Form 990
Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)



▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

AF	or th	e 2010 calendar year, or tax year beginning an	d ending	-	
	heck if			D Employer identific	ation number
a	oplicab				
X	Addre	MUSICIANS ON CALL, INC.			
	Name			13-40	67116
	Initial		Room/suite		
]Termi ated		1103		41-2709
	Amer]Amer	ded out in the second		G Gross receipts \$	1,530,915.
	Appli	^{ca-} NEW YORK, NY 10001-3842		H(a) Is this a group ret	
	pend	F Name and address of principal officer: DR. LESLIE FAERST	EIN	for affiliates?	Yes X No
		SAME AS C ABOVE		H(b) Are all affiliates inclu	uded? Yes No
IT	ax-ex	empt status: 🚺 501(c)(3) 🛄 501(c) ()◀ (insert no.) 🛄 4947(a)(1	l) or 📃 527	If "No," attach a li	st. (see instructions)
		te: WWW.MUSICIANSONCALL.ORG	,	H(c) Group exemption	
κF	orm o	f organization: 🔀 Corporation 🔄 Trust 🔄 Association 🔛 Other 🕨	L Year		State of legal domicile: NY
Pa	rt I	Summary			
0	1	Briefly describe the organization's mission or most significant activities:	SCHEDU	ILE O	
ũ					
& Governance	2	Check this box 🕨 🛄 if the organization discontinued its operations or disp	osed of more	e than 25% of its net ass	sets.
٥ ٥	3	Number of voting members of the governing body (Part VI, line 1a)			19
ي م	4	Number of independent voting members of the governing body (Part VI, line 1b)		18
es	5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)		5	12
Activities	6	Total number of volunteers (estimate if necessary)		6	485
Acti	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			0.
_	b	Net unrelated business taxable income from Form 990-T, line 34		7b	0.
				Prior Year	Current Year
e	8	Contributions and grants (Part VIII, line 1h)		681,277.	600,479.
ent	9	Program service revenue (Part VIII, line 2g)		30,000.	32,500.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		6,326.	800.
-	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		226,981.	203,348.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		944,584.	837,127.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		29,028.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10		499,610.	563,759.
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
Ц.		Total fundraising expenses (Part IX, column (D), line 25)			
		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		355,336.	379,054.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		883,974.	942,813.
<u> </u>	19	Revenue less expenses. Subtract line 18 from line 12		60,610.	-105,686.
Net Assets or Fund Balances				ginning of Current Year	End of Year
Bala	20	Total assets (Part X, line 16)	······	962,227.	930,477.
et A ind	21	Total liabilities (Part X, line 26)	······	70,364.	107,509.
	22	Net assets or fund balances. Subtract line 21 from line 20		891,863.	822,968.
	rt II	Signature Block	نامم مما	anta and to the base of	Incontration and ball of 21
Und	er pen	alties of perjury, I declare that I have examined this return, including accompanying schedu	lies and statem	ents, 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 DR. LESLIE FAERSTEIN, Type or print name and title	EXECUTIVE DIRECTOR		Date
Paid	Print/Type preparer's name FREDERICK H. ROTHMAN	Preparer's signature	Date	Check DTIN if self-employed
Preparer	Firm's name ▶ LOEB & TROPER LL	P		Firm's EIN
Use Only	Firm's address 655 THIRD AVENUE NEW YORK, NY 100			Phone no. 212-867-4000
May the IF	RS discuss this return with the preparer shown abo	ove? (see instructions)		X Yes No
		a and the compute instructions		

032001 02-22-11 LHA For Paperwork Reduction Act Notice, see the separate instructions.

	990 (2010) MUSICIANS ON CALL, INC. 13-4067116 Pag
Pa	rt III Statement of Program Service Accomplishments
_	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission: MUSICIANS ON CALL BRINGS LIVE AND RECORDED MUSIC TO THE BEDSIDES OF
	PATIENTS IN HEALTHCARE FACILITIES. MUSICIANS ON CALL USES MUSIC TO
	PROMOTE AND COMPLEMENT THE HEALING PROCESS FOR PATIENTS, FAMILIES AND
	CAREGIVERS.
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
3	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services?
3	If "Yes," describe these changes on Schedule O.
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 \$ 535,858. including grants of \$) (Revenue \$ 32,500 IN 2010, PERFORMANCE PROGRAMS BY 350 VOLUNTEER MUSICIANS AND 135 GUIDE
	IN 2010, PERFORMANCE PROGRAMS BY 350 VOLONTEER MUSICIANS AND 135 GUIDE IN 36 HEALTH CARE FACILITIES AND DONATION OF 13,920 NEW AND USED CDS T
	84 HEALTH CARE FACILITIES.
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services. (Describe in Schedule O.)
τu	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ► 535,858.
	Form 990 (20
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2010.05040 MUSICIANS ON CALL, INC.

MUSICIANS	ON	CALL	INC.

Form 990 (2010)

Pa	rt IV Checklist of Required Schedules			<u> </u>
	· ·		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	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
•	public office? If "Yes," complete Schedule C, Part I	3		x
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? If "Yes," complete Schedule C, Part II	4		x
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
U	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to	<u> </u>		
U	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	0		
'	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
•		1		- 23
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	•		x
•	Schedule D, Part III	8		
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide	•		x
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, 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,		37	
	Part VI	11a	X	
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		X
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		X
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		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	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	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a	X	
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, XII, and XIII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
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	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		x
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that			
	operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Form **990** (2010)

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MUSICIANS ON CALL, INC.

Part IV Checklist of Required Schedules (continued)

