Form **990**

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service ▶ Do not enter Social Security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at www.irs.gov/form990. For the 2013 calendar year, or tax year beginning , 2013, and ending , 20 Check if applicable: C Name of organization Nashville Jazz Workshop D Employer identification number 1 Address change Doing Business As 62-1837858 Number and street (or P.O. box if mail is not delivered to street address) Name change Room/suite E Telephone number Initial return 1319 Adams Street 615-242-5299 Terminated City or town, state or province, country, and ZIP or foreign postal code Amended return Nashville, TN 37208 G Gross receipts \$ 411,109 Application pending F Name and address of principal officer: Roger Spencer H(a) Is this a group return for subordinates? Yes 1312 Adams Street, Nashville, TN 37208 H(b) Are all subordinates included? Yes No Tax-exempt status: √ 501(c)(3) 501(c) (If "No," attach a list. (see instructions)) ◀ (insert no.) ☐ 4947(a)(1) or Website: ▶ www.nashvillejazz.org H(c) Group exemption number ▶ Form of organization: Corporation Trust Association [Other ▶ L Year of formation: 2000 M State of legal domicile: Part I Summary Briefly describe the organization's mission or most significant activities: Nashville Jazz Workshop expands peoples' lives by Activities & Governance offering world class jazz education and performance in supportive and creative environments. Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 2 Number of voting members of the governing body (Part VI, line 1a) 3 9 Number of independent voting members of the governing body (Part VI, line 1b) 4 9 Total number of individuals employed in calendar year 2013 (Part V, line 2a) 5 4 6 20 Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 Net unrelated business taxable income from Form 990-T, line 34 7b 0 Prior Year **Current Year** Contributions and grants (Part VIII, line 1h) . . . 162,669 171,455 9 Program service revenue (Part VIII, line 2g) 175,621 180,554 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . . 185 410 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . 33,115 31,394 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 371,590 383,813 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) Benefits paid to or for members (Part IX, column (A), line 4) 14 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 122,683 152,369 Expenses Professional fundraising fees (Part IX, column (A), line 11e) . . . 16a Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 221,559 253,281 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 344,242 405.650 19 Revenue less expenses. Subtract line 18 from line 12 . 27,348 (21,837)Assets or Balances End of Year Beginning of Current Year 20 Total assets (Part X, line 16) 238,540 221,580 21 Total liabilities (Part X, line 26) 3,649 7,362 22 Net assets or fund balances. Subtract line 21 from line 20 234,891 214,218 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 Signature of officer Here Type or print name and title Print/Type preparer's name Preparer's signature **Paid** Check if self-employed Kimberly Thomason P01382233 **Preparer** Firm's name Thomason Financial Resources, Inc. Firm's EIN ▶ **Use Only** 33-1040094 Firm's address ▶ 1009 Harding Trace Ct., Nashville, TN 37221 Phone no. 615-479-4770 May the IRS discuss this return with the preparer shown above? (see instructions) ✓ Yes
☐ No

Form 990 (2013) Page 2 Part III **Statement of Program Service Accomplishments** Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission: Nashville Jazz Workshop expands peoples' lives by offering world class jazz education and performance in supportive and creative environments. Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☐ No If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program If "Yes," describe these changes on Schedule O. 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. 162,478 including grants of \$) (Revenue \$ (Code:) (Expenses \$ 4a Professional Education - Organization has 6 week classes for students of all ages and ability levels; classes for instrumentalists and vocalists in theory, improvisation, literature, and performance; classes also include ensembles and special topics. Total enrollment runs 80-120 students per 6 week session. 98,093 including grants of \$) (Expenses \$) (Revenue \$ 4b (Code: Performances - (1) Snap on 2&4 performance series - held on the 2nd & 4th Fridays of each month in the Jazz Cave, the Organization's venue. Performances by Nashville's top jazz artists in a smoke-free, listening-room setting (2) Contemporary Jazz Series - the first Sunday of each month, featuring emerging artists' music. Special residency programs with nationally-known touring artists. Attendance averages 60-70 per performance. 48,093 including grants of \$) (Revenue \$ Community Education - Organization has special community programs designed to inform and engage community members in jazz. These include outreach to young musicians and audience members through performances in schools and youth performances at our facility, collaborations with other arts and cultural organizations to present jazz and jazz education in other settings and participation in community festivals. Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$ 308.664 Total program service expenses

