
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	0	0
	12		26,122	205,888
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	0	0
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	0	0
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	30,750	28,880
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 0	0	0
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	0	0
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	2,499	15,849
	19	Revenue less expenses. Subtract line 18 from line 12	33,749	44,729
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21	Total liabilities (Part X, line 26)	-6,627	161,159
	22	Net assets or fund balances. Subtract line 21 from line 20	5,222	166,381

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		Date	6/15/2020
	Jon Beaupré, Treasurer Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	Firm's name ▶	Firm's EIN ▶	
	Firm's address ▶	Phone no. ▶	

May the IRS discuss this return with the preparer shown above? (see instructions) ☐ Yes ☒ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 11282Y

Form **990** (2019)

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2019Department of the Treasury
Internal Revenue Service

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

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

▶ Go to www.irs.gov/Form990 for instructions and the latest information.**Open to Public
Inspection**

A For the 2019 calendar year, or tax year beginning , 2019, and ending , 20																								
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2">C Name of organization <u>Ovenight Productions</u></td> <td>D Employer identification number <u>95-3786721</u></td> </tr> <tr> <td colspan="2">Doing business as <u>This Way Out, Intl. Lesbian & Gay Radio Magazine</u></td> <td rowspan="2">E Telephone number <u>818.986.4106</u></td> </tr> <tr> <td>Number and street (or P.O. box if mail is not delivered to street address) <u>PO Box 1065</u></td> <td>Room/suite <u>NA</u></td> </tr> <tr> <td colspan="2">City or town, state or province, country, and ZIP or foreign postal code <u>Los Angeles, CA 90782</u></td> <td>G Gross receipts \$ <u>205,888</u></td> </tr> <tr> <td colspan="2">F Name and address of principal officer: <u>Greg Gordon</u> <u>4601 Fulton St., Sherman Oaks CA 914232</u></td> <td> H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) </td> </tr> <tr> <td colspan="2">I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527</td> <td>H(c) Group exemption number ▶</td> </tr> <tr> <td colspan="3">J Website: ▶ <u>http://www.thiswayout.org</u></td> </tr> <tr> <td colspan="2">K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶</td> <td>L Year of formation: <u>1988</u> M State of legal domicile: <u>CA</u></td> </tr> </table>	C Name of organization <u>Ovenight Productions</u>		D Employer identification number <u>95-3786721</u>	Doing business as <u>This Way Out, Intl. Lesbian & Gay Radio Magazine</u>		E Telephone number <u>818.986.4106</u>	Number and street (or P.O. box if mail is not delivered to street address) <u>PO Box 1065</u>	Room/suite <u>NA</u>	City or town, state or province, country, and ZIP or foreign postal code <u>Los Angeles, CA 90782</u>		G Gross receipts \$ <u>205,888</u>	F Name and address of principal officer: <u>Greg Gordon</u> <u>4601 Fulton St., Sherman Oaks CA 914232</u>		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)	I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶	J Website: ▶ <u>http://www.thiswayout.org</u>			K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: <u>1988</u> M State of legal domicile: <u>CA</u>
C Name of organization <u>Ovenight Productions</u>		D Employer identification number <u>95-3786721</u>																						
Doing business as <u>This Way Out, Intl. Lesbian & Gay Radio Magazine</u>		E Telephone number <u>818.986.4106</u>																						
Number and street (or P.O. box if mail is not delivered to street address) <u>PO Box 1065</u>	Room/suite <u>NA</u>																							
City or town, state or province, country, and ZIP or foreign postal code <u>Los Angeles, CA 90782</u>		G Gross receipts \$ <u>205,888</u>																						
F Name and address of principal officer: <u>Greg Gordon</u> <u>4601 Fulton St., Sherman Oaks CA 914232</u>		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)																						
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶																						
J Website: ▶ <u>http://www.thiswayout.org</u>																								
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: <u>1988</u> M State of legal domicile: <u>CA</u>																						

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: <u>To educate and entertain general audiences through the presentation of information and cultural works via radio broadcast and related media on the lives, accomplishments, and contributions of LGBT+ communities around the world.</u>		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	5
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	3
	5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	0
	6	Total number of volunteers (estimate if necessary)	6	20
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
	b	Net unrelated business taxable income from Form 990-T, line 39	7b	0
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	25,347	205,888
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	775	0
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0	0
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	0	0
	12		26,122	205,888
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	0	0
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	0	0
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	30,750	28,880
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 0	0	0
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	0	0
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	2,499	15,849
	19	Revenue less expenses. Subtract line 18 from line 12	33,749	44,729
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21	Total liabilities (Part X, line 26)	-6,627	161,159
	22	Net assets or fund balances. Subtract line 21 from line 20	5,222	166,381

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		Date	<u>6/15/2020</u>		
	Signature of officer <u>Jon Beaupré, Treasurer</u> Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name ▶	Firm's EIN ▶			
	Firm's address ▶	Phone no. ▶			

May the IRS discuss this return with the preparer shown above? (see instructions) ☐ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 11282Y

Form **990** (2019)