21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 21 * Vies. ("recepted Schedule I, Parts I and II 21 X 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 21 * Vies. ("omplete Schedule I, Parts I and II 22 X 23 Did the organization network "Yes" to Part VII. Section A, line 3, 4, or 5 about compensation of the organization surrent and former officers, directors, trustees, key employees, and highest compensated employees? II *Ves." complete Schedule J 23 X 24 Did the organization invest may proceeds of tax exempt bonds buyond a temporary period exception? 24a X 25 Did the organization invest may proceeds of tax exempt bonds buyond a temporary period exception? 24d X 26 Did the organization maintain an escrew account other than a refunding server any time during the year? 24d X 25 Section 501(c)(3) and 501(c)(4) organizations. Did the organization regula in a necess benefit transaction with a disqualified person uning the array of the organization spice forms 500 of 900 900 200 201 Vest, complete Schedule L, Part I 256 X 26 Wasa is alon to bra a scurent or former officer, director, trustee, key employee, highly compensated employee, or disqualified person uning the array trust abusiness transaction with a disqualified person				Yes	No
column (A), line 21 If 'Yes,' complete Schedule I, Parts I and III 22 X 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 I, I'no', go to line 25. 2a X 24 Did the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule I, I'no', go to line 25. 24a X 2 Did the organization invest any proceeds of tax exempt bonds buyond a tamporary poid exception? 24a 24d 2 Did the organization invest any proceeds of tax exempt bonds outstanding at any time during the year? 24d 24d 2 Section 50(2)(3) and 50 (2)(4) organizations. Did the organization enage in an excess benefit transaction with a disqualified person in a proryear, and that the transaction with a tai enaged in the advise by end of an any or the organization is tax was I'n 'Nes,' complete Schedule L, Part I 25a X 28 Was a loan to or by a current officer, director, trustee, key employee, highly compensated employee, or disqualified person in approvem. The second with a disqualified person in approvem, and that the organization aparty to a business transaction with ne dilowing parties (see Schedule L, Part I/ 26a X 28 Was the organization pare	21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If</i> "Yes," <i>complete Schedule I, Parts I and II</i>	21		х
and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J. 23 X 24a Do the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes," answer lines 24b through 24d and complete Schedule K. I''No', go to the 25. 24a X 24b Do the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24d X 25a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24d X 26a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24d X 25a Section 501(c)[3) and 501(c)[4) organizations. Did the organization argue in a excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I 25a X 25a Was a loan to or by a current or former officer, director, trustee, key employee, highly compansated employee, or disqualified person outstanding a of the organization area than erassitance to an officer, director, trustee, key employee, scatstantal contributor, or a grant selection committee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part II 25a X 27 X A family member of a current or former officer, director, trustee, or key employee II''res,' complete Schedule L, Part IV instructions or applicabiliting thresholds; conditors, and exceptions? 25a	22		22		x
Schedule J 23 X 24a Did the organization have a tax-exempt bond issue with an cutstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after Docember 31, 2002? If Yes," answer lines 24b through 24d and complete Schedule K. If Yeb," go to line 25 X 24a Did the organization mixets any proceeds of tax-exempt bonds beyond a temporary period exception? 24b X 24b Did the organization mixets any proceeds of tax-exempt bonds outstanding at any time during the year to defease any tax-evempt bonds? 24d X 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization regage in an excess benefit transaction with a disqualified person on inp wear? 24d X 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization's pair form 590 or 990 E2? If Yes," complete Schedule L, Part I 25a X 26 Was a ban to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person on aprice and or bar assistance to an officer, director, trustee, key employee, nighly complexes Schedule L, Part II 26b X 27 Did the organization a party to a business transaction with one of the following parties (see Schedule L, Part II 28a X 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part II 28a X 29 Did the organization necelor the organidition, taxy part II Yes, "complete Schedule L, Part II	23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than 5100.000 as of the last day of the year, that was issued after Docember 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If 'No', go to line 25 24a X b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b 24b c Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24c 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage 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-E2? If 'Yes,' complete Schedule L, Part I 25a X 26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the enganization aveit an soliton officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the engite schedule L, Part II 26 X 27 Did the organization prived incertor, trustee, key employee, highly compensated employee, outstanding as on the engite schedule L, Part II 28a X 28 Was the organization prived is a grant or other assistance to an officer, director, trustee, key employee? If 'Yes,' complete Schedule L, Part IV 28a X 29 Did the organization prive to a business transaction with one of the following partites (see Schedule L, Part IV <t< th=""><th></th><td></td><td>23</td><td>x</td><td></td></t<>			23	x	
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 in a prior year, and that the transaction has not been reported on any of the organization is prior Forms 990 or 990-E2? If "Yes," complete Schedule L, Part I 25a X 26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person any again tax exemption exastistance to an officer, director, trustee, exemployee, bighly compensated employee, or disqualified person outstanding as of the end of the organization rowice a grant or other easistance to an officer, director, trustee, exemployee, bighly compensated employee, or disqualified person outstanding as of the end of the organization rowice a grant or other easistance to an officer, director, trustee, exemployee, bighly complexe schedule L, Part IV 26 X 27 Did the organization provide a grant or other easistance to an officer, director, trustee, or key employee, PI "Yes," complete Schedule L, Part IV 28a X 28 Was the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV 28a X 29 Did the organization receive contributions of art, hitstorical treasures, or other similar assets	24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If</i> "Yes," <i>answer lines 24b through 24d and complete</i>	24a		x
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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 X b Is the organization average 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-E2? If "Yes," complete Schedule L, Part I 25b X 27 Did the organization average that It engaged in an excess benefit transaction with a disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 X 27 Did the organization average the member, or to a person related to such an individual? If "Yes," complete Schedule L, Part II 26 X 28 Was the organization average through the year of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV 28a X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 20 Did the organization sell, exchange, dispose of, or transfer more than 25% of Its net assets? If "Yes," compl		any tax-exempt bonds?			
disqualified person during the year? If "Yes," complete Schedule L, Part I 25a X 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-E27 If "Yes," complete Schedule L, Part I 26b X 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part II 26 X 28 Was the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a X 28 Was the organization receive more than \$25,000 in non-cash contributors? If "Yes," complete Schedule L, Part IV 28a X 29 Did the organization receive contributions of art, historical trassures, or dure similar assets, or qualified conservation contributions? If "Yes," complete Schedule L, Part I 30 X 30 Did the organization is dupled, historical trassures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule L, Part I 30 X 31 X Did the organization model on ya tax-exempt or taxable ent			24d		
that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 // "Yes," complete 25 X 26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? // "Yes," complete Schedule L, Part // 26 X 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? // "Yes," complete Schedule L, Part IV 26 X 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV 28a X 29 A current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or director at N 29 X 29 Did the organization receive more than \$25,000 in non-cash contributions? // "Yes," complete Schedule M 29 X 30 Did the organization sell, exchauge, dispose of, or transfer more than 25% of its net assets?// "Yes," complete Schedule N, Part I 30 X 31 Did the organization sell, exchauge, dispose of, or transfer more than 25% of its net assets?// "Yes," complete Schedule N, Part I 31 X 32 Did the or		disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 X 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part IV 27 X 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): 28 A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV 28b X 30 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 31 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule N, Part I 31 X 32 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 X 33 Did the organization seli, exchange, dispose of, or transfer more than 25% of its net assets?/If "Yes," complete Schedule N, Part I 33 X 34 Wa	b	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes, " complete	25b		x
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III 27 X 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV 28 X 29 A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a X 29 Did the organization receive more thicer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a X 29 Did the organization receive more officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 X 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?/If "Yes," complete Schedule N, Part I 31 X 32 X 33 X 33 X 33 Did the organization neelwe and tasseparate from the organiza	26		26		х
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	38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
		Note. All Form 990 filers are required to complete Schedule O			

Form **990** (2010)

032004 12-21-10

Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 6			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 12		37	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> . (see instructions)	-		v
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," 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			x
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		
a	If "Yes," enter the name of the foreign country:			
Fa	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	Fo		x
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a 5b		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	50 50		
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	50		
Ua	any contributions that were not tax deductible?	6a		x
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	Ua		
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	0.0		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Х	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds 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		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
a L	Gross income from members or shareholders 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
120	amounts due or received from them.) [11b] Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	120		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
u	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
~	organization is licensed to issue qualified health plans			
с	Enter the amount of reserves on hand			
14a		14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
		Form	990 ((2010)

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Form 990 (2010)

	MUSICIANS	ON	CALL,	INC.
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MUSICIANS ON CALL, INC	MUSI	CIANS	ON	CALL,	INC.
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VI	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No"	respons
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.	