Part	IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1		
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I </i>	3		
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV </i>	9		
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		
6	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	12a		
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		
14 a		14a		
b		14b		
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i>			
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	18		
20 -	If "Yes," complete Schedule G, Part III	19		
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		
	in 100 to into 200, and the organization attach a copy of its addition illiancial statements to this foldiff: .		1	1

Part	Checklist of Required Schedules (continued)			
21	Did the examination report more than \$5,000 of example or other expirators to any demostic example the example of the example		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	23		
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		_
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
07	disqualified persons? If so, complete Schedule L, Part II	26		
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete</i>	28a		
	Schedule L, Part IV	28b		
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	29		
50	conservation contributions? If "Yes," complete Schedule M	30		
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	20		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		L
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
35a	or IV, and Part V, line 1	34		_
ooa b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	35a		
-	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		_
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O	38		

Form 990 (2013) Page 5 Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V . Yes No 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0 Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b Did the organization comply with backup withholding rules for reportable payments to vendors and 1c Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax 2a Statements, filed for the calendar year ending with or within the year covered by this return 2a If at least one is reported on line 2a, did the organization file all required federal employment tax returns? . 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) . . . 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? . . . За **b** If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O... 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial 4a If "Yes," enter the name of the foreign country: ▶ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . 5a 5a Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6a If "Yes," did the organization include with every solicitation an express statement that such contributions or 6b Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was 7c Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e f 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? a 7g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h 8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 9 Sponsoring organizations maintaining donor advised funds. а Did the organization make any taxable distributions under section 4966? 9a Did the organization make a distribution to a donor, donor advisor, or related person? 9b b 10 Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 10a а Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b b Section 501(c)(12) organizations. Enter: Gross income from members or shareholders 11a а Gross income from other sources (Do not net amounts due or paid to other sources 11b Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 12a If "Yes," enter the amount of tax-exempt interest received or accrued during the year . . .

Section 501(c)(29) qualified nonprofit health insurance issuers.

a Is the organization licensed to issue qualified health plans in more than one state?

Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

14a Did the organization receive any payments for indoor tanning services during the tax year?

13

13a

14a

14b

13b

Form 990 (2013) Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" Part VI response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management No Yes 1a Enter the number of voting members of the governing body at the end of the tax year . . . If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. **b** Enter the number of voting members included in line 1a, above, who are independent . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 4 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? . 5 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O. 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? b 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 13 Did the organization have a written document retention and destruction policy? 14 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the 16h Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ► Tennessee 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 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. ☐ Another's website ☐ Upon request ☐ Other (explain in Schedule O) 19 Describe in 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, physical address, and telephone number of the person who possesses the books and records of the

organization: ► Roger Spencer, 1312 Adams Street, Nashville, TN 37208 615-242-5299

Form 990 (2013) Page **7**

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 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 and/or Box 7 of Form 1099-MISC) 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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

☐ Check this box if neither the organization no	any relate	d orga	aniz	atio	n c	ompe	nsa	ted any currer	t officer, director	r, or trustee.
(A) Name and Title	(B) Average		ot ch	Pos eck		e than o		(D) Reportable	(E) Reportable	(F) Estimated
	hours per week (list any hours for related organizations below dotted line)	office or dire				or/trusi Highest compensated	tee)	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(1) Wayne Dowell, President	2							0	0	0
(2) Connye Florance, Vice President	2							0	0	0
(3) Gary Wilson, Treasurer	2							0	0	0
(4) Christopher Hugan, Secretary	2							0	0	0
(5) Elyse Adler, Board Director	1							0	0	0
(6) Adam Liff, Board Director	1							0	0	0
(7) Scott Chambers, Board Director	1							0	0	0
(8) Bill Holden, Board Director	1							0	0	0
(9) Sandra Dudley, Board Director	1							0	0	0
(10) Roger A. Spencer, Director of Operations	40							37,654	0	0
(11) Lori Mechem Spencer, Executive Director	40							47,654	0	0
(12)										
(13)										
(14)										