|--|

X

Sec	tion A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	19			
b	Enter the number of voting members included in line 1a, above, who are independent	1b	18			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationshi	p with a	iny other			
	officer, director, trustee, or key employee?			2	X	
3	Did the organization delegate control over management duties customarily performed by or under the	ne direct	supervision			
	of officers, directors or trustees, or key employees to a management company or other person?			3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 9	990 was	s filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?		5		X
6	Does the organization have members or stockholders?			6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more me	embers	of the			
	governing body?			7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other per			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken	during	the year			
	by the following:					
	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea					
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	levenue	Code.)			
					Yes	No
	Does the organization have local chapters, branches, or affiliates?			10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such	chapte	rs, affiliates,			
				10b	37	
	Has the organization provided a copy of this Form 990 to all members of its governing body before f	iling the	form?	11a	X	
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990.					
	a Does the organization have a written conflict of interest policy? If "No," go to line 13					
b	b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise					
	to conflicts?					
с	Does the organization regularly and consistently monitor and enforce compliance with the policy? If				v	
40	in Schedule O how this is done			12c	X X	
13	Does the organization have a written whistleblower policy?			13	A X	
14	Does the organization have a written document retention and destruction policy?			14		
15	Did the process for determining compensation of the following persons include a review and approv.		dependent			
_	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			45-	х	
a L	The organization's CEO, Executive Director, or top management official			15a		x
D	Other officers or key employees of the organization			15b		
16-	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 arrange	montwi	th a			
iva				16a		х
h	If "Yes," has the organization adopted a written policy or procedure requiring the organization to eva			104		
D	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the org					
				16b		
Sec	tion C. Disclosure			100		
17	List the states with which a copy of this Form 990 is required to be filed NY , PA , FL , TN					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	T (501(c)(3)s only) available	for		
	public inspection. Indicate how you make these available. Check all that apply.	. ((c)c cj) aramazic			
	Own website Another's website X Upon request					
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, or	conflict o	of interest policv. a	nd fina	Incial	
-	statements available to the public.		· [· · -) , ~			
20	State the name, physical address, and telephone number of the person who possesses the books a	nd reco	rds of the organiza	tion: 🕨	•	
	LESLIE FAERSTEIN - 212-741-2709					

39	WEST	32ND	STREET,	SUITE	1103,	NEW	YORK,	NY	1()0(01	-3	84	42
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Form **990** (2010)

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6 2010.05040 MUSICIANS ON CALL, INC.

032006 12-21-10

Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated	
	Employees, and Independent Contractors	
	Check if Schedule O contains a response to any question 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.

L Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A)	(B)	(C)					(D)	(E)	(F)	
Name and Title	Average		Position		Reportable	Reportable	Estimated			
	hours per	(cl	heck	all 1	that	app	ly)	compensation	compensation	amount of
	week (describe	ctor						from the	from related organizations	other compensation
	hours for	trustee or director				ted		organization	(W-2/1099-MISC)	from the
	related	stee o	ruste		æ	pensa		(W-2/1099-MISC)		organization
	organizations	ual tru	io nal 1		ploye	t com ee				and related
	in Schedule	Individual t	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
	O)	-	-	0	¥	Ξœ	ш.			
DR. LESLIE FAERSTEIN	40.00			v				142 140	0	15 540
SECRETARY & EXEC. DIR	40.00	X		X				143,148.	0.	15,548.
TOM POLEMAN	1 0 0	37		37				0	0	0
CO-CHAIR	1.00	X		X				0.	0.	0.
MICHAEL SOLOMON	2 00	37		37				0	0	0
CO-CHAIR AND FOUNDER	3.00	X		X				0.	0.	0.
LEE PERLMAN	1 00									0
	1.00	X		X				0.	0.	0.
RAJ AMIN	1 00									0
MEMBER-AT-LARGE	1.00	X						0.	0.	0.
ANNIE BALLIRO	1 00									0
MEMBER-AT-LARGE	1.00	х						0.	0.	0.
VIVEK TIWARY	1 00									
MEMBER-AT-LARGE	1.00	х						0.	0.	0.
JEFFREY R. SOLOMON, PHD	1									
MEMBER-AT-LARGE	1.00	х						0.	0.	0.
AUDREY S. WEINER	1 00									
MEMBER-AT-LARGE	1.00	х						0.	0.	0.
PATTY LIPSHUTZ, ESQ.	1									
MEMBER-AT-LARGE	1.00	X						0.	0.	0.
STUART DITSKY	1 00									
MEMBER-AT-LARGE	1.00	х						0.	0.	0.
CAROLINE PHITOUSSI	1 00									
MEMBER-AT-LARGE	1.00	х						0.	0.	0.
MARTHA WOLFGANG	1 00									0
MEMBER-AT-LARGE	1.00	х						0.	0.	0.
LEILA (LEE) DUNBAR	1 00									
MEMBER-AT-LARGE	1.00	х						0.	0.	0.
RICHARD PALMESE	1									
MEMBER-AT-LARGE	1.00	X						0.	0.	0.
SCOTT WELCH	1									
MEMBER-AT-LARGE	1.00	X						0.	0.	0.
RICHARD RUSSO	1							_		•
MEMBER-AT-LARGE	1.00	X						0.	0.	0.
032007 12-21-10										Form 990 (2010)

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Form **990** (2010)

	(2010)
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Part VII Section A. Officers, Directors, T		mplo	oyee			High	est	Compensated Employ					
(A)	(B)			•	C)			(D)	(E)		_	(F)	
Name and title	Average hours per week			Pos < all ⁻		app	oly)	Reportable compensation from	Reportable compensatio from related	on	an	timate nount other	
	(describe hours for related	Individual trustee or director	ustee			ensated		the organization (W-2/1099-MISC)	organization (W-2/1099-MIS		fr	pensa om the anizat	е
	organizations in Schedule O)	Individ ual tru	Institutional trustee	Officer	Key employee	Highest compensated employee	Former					d relat anizati	
GREGORY THOMPSON													
MEMBER-AT-LARGE	1.00	х						0.		0.			0.
ALISSA POLLACK	1 00	37						0		0			0
MEMBER-AT-LARGE	1.00	X						0.		0.			0.
1b Sub-total								143,148.		0.	1	5,5	
c Total from continuation sheets to Part V								0.		0.	1	5,5	0.
d Total (add lines 1b and 1c) 2 Total number of individuals (including but							no r		L 0.000 in reportab	-	-	5,5	10.
compensation from the organization						-,			·,	-			1
3 Did the organization list any former office	r, director or tru	stee	e, ke	y en	nplo	yee,	or ł	nighest compensated er	nployee on			Yes	No
line 1a? If "Yes," complete Schedule J for	such individual										3		Х
4 For any individual listed on line 1a, is the s									the organization		-	x	
and related organizations greater than \$1Did any person listed on line 1a receive or									idual for convice		4	<u> </u>	
rendered to the organization? If "Yes," col								v		,	5		Х
Section B. Independent Contractors	1												
1 Complete this table for your five highest of the organization. NONE	ompensated in	depe	ende	ent c	ont	racto	ors t	that received more than	\$100,000 of con	npens			
(A) Name and busines	s address							(B) Description of s	services	С	ompe)	;) nsatio	n
2 Total number of independent contractors		not li	mite	d to		se li: 0	stec	d above) who received n	nore than				
\$100,000 in compensation from the organ	nzation 🗩					<u> </u>					Form	990 (2	2010)
032008 12-21-10						8						(-	-7

Form 990 (20	10)		M	USICIA
Part VIII		Statement	of	Revenue

MUSICIANS ON CALL, INC.

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					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts ts	1 a	Federated campaigns	1a					
un a		Membership dues						
s, g	c	Fundraising events		79,450.				
Contributions, gifts, grants and other similar amounts		Related organizations						
nil S		Government grants (contributi						
rtion S	f	All other contributions, gifts, grant	ts, and					
the		similar amounts not included abov	/e 1f	521,029.				
lo tr	g	Noncash contributions included in lines	1a-1f: \$	7,320.				
ãĞ	h	Total. Add lines 1a-1f		►	600,479.			
				Business Code				
e Ce	2 a	SERVICE FEE		541900	32,500.	32,500.		
le vi	b							
n S en I	c	·						
Rev	c	l l						
Program Service Revenue	e)						
۳ I		All other program service reve			32,500.			
		Total. Add lines 2a-2f			52,500.			
	3	Investment income (including			10,687.			10,687.
	4	other similar amounts)		10,007.			10,007.	
	4 5	Royalties						
	5	Royalles	(i) Real	(ii) Personal				
	6 9	a Gross Rents						
		Less: rental expenses						
		Rental income or (loss)						
		Net rental income or (loss)						
		Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	638163.					
	b	Less: cost or other basis						
		and sales expenses	648050.					
	c	Gain or (loss)	-9,887.					
	c	1 Net gain or (loss)		►	-9,887.			-9,887.
e	8 a	Gross income from fundraising						
Other Revenu		including \$ 79,4						
Be		contributions reported on line	,	242422				
F		Part IV, line 18		243423.				
ŧ		Less: direct expenses		45,738.	107 695			107 695
		Net income or (loss) from fund	-	>	197,685.			197,685.
	чa	a Gross income from gaming ac Part IV, line 19						
	h	Less: direct expenses						
		Gross sales of inventory, less	Net income or (loss) from gaming activities					
	10 0	and allowances						
	b	Less: cost of goods sold						
		Net income or (loss) from sale						
t		Miscellaneous Revenue		Business Code				
Γ	11 a	MISCELLANEOUS		900099	5,663.			5,663.
	b)						
	c							
		All other revenue						
	e	• Total. Add lines 11a-11d			5,663.			
00000	12	Total revenue. See instructions.		►	837,127.	32,500.	0.	,
03200 12-21	-10				9			Form 990 (2010)

13101102 733030 2468 2010.05040 MUSICIANS ON CALL, INC. 2468_1

Form 990	(2010)
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MUSICIANS ON CALL, INC. Part IX Statement of Functional Expenses

	All other organizations must comp				
	not include amounts reported on lines 6b, 8b, 9b, 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 U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors,	150 606	70.240	62, 470	15 070
6	trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	158,696.	79,348.	63,478.	15,870.
7 8	Other salaries and wages Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	335,691.	219,447.	56,216.	60,028.
9 10	Other employee benefits Payroll taxes	30,668. 38,704.	21,066. 23,222.	1,154. 9,289.	8,448. 6,193.
11 а	Fees for services (non-employees):	1 500		1 500	
	Legal Accounting Lobbying	1,500. 18,390.		1,500. 18,390.	
e f	Professional fundraising services. See Part IV, line 17 Investment management fees	3,808.		3,808.	
g 12	Advertising and promotion	28,537. 100,916.	24,179. 62,529.	4,000. 30,580.	358. 7,807.
13 14	Office expenses	44,184.	36,412.	2,314.	5,458.
15 16 17	Royalties Occupancy Travel	55,481. 21,288.	42,518. 16,931.	6,544. 2,036.	6,419. 2,321.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 20 21	Conferences, conventions, and meetings Interest Payments to affiliates				
22 23	Depreciation, depletion, and amortization	5,860. 1,161.	589.	5,860. 382.	190.
24	above. (List miscellaneous expenses not covered 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule 0.)				
a b	TICKETS AND PROCESSING MISCELLANEOUS	87,426. 9,052.	8,271.	4,147. 119.	83,279. 662.
c d	DUES AND SUBSCRIPTIONS RENTAL AND CATERING	1,289. 162.	1,184. 162.	105.	
e f 25	All other expenses	942,813.	535,858.	209,922.	197,033.
26	Joint costs. Check here 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

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Form 990 (2010)

13101102 733030 2468

Form 990 (MUSICIANS	ON	CALL,	INC.
Part X	Balance Shee	t			

				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		1,849.	1	1,600.
	2	Savings and temporary cash investments		617,818.	2	405,907.
	3	Pledges and grants receivable, net		1,200.	3	100,542.
	4	Accounts receivable, net		11,666.	4	
	5	Receivables from current and former officers, directors, trustees, k				
	ľ	employees, and highest compensated employees. Complete Part	-			
		of Schedule L			5	
	6	Receivables from other disgualified persons (as defined under sec	tion		-	
	ľ	4958(f)(1)), persons described in section 4958(c)(3)(B), and contrib				
		employers and sponsoring organizations of section 501(c)(9) volum	-			
		employees' beneficiary organizations (see instructions)	-		6	
Assets	7	Notes and loans receivable, net			7	
SS	8	Inventories for sale or use		43,596.	8	42,809.
4	9	Prepaid expenses and deferred charges		16,614.	9	22,288.
		Land, buildings, and equipment: cost or other			-	
			21,758.			
	ь	Less: accumulated depreciation 10b	56,649.	7,870.	10c	65,109.
	11	Investments - publicly traded securities	-	248,536.	11	279,167.
	12	Investments - other securities. See Part IV, line 11			12	
	13	Investments - program-related. See Part IV, line 11			13	
	14	Intangible assets		121.	14	98.
	15	Other assets. See Part IV, line 11		12,957.	15	12,957.
	16	Total assets. Add lines 1 through 15 (must equal line 34)		962,227.	16	930,477.
	17	Accounts payable and accrued expenses	35,364.	17	45,544.	
	18	Grants payable			18	
	19	Deferred revenue		35,000.	19	61,965.
	20	Tax-exempt bond liabilities			20	
es	21	Escrow or custodial account liability. Complete Part IV of Schedule	∋D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key en	nployees,			
iab.		highest compensated employees, and disqualified persons. Comp	lete Part II			
		of Schedule L		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. Complete Part X of Schedule D		70.264	25	
	26	Total liabilities. Add lines 17 through 25		70,364.	26	107,509.
		Organizations that follow SFAS 117, check here X and	complete			
ces		lines 27 through 29, and lines 33 and 34.		891,863.		773,669.
lan	27	Unrestricted net assets		091,003.	27	49,299.
Ba	28	Temporarily restricted net assets			28	49,299.
pun	29	Permanently restricted net assets			29	
Ē		Organizations that do not follow SFAS 117, check here	and			
s o	20	complete lines 30 through 34.			30	
Net Assets or Fund Balances	30 31	Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund			30	
t Aś	32	Retained earnings, endowment, accumulated income, or other fun			32	
Ne	33	Total net assets or fund balances		891,863.	33	822,968.
	34	Total liabilities and net assets/fund balances		962,227.	34	930,477.

Form **990** (2010)

Form	990 (2010) MUSICIANS ON CALL, INC.	13-406	7116	Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				X
				_	
1	Total revenue (must equal Part VIII, column (A), line 12)	1			27.
2	Total expenses (must equal Part IX, column (A), line 25)	2			13.
3	Revenue less expenses. Subtract line 2 from line 1	3	-105		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			63.
5	Other changes in net assets or fund balances (explain in Schedule O)	5			91.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	822	2,9	68.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				X
1 2a	Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule Were the organization's financial statements compiled or reviewed by an independent accountant?			Yes	No X
b					
	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th review, or compilation of its financial statements and selection of an independent accountant?	e audit,	2b 2c	x x	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a			
	separate basis, consolidated basis, or both:				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	ngle Audit			
	Act and OMB Circular A-133?		3a		_X_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audits, explain why in Schedule O and describe any steps taken to undergo such audits.	ired audit	3b		
			Form 9	990 (2010)

032012 12-21-10

SCHEDULE A (Form 990 or 990-EZ)
(Form 990 or 990-EZ)