Part	Section A. Oπicers, Directors, Trust	tees, Key E	mpio	yees			lignes	ST C	ompensated E	mpioyees (c	ontinue	<i>∋a)</i>		
	(A) Name and title		box,	unles	Pos eck s pe	rson	e than o is both or/trust	n an	(D) Reportable compensation	(E) Reportable compensation from		Estir amo	(F) Estimated amount of	
		week (list any hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organization (W-2/1099-Mi		compe fron organ and r	ther ensatior in the nization related izations	
(15)														
(16)														
(17)														
(18)														
(19)														
(20)														
(21)														
(22)														
(23)														
(24)														
(25)														
1b c	Sub-total		 on A	•			•	>	85,308		0			0
d 2	Total (add lines 1b and 1c)		to th				above	▶ e) w	ho received m	ore than \$10	0,000	of		0
3	Did the organization list any former of employee on line 1a? <i>If</i> "Yes," complete	ficer, direc	tor, c				•	emp		•	nsated		Yes	No
4	For any individual listed on line 1a, is the organization and related organizations individual	sum of re	portal	ole (con	nper	nsatio							
5	Did any person listed on line 1a receive of for services rendered to the organization									ation or indi				
Section	on B. Independent Contractors													
1	Complete this table for your five highest compensation from the organization. Repyear.												n's ta	ıx
	(A) Name and business add	Iress							(B) Description of s	ervices	((C) Compensa	ation	
None														
2	Total number of independent contractor received more than \$100,000 of compensations.	•	_					th	ose listed abo	ove) who				

Form 990 (2013) Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII . . . (B) Related or exempt function revenue (C) Unrelated (D) Revenue excluded from tax (A) Total revenue business 1a Federated campaigns . . . Grants 1a and Other Similar Amounts **b** Membership dues 1b Fundraising events 1c Contributions, Gifts, **d** Related organizations . . . 1d 70,480 **e** Government grants (contributions) All other contributions, gifts, grants, and similar amounts not included above 100,975 1f Noncash contributions included in lines 1a-1f: \$ Total. Add lines 1a-1f 171,455 Program Service Revenue **Business Code** 2a Tuition 711130 126,708 126,708 Performances 711130 51,450 51,450 b d 711130 2,396 2,396 f All other program service revenue. 180,554 **9 Total.** Add lines 2a–2f Investment income (including dividends, interest, and other similar amounts) ▶ 410 410 Income from investment of tax-exempt bond proceeds ▶ 4 5 Royalties (i) Real (ii) Personal 6a Gross rents . . **b** Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7a Gross amount from sales of (i) Securities (ii) Other assets other than inventory **b** Less: cost or other basis and sales expenses . c Gain or (loss) . . **d** Net gain or (loss) Other Revenue 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 a 58,690 27,296 **b** Less: direct expenses **b c** Net income or (loss) from fundraising events 31,394 31,394 9a Gross income from gaming activities. See Part IV, line 19 a **b** Less: direct expenses **b** c Net income or (loss) from gaming activities . . ▶ 10a Gross sales of inventory, less returns and allowances . . . a Less: cost of goods sold . . . b Net income or (loss) from sales of inventory . . . Miscellaneous Revenue 11a b С All other revenue **Total.** Add lines 11a–11d 6 Total revenue. See instructions. . . 383.813 180.554 31.804

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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 respons	e or note to any lin	e in this Part IX .		
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	85,308	53,328	26,014	5,966
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages	42,410	24,716		17,694
9	Other employee benefits	14,869	9,479	3,160	2,230
10	Payroll taxes	9,782	5,979	1,993	1,810
11	Fees for services (non-employees):				
а	Management				
b	Legal				
C	Accounting				
d	Lobbying				
	Professional fundraising services. See Part IV, line 17				
e					
f	Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column				
g	(A) amount, list line 11g expenses on Schedule O.)				
40	- 1				
12	Advertising and promotion	27,479	23,339	4,140	
13	Office expenses	21,419	23,339	4,140	
14	Information technology				
15	Royalties	41,491	33,958	7,533	
16	Occupancy	· ·		7,555	
17	Travel	10,251	10,251		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .				
20	Interest				
21	Payments to affiliates	8,680	6,510	2,170	
22	Depreciation, depletion, and amortization .	4,021	4,021	2,170	
23	Insurance	4,021	4,021		
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	Contract Services - Musicians	106,661	92,039	14,622	
a b	Contract Services - Teachers	38,619	28,965	9,654	
C	Miscellaneous	16,079	16,079	-,	
d		,	,		
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	405,650	308,664	69,286	27,700
26	Joint costs. Complete this line only if the	,	200,001	30,200	,- 50
2 0	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here following SOP 98-2 (ASC 958-720)				