Department of the Treasury

Public Charity Status and Public S	upport
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Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Internal Revenue Service Attach to Form 990 or Form 990-EZ. See separate instructions.												
Name o	f the organizati	ion						E	mployer	identificati	on nui	mber
		MUSICIA	NS ON CALL,	INC.					1	3-4067	116	
Part I	Reason	for Public Char	ity Status (All organiz	zations mu	st complet	te this par	t.) See inst	ructions.				
The orga	anization is not a	a private foundation	because it is: (For lines [·]	1 through ⁻	11, check	only one b	ox.)					
1	A church, co	nvention of churche	s, or association of chur	ches desc	ribed in se	ection 170	(b)(1)(A)(i)					
2	A school des	cribed in section 17	'0(b)(1)(A)(ii). (Attach Sc	hedule E.)								
3	A hospital or	a cooperative hospi	tal service organization	described	in section	170(b)(1)	(A)(iii).					
4	A medical res	search organization	operated in conjunction	with a hos	pital desc	ribed in se	ction 170	(b)(1)(A)(ii	i). Enter t	the hospital	's nam	ie,
	city, and stat	:e:										
5	An organizat	ion operated for the	benefit of a college or u	niversity ov	wned or op	perated by	a governi	mental uni	t describ	ed in		
	_ section 170	(b)(1)(A)(iv). (Comple	ete Part II.)									
6	¬ ·	ate, or local governm	ent or governmental uni	t described	d in sectio	on 170(b)(1	I)(A)(v).					
7 X	An organizat	ion that normally rec	eives a substantial part	of its supp	ort from a	governme	ental unit c	or from the	general	public desc	ribed i	n
	section 170	b)(1)(A)(vi). (Comple	te Part II.)									
8	A community	rtrust described in s	ection 170(b)(1)(A)(vi).	(Complete	Part II.)							
9 🗆	•		eives: (1) more than 33		•••					•		
		•	nctions - subject to certa	•						•		
			axable income (less sec	tion 511 ta	x) from bu	isinesses a	acquired b	y the orga	nization	after June 3	0, 197	5.
	7	509(a)(2). (Complete										
10	7 ⁸	•	perated exclusively to te	•							_	
11 📖	•	•	perated exclusively for th						•			or
			ations described in secti		,		2). See sec	tion 509(a	a)(3). Che	eck the box	that	
			organization and compl		Ū.	tionally int	agrated		d] Type III - C)ther	
е	л ⁷¹		⊥ Type II the organization is not				0	r moro dis				n
e	, ,		han one or more publicly						•	•		11
f		•	ten determination from		-					3001011 000	(a)(2).	
•	•		nis box									
g			organization accepted ar									
3			irectly controls, either al								Yes	No
			upported organization?									
			n described in (i) above?									
			person described in (i) o									
h			about the supported or									
(i) Nan	ne of supported	(ii) EIN	(iii) Type of organization	r /	0	(v) Did you	2	(vi) Is organizatio	the	(vii) Am	nount of	f
or	ganization		(described on lines 1-9	in col. (i) lis	sted in your document?		ion in col. support?	(I) organiz	ed in the l	sup	port	
			above or IRC section	· ·		., ,		U.S				
			(see instructions))	Yes	No	Yes	No	Yes	No			

 Total
 Image: Construction of the set of the set

Schedule A (Form 990 or 990-EZ) 2010

032021 12-21-10

2010.05040 MUSICIANS ON CALL, INC.

2468___1

OMB No. 1545-0047

Open to Public

Schedule A (Form 990 or 990-EZ) 2010 MUSICIANS ON CALL, INC.

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.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	649,662.	661,782.	1,179,713.	681,277.	600,479.	3,772,913.
2	Tax revenues levied for the organ-						
	ization'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	Total. Add lines 1 through 3	649,662.	661,782.	1,179,713.	681,277.	600,479.	3,772,913.
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)						177,156.
	Public support. Subtract line 5 from line 4.						3,595,757.
	ction B. Total Support	()	<i>"</i> • • • • • • •	()			
	ndar year (or fiscal year beginning in) 🕨	(a)2006 649,662.	(b) 2007 661,782.	(c)2008 1,179,713.	(d)2009 681,277.	(e) 2010 600,479.	(f) Total
	Amounts from line 4	049,002.	001,702.	1,179,713.	001,277.	000,479.	3,772,913.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties	21,221.	25,039.	26,110.	10,020.	10,687.	93,077.
9	and income from similar sources Net income from unrelated business	21,221.	23,035.	20,110.	10,020.	10,007.	55,011
9	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)	205,904.	535,624.	29,076.	256,397.	249,086.	1,276,087.
11	Total support. Add lines 7 through 10		-	-		,	5,142,077.
	Gross receipts from related activities,	etc. (see instruction	ons)			12	266,640.
	First five years. If the Form 990 is for			d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
	organization, check this box and stor	here					
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2010 (line 6, column (f) di	ivided by line 11, c	olumn (f))		14	<u>69.93</u> %
	Public support percentage from 2009					15	74.23 %
16a	33 1/3% support test - 2010. If the o	rganization did not	t check the box or	line 13, and line 1	4 is 33 1/3% or m	ore, check this bo	k and
	stop here. The organization qualifies		-				
b	33 1/3% support test - 2009. If the o						
	and stop here. The organization qual						
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac			-	-	-	
L-	meets the "facts-and-circumstances"	-		• • • •			
a	10% -facts-and-circumstances tes						
	more, and if the organization meets the organization meets the "facts-and-circ						
18	Private foundation. If the organization						
				,,,		dule A (Form 990	

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Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 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.)

	ndar year (or fiscal year beginning in) 🕨	(a) 2006	(b) 2007	(c) 2008	(d) 2009		e) 2010	(f) Total
	Gifts, grants, contributions, and							
	membership fees received. (Do not							
i	include any "unusual grants.")							
	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in							
i	any activity that is related to the organization's tax-exempt purpose							
3	Gross receipts from activities that							
	are not an unrelated trade or bus-							
į	iness under section 513							
	Tax revenues levied for the organ- ization's benefit and either paid to							
,	or expended on its behalf							
5	The value of services or facilities							
f	furnished by a governmental unit to							
1	the organization without charge							
6	Total. Add lines 1 through 5							
7a.	Amounts included on lines 1, 2, and							
;	3 received from disqualified persons							
	Amounts included on lines 2 and 3 received							
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year							
	Add lines 7a and 7b							
	Public support (Subtract line 7c from line 6.)							
	tion B. Total Support							<u>.</u>
	ndar year (or fiscal year beginning in) 🕨	(a) 2006	(b) 2007	(c) 2008	(d) 2009		e) 2010	(f) Total
	Amounts from line 6	(4) 2000	(2) 2001	(0) _ 000			.,	(1) 1010
10a (Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
	Unrelated business taxable income							
((less section 511 taxes) from businesses							
	acquired after June 30, 1975							
11 ; ,	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is							
12 (regularly carried on Other income. Do not include gain or loss from the sale of capital							
	assets (Explain in Part IV.)							
	First five years. If the Form 990 is for	the organization	l first second the	l rd fourth or fifth t		ion 501		ration
		-			•			· · · · ·
	check this box and stop here tion C. Computation of Publi							PL
	Public support percentage for 2010 (I			colump (f))		15		
	Public support percentage for 2010 (I Public support percentage from 2009							
	tion D. Computation of Invest					01		
	•					17		
	Investment income percentage for 20							
	Investment income percentage from 2						0/ ====!!! *	7 in 1 1
туа (33 1/3% support tests - 2010. If the							
	more than 33 1/3%, check this box ar							
		organization did	not check a box o	n line 14 or line 19	a, and line 16 is n			
b	33 1/3% support tests - 2009. If the							
b; I	line 18 is not more than 33 1/3%, che							ÞĻ
b; I					his box and see in	nstruct	ions	● □ ● □ 0 or 990-EZ)

Part IV Supplemental Informatio	D. Complete this part to provide the evplanations row	quired by Part II, line 10. Part II, line 17a or 17b
and Part III, line 12. Also complet	n. Complete this part to provide the explanations re- te this part for any additional information. (See instruct	tions).
	ACTION D I THE 10	
SCHEDULE A, PART II, SE	CTION B, LINE IU	
ISCELLANEOUS INCOME AN	D SPECIAL EVENTS	
32024 12-21-10		Schedule A (Form 990 or 990-EZ)
	16	

(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047
2010
Open to Public

Nam	e of the organization MUSICIANS ON CALL, INC.	Employer identification number 13-4067116
Par		
	organization answered "Yes" to Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	(-)
2	Aggregate contributions to (during year)	
2	Aggregate 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 a	l Idvised funds
5	are the organization's property, subject to the organization's exclusive legal control?	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds car	
Ŭ	for charitable purposes and not for the benefit of the donor or donor advisors or for any other purp	
	impermissible private benefit?	
Par	rt II Conservation Easements. Complete if the organization answered "Yes" to Form 99	
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
•		n historically important land area
		certified historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the fo	orm of a conservation easement on the last
	day of the tax year.	
		Held at the End of the Tax Year
а	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	
с		
d		
	listed in the National Register	
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by	
	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	g of
	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easement	its during the year 🕨
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements du	ring the year ► \$
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section	170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?	
9	In Part XIV, describe how the organization reports conservation easements in its revenue and expe	ense statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization's financial statements that descri	bes the organization's accounting for
	conservation easements.	
Par	rt III Organizations Maintaining Collections of Art, Historical Treasures, o	r Other Similar Assets.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue st	-
	historical treasures, or other similar assets held for public exhibition, education, or research in furth	herance of public service, provide, in Part XIV,
	the text of the footnote to its financial statements that describes these items.	
b		
	treasures, or other similar assets held for public exhibition, education, or research in furtherance o	f public service, provide the following amounts
	relating to these items:	
	(i) Revenues included in 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 fina	ncial gain, provide
	the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	
а	, , ,	• • •
b	Assets included in Form 990, Part X	• *
		. .
LHA	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	Schedule D (Form 990) 2010