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Part X Ralance Sheet

Р	art X	Balance Sneet					
		Check if Schedule O contains a response or	r note t	o any line in this Par	t X		
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			203,758	1	190,973
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net				3	
ts	4	Accounts receivable, net		<u>-</u>		4	
	5	Loans and other receivables from current and					
		trustees, key employees, and highest co	ompens	ated employees.			
		Complete Part II of Schedule L		5			
	6	Loans and other receivables from other disqualified pers 4958(f)(1)), persons described in section 4958(c)(3)(B), ar sponsoring organizations of section 501(c)(9) volun					
		organizations (see instructions). Complete Part II of Sche	edule L.			6	
Assets	7	Notes and loans receivable, net				7	
As	8	Inventories for sale or use		-		8	
	9	Prepaid expenses and deferred charges				9	
	10a	Land, buildings, and equipment: cost or		Ī			
		other basis. Complete Part VI of Schedule D	10a	107,424			
	b	Less: accumulated depreciation	10b	91,022	23,084	10c	16,402
	11	Investments—publicly traded securities			11,698	11	14,205
	12	Investments - other securities. See Part IV, line	11			12	
	13	Investments-program-related. See Part IV, line	11			13	
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11				15	
	16	Total assets. Add lines 1 through 15 (must equa	al line 3	4)	238,540	. •	221,580
	17	Accounts payable and accrued expenses		_	3,649		7,362
	18	Grants payable				18	
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities		20			
	21	Escrow or custodial account liability. Complete I		<u> </u>		21	
es	22	Loans and other payables to current and for					
≣		trustees, key employees, highest compen		employees, and			
Liabilities		disqualified persons. Complete Part II of Schedu		22			
_	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated		-		24	
	25	Other liabilities (including federal income tax,					
		parties, and other liabilities not included on lines					
	00	of Schedule D			3,649	25	7,362
	26	Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958)			3,049	26	1,302
S		complete lines 27 through 29, and lines 33 and		k here ► ☐ and			
ğ	27	Unrestricted net assets			185,928	27	147,342
ala	28	Temporarily restricted net assets		_	48,963		66,876
B	29	Permanently restricted net assets			10,000	29	
Ĕ	29	Organizations that do not follow SFAS 117 (ASC 95				25	
Ē		complete lines 30 through 34.	ooj, cric	ok nore and			
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds				30	
set	31	Paid-in or capital surplus, or land, building, or ed		-		31	
As	32	Retained earnings, endowment, accumulated in		-		32	
e	33	Total net assets or fund balances			234,891	33	214,218
Z	34	Total liabilities and net assets/fund balances .			238,540		221,580
		i i i i i i i i i i i i i i i i i i i					•

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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			33,813
2	Total expenses (must equal Part IX, column (A), line 25)	2		40	05,650
3	Revenue less expenses. Subtract line 2 from line 1	3		•	1,837)
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		23	34,891
5	Net unrealized gains (losses) on investments	5			1,164
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 in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		2	14,218
Part	XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII				<u>, Ц</u>
				Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other	.1.1.			
	If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O.	piain	in		
0-			0-		
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 com-				
	reviewed on a separate basis, consolidated basis, or both:	piieu	Of		
	•				
h	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant?		. 2b		
b	Were the organization's financial statements audited by an independent accountant?	 ad on			
	separate basis, consolidated basis, or both:	su on	a		
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for o	versia	ht		
·	of the audit, review, or compilation of its financial statements and selection of an independent according to the selection of the selection of an independent according to the selection of the				
	If the organization changed either its oversight process or selection process during the tax year, ex				
	Schedule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth	in		
	the Single Audit Act and OMB Circular A-133?		. 3a		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits?	ergo tl			
-	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a				
	-		Fc	rm 99	2013)