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Part IIIII Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) 3 Using the organization soculation, accession, and other records, check any of the following that are a significant use of its collection items (thesk all that apply): a Public axhibition d Loan or exchange programs b Scholarly research e Other c Previse axecipation of the organization solections and explain how they further the organization is exempt purpose in Part XIV. 5 Diring the year, did the organization solections and explain how they further the organization solection? Yes No Partice dara anound to norm 900, Part X, line 21. 1a Is the organization angent, trustee, custodian or other intermediary for contributions or other assets not included on Form 900, Part X, line 21. 1a Is the organization include an anound to Form 990, Part X, line 21. Yes No b If Yes, 'explain the arrangement in Part XIV. Comments and the organization include an anound to Form 990, Part X, line 21. Yes No b If Yes, 'explain the arrangement in Part XIV. Comments and the organization include an anound to Form 990, Part X, line 21. Yes No b If Yes, 'explain the arrangement in Part XIV. Comments and the organization include ananound ton Form 990, Part X, line 21. <t< th=""><th>_</th><th></th><th>NS ON CALL</th><th></th><th></th><th></th><th>13-40</th><th></th><th><u> </u></th><th>2</th></t<>	_		NS ON CALL				13-40		<u> </u>	2
e b	Pai	t III Organizations Maintaining C	Collections of A	rt, Historica	al Treasures,	or Other	Similar Asse	ts (cont	inued)	
a Public achibition d Laan or exchange programs b Scholarly research e Other	3	Using the organization's acquisition, access	ion, and other record	ds, check any o	of the following th	at are a sigr	nificant use of its	collectio	n items	
b Scholarly research e Other c Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be solid to raise fund starter than to be maintained as part of the organization answered "Yes" to Form 980, Part XIV. Fart W Escrew and Custodial Arrangements. Complete if the organization answered "Yes" to Form 980, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 980, Part X, line 21. b If "Yes", explain the arrangement in Part XIV and complete the following table: c Beginning balance d Additions during the year f Ending balance d (a) Current Year Distributions (b) Current Year b (f) Current Year c No b (a) Current year c (b) Current year c (c) Two years back d Other explantion arrangement in Part XV. Part W Endowment I		(check all that apply):								
c □ Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets 10 be sold to raise funds rather than to be maintained as part of the organization's collection? Ves No Pert IV Excrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part V, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. Is the organization include an amount on Form 990, Part X, line 21? Mount 16 did did did did 2 Did the organization include an amount on Form 990, Part X, line 21? Ves No b trift Ending balance did did did 2 Did the organization include an amount on Form 990, Part X, line 21? Ves No b ft "Yes," explain the arrangement in Part XIV. 2 Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. did did did did did did	а	Public exhibition	c							
Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be solid to raise funds rather than to be maintained as part of the organization assets to be solid to raise funds rather than to be maintained as part of the organization assets to be solid to raise funds rather than to be maintained as part of the organization assets to see solid or raise funds rather than to be maintained as part of the organization assets to be solid to raise funds rather than to be maintained as part of the organization assets to reported an amount on Form 990, Part X, line 21 a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? but of the standard to report the following table:	b	Scholarly research	e	e 🛄 Other						
During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assits to be solit or alse funds rather than to be maintained as part of the organization's collection? Part V Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' to Form 990, Part V, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an agent, fususe, custodian or other intermediary for contributions or other assets not included on Form 990, Part X and complete the following table:	с	Preservation for future generations								
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' to Form 990, Part X, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, we shall be arrangement in Part XIV and complete the following table: Yes No b if "Yes," explain the arrangement in Part XIV and complete the following table: Amount 10 10 11 10 10 10 10 10 11 10 10 11 10	4	Provide a description of the organization's c	ollections and explai	in how they fur	ther the organizat	ion's exemp	ot purpose in Par	t XIV.		
Part IV Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' to 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 XIV and complete the following table: Image: Complete intermediary for contributions or other assets not included on Form 990, Part X, line 21? Image: Complete intermediary for contributions during the year 1d c Beginning balance Image: Complete intermediary for contributions or other assets not included on Form 990, Part X, line 21? Image: Complete intermediary for complete intermediary forecomplete intermediary for complete intermediary for c	5	During the year, did the organization solicit of	or receive donations	of art, historica	al treasures, or oth	ner similar a	ssets	_		
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, V b If "Yes," explain the arrangement in Part XIV and complete the following table: c Beginning balance d Additions during the year fe f Ending balance b If "Yes," explain the arrangement in Part XIV. Part V Part V Endowment Funds. Complete If the organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance (a) Current year (b) Pror year (c) Two years back (d) Current year (d) Dror year (d) Dror year (d) Two years back (e) Four years back (f) Two years back (fe) Three years back (e) Four years back (f) Two years back (fe) Three years back (f) Other expenditures for facilities (f) Administrative expenses (g) Arrent year (g) Arrent year (g) Arrent year (h) Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment } (h) rela)
1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Ves No b If 'Yes,'' explain the arrangement in Part XIV and complete the following table:	Pa			ete if the orgar	ization answered	"Yes" to Fo	orm 990, Part IV,	line 9, or		
on Form 990, Part X? Yes No b If "Yes," explain the arrangement in Part XIV and complete the following table: Amount c Beginning balance 1d d Additions during the year 1d d Additions during the year 1e f Ending balance 1f 2a Did the organization include an amount on Form 990, Part X, line 21? Yes No b If "Yes," explain the arrangement in Part XIV. Part X Yes No Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. (e) Four years back (e) Four years back 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (e) Four years back b Contributions (a) Current year (b) Prior year (c) Two years back (e) Four years back a drains or scholarships (b) Corten years back (c) Three years back (e) Four years back c Tother expenditures for facilities (b) Current year (b) Prior year (c) Two years back (e) Four years back c Net investment earnings, gains, and losses (b) Corten years back (c) Four years back (e) Four years back (e) Four years back c Notide the est										
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b If "Yes," explain the arrangement in Part XIV and complete the following table: c Beginning balance d Additions during the year d dditions during the year d d dotter amount on Form 990, Part X, line 21? d dditions during the arrangement in Part XIV. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (c) Four years (c) Four y		on Form 990, Part X?					L	Yes	L No)
c Beginning balance 1c 1d d Additions during the year 1d 1e Distributions during the year 1e 1f 1e 2a Distributions during the year 1e 1f 1e 2a Distributions during the year 1e 1f 1e 1f 2a Did the organization include an amount on Form 990, Part X, line 21? Ves No Yes No b If Yes, 'explain the arrangement in Part XV. Part V Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part IV, line 10. (e) Four years back (e) Four years back b Contributions (a) Current year (b) Prior year (c) Two years back (e) Four years back (e) Four years back c Not investment earnings, gains, and losses (a) Current year (b) Prior year (c) Two years back (e) Four years back d Grants or scholarships (a) Current year (b) Prior year (c) Two years back (e) Four years back c Other expenditures for facilities (a) Cost or other (b) Prior year (c) Two years back (e) Four years back d Part Vi Land desig	b	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing table:						
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e Distributions during the year 1e f Ending balance 1f 2a Did the organization include an amount on Form 990, Part X, line 21? Ves No b If "Yes," explain the arrangement in Part XIV. Image: Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back b Contributions (b) Prior year (c) Two years back (d) Three years back (e) Four years back c Not interstructures for facilities (b) Prior year (c) Two years back (d) Three years back (e) Four years back d Grants or scholarships (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back c Not the estimated precentage of the year end balance held as: and programs (a) Current year (b) Prior year (c) Two years back (d) Three years back (f) Three years back (f) the years back (f) the years back (f) the years back (f) Three years back (f) Four years back (f) Three years back (f) Four years back (f) Four years back (f	с	Beginning balance					1c			
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2a Did the organization include an amount on Form 990, Part X, line 21? Yes No b If 'Yes," explain the arrangement in Part XV. Part V Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part IV, line 10. 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (a) Three years back (e) Four years back b Contributions (a) Current year (b) Prior year (c) Two years back (a) Three years back (e) Four years back b Contributions (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back b Contributions (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back b Contributions (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back c No Board designated or years back and programs (a) Cost or other (b) Prior year (c) Two years back (e) Four years back c Pervide the estanted organizations Sa (remement) % % % % % % % <	е	Distributions during the year					1e			
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Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 1a Beginning of year balance (b) Contributions (c) Two years back (d) Three years back (e) Four years back c Net investment earnings, gains, and losses (c) Two years back (d) Three years back (e) Four years back c Net investment earnings, gains, and losses (c) Two years back (d) Three years back (e) Four years back c Net investment earnings, gains, and losses (c) Two years back (d) Three years back (e) Four years back e Other expenditures for facilities (c) Two years back (d) Three years back (e) Four years back e Other expenditures for facilities (c) Two years back (d) Three years back (e) Four years back e Other expenditures for facilities (f) (f) (f) (f) (f) f Administrative expenses (f) (f) (f) (f) (f) f Are there endowment (f) (f)								Yes	No.)
1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back b Contributions (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back c Net investment earnings, gains, and losses (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back c Net investment earnings, gains, and losses (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back e Other expenditures for facilities (a) Current year (c) Two years back (d) Three years back (e) Four years g End of year balance (b) Pour year (c) Pars tance (c) Par	b	If "Yes," explain the arrangement in Part XIV								
1a Beginning of year balance Image: Contributions b Contributions Image: Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs Image: Contributions f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment ▶ % Permanent endowment ▶ % Term endowment ▶ % Term endowment ▶ (i) unrelated organizations (i) unrelated organizations (i) unrelated organizations (ii) related organizations (ii) related organizations 1 Image: Construct Network 2 Description of investment (a) Cost or other (b) Cost or other (c) Accumulated (d) Book value description of investment (a) (b) <td>Pa</td> <td>t V Endowment Funds. Complete</td> <td>if the organization ar</td> <td>nswered "Yes"</td> <td>to Form 990, Par</td> <td>t IV, line 10.</td> <td></td> <td></td> <td></td> <td></td>	Pa	t V Endowment Funds. Complete	if the organization ar	nswered "Yes"	to Form 990, Par	t IV, line 10.				
b Contributions			(a) Current year	(b) Prior ye	ar (c) Two yea	ırs back (d	Three years back	(e) Four	years back	i.
c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance g Mathemathemathemathemathemathemathemathem	1a	Beginning of year balance								
c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance g Mathemathemathemathemathemathemathemathem	b	Contributions								
e Other expenditures for facilities and programs										
and programs	d	Grants or scholarships								
f Administrative expenses	е	Other expenditures for facilities								
f Administrative expenses		and programs								
g End of year balance	f									
a Board designated or quasi-endowment ▶% b Permanent endowment ▶% c Term endowment ▶% 3a Are there endowment tunds not in the possession of the organization that are held and administered for the organization by:										
a Board designated or quasi-endowment ▶% b Permanent endowment ▶% c Term endowment ▶% 3a Are there endowment tunds not in the possession of the organization that are held and administered for the organization by:	2	Provide the estimated percentage of the year	ar end balance held a	as:						
b Permanent endowment ▶% c Term endowment ▶% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations	а									
3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (ii) related organizations (ii) related organizations (ii) related organizations (iii) related organizations (ii) related organizations (iii) related organizations (ii) related organizations (iii) related organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of investment (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (e) Land. (f) Book value (g) 374. (g) 374.										
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 3a(i)	с	Term endowment	%							
by: Yes No (i) unrelated organizations 3a(i) 3a(i) 3a(ii) 3a(ii) 3a(ii) 3a(ii) 3b 3c 3c<	3a	Are there endowment funds not in the posse	ession of the organiz	ation that are h	neld and administ	ered for the	organization			
(i) unrelated organizations 3a(i) (ii) related organizations 3a(ii) b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 3b 4 Describe in Part XIV the intended uses of the organization's endowment funds. 3b Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of investment (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land 9,374. 9,374. 0. c Leasehold improvements 9,374. 9,374. 0. d Equipment 49,308. 44,121. 5,187. e Other 63,076. 3,154. 59,922.			Ũ				U	Ī	Yes No	, ,
(ii) related organizations 3a(ii) b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 3b 4 Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of investment (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land See Form 990, Part X, line 10. 1a Land (d) Book value b Buildings C c Leasehold improvements 9,374. 9,374. 0. c Leasehold improvements 9,374. 9,374. 0. c Leasehold improvements 9,374. 9,374. 0. c Leasehold improvements 9,374. 0. c Leasehold improvements 5,187. e Other 63,076.								3a(i)		_
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 3b 4 Describe in Part XIV the intended uses of the organization's endowment funds. 3b Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. (c) Accumulated depreciation (d) Book value 1a Land 9, 374. 9, 374. 0. c Leasehold improvements 9, 374. 9, 374. 0. d Equipment 49, 308. 44, 121. 5, 187. e Other 63, 076. 3, 154. 59, 922.										
4 Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of investment (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1a Land	b									-
Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of investment (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land	4							<u> </u>		-
Description of investment(a) Cost or other basis (investment)(b) Cost or other basis (other)(c) Accumulated depreciation(d) Book value1a Land	Pa		0		0.					
basis (investment) basis (other) depreciation 1a Land						(c) Acc	umulated	(d) Boo	k value	-
b Buildings 9,374. 9,374. 0. c Leasehold improvements 9,374. 9,374. 0. d Equipment 49,308. 44,121. 5,187. e Other 63,076. 3,154. 59,922.		· · p · · · · · · · · · · · · · ·						(,		
b Buildings 9,374. 9,374. 0. c Leasehold improvements 9,374. 9,374. 0. d Equipment 49,308. 44,121. 5,187. e Other 63,076. 3,154. 59,922.	1a	Land								-
c Leasehold improvements 9,374. 9,374. 0. d Equipment 49,308. 44,121. 5,187. e Other 63,076. 3,154. 59,922.										-
d Equipment 49,308. 44,121. 5,187. e Other 63,076. 3,154. 59,922.					9,374.		9,374.		0	•
e Other 63,076. 3,154. 59,922.						4				
				X, column (B),	-	•	►			

Schedule D (Form 990) 2010

032052 12-20-10

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23 2010.05040 MUSICIANS ON CALL, INC.

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Schedule D (Form 990) 2010 MUSICIANS ON CALL, INC.

13-4067116	Page 3
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Fart vii investments - Other Securities. Se	e Form 990, Part X, I	ine 12.		
(a) Description of security or category (including name of security)	(b) Book value		(c) Method of valua Cost or end-of-year mai	
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
(1)				
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ►				
Part VIII Investments - Program Related. s		line 10		
Fart vin Investments - Program Related. S	ee Form 990, Part X, T		(a) Mathad of value	tion
(a) Description of investment type	(b) Book value	,	(c) Method of valua Cost or end-of-year man	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ►				
Part IX Other Assets. See Form 990, Part X, line	15			
, , ,	Description			(b) Book value
	Description			
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Fotal. (Column (b) must equal Form 990, Part X, col (B) line	e 15.)			
Part X Other Liabilities. See Form 990, Part X,			· · · · · · · · · · · · · · · · · · ·	•
1. (a) Description of liability		(b) Amount		
(1) Federal income taxes				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11)				
Total. (Column (b) must equal Form 990, Part X, col (B) line	e 25.) 🕨			
FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote t 2. FIN 48 (ASC 740).	o the organization's financia	a statements that reports the o	ganization s hability for uncerta	un tax positions under
2. FIN 48 (ASC 740). 322053 12-20-10			Sch	edule D (Form 990) 2010
		24		-

Sche	dule D (Form 990) 2010 MUSICIANS ON CALL, INC.			13-	4067116	Page 4
Pa	t XI Reconciliation of Change in Net Assets from Form 990 to	o Audited	Financial S	tatemer		
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1			,127.
2	Total expenses (Form 990, Part IX, column (A), line 25)		2			,813.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3		-105,	
4	Net unrealized gains (losses) on investments				36,	,791.
5	Donated services and use of facilities					
6	Investment expenses					
7	Prior period adjustments					
8	Other (Describe in Part XIV.)					
9	Total adjustments (net). Add lines 4 through 8					,791.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 a	nd 9	10			,895.
Pa	t XII Reconciliation of Revenue per Audited Financial Statem	ents With	Revenue p	er Retur		
1				1	1,229,	,045.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains on investments		36,79	1.		
b	Donated services and use of facilities		358,93	35.		
С	Recoveries of prior year grants					
d	Other (Describe in Part XIV.)	. 2d				
е	Add lines 2a through 2d			2e		,726.
3	Subtract line 2e from line 1			3	833,	,319.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a	3,80)8.		
b	Other (Describe in Part XIV.)	. 4b				
С	Add lines 4a and 4b				3,	,808.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)					,127.
Pa	t XIII Reconciliation of Expenses per Audited Financial Staten					0.4.0
1	Total expenses and losses per audited financial statements			1	1,297,	,940.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		250 07			
а	Donated services and use of facilities		358,93	55.		
b	Prior year adjustments	. 2 b				
С	Other losses					
d	Other (Describe in Part XIV.)	. 2d			250	005
е	Add lines 2a through 2d					,935.
3	Subtract line 2e from line 1			3	939,	,005.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		2 04			
	Investment expenses not included on Form 990, Part VIII, line 7b	. 4 a	3,80	18.		
	Other (Describe in Part XIV.)	. 4b				
С	Add lines 4a and 4b			4c		,808.
5				5	942,	,813.
	t XIV Supplemental Information					
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part					4; Part
	e 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also com					
PAL	RT X, LINE 2: THE ORGANIZATION HAS DETERMI	INED TH	IAT THERE	SARE	NU	

MATERIAL UNCERTAIN TAX POSITIONS THAT REQUIRE RECOGNITION OR DISCLOSURE IN

THE FINANCIAL STATEMENTS. PERIODS ENDING DECEMBER 31, 2007 AND SUBSEQUENT

REMAIN SUBJECT TO EXAMINATION BY APPLICABLE TAXING AUTHORITIES.

Schedule D (Form 990) 2010

032054 12-20-10

SCHEDULE G	
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(F	orm	990	or	990	-EZ

Department of the Treasury	
Internal Revenue Service	

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

2010
Open To Public

Employer identification number

OMB No. 1545-0047 _

Name of the organization	
	MILCICIAN

JSICIANS	ON	CALL,	INC.

MUSICIA	NS ON CALL,	INC.			13-4067	116
Part I Fundraising Activities required to complete this pa	Complete if the organiz	ation answered "	∕es" to	Form 990, Part IV, I	line 17. Form 990-EZ	filers are not
 Indicate whether the organization raises Mail solicitations Internet and email solicitations Phone solicitations In-person solicitations Did the organization have a written key employees listed in Form 990, F If "Yes," list the ten highest paid inconservated at least \$5,000 by the 	s f g or oral agreement with an Part VII) or entity in conne lividuals or entities (fundra	Solicitation of Solicitation of Special fundra by individual (inclu	non-g gover aising ding o ional f	overnment grants nment grants events fficers, directors, tru: undraising services?	stees or	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fund have c or cor contrib	ustody	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total 3 List all states in which the organization		nd to policit contrik		or has been petifier	d it is exempt from r	

or licensing.

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

Schedule G (Form 990 or 990-EZ) 2010

032081 01-13-11

26 2010.05040 MUSICIANS ON CALL, INC.

	edu art	3	ne organization answere	d "Yes" to Form 990, Par	t IV, line 18, or reported	
		of fundraising event contributions and gr	oss income on Form 990 (a) Event #1 BENEFIT CONCERT	0-EZ, lines 1 and 6b. List (b) Event #2 NASHVILLE EVENT	events with gross receip (c) Other events 4	(d) Total events (add col. (a) through
ne			(event type)	(event type)	(total number)	col. (c))
Revenue	1	Gross receipts	162,310.	57,666.	102,897.	322,873.
	2	Less: Charitable contributions	79,450.			79,450.
	3	Gross income (line 1 minus line 2)	82,860.	57,666.	102,897.	243,423.
	4	Cash prizes				
ses	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs	35,228.			35,228.
Direct	7	Food and beverages				
	8 9	Entertainment		649.		9,127. 1,383.
	9 10	Other direct expenses Direct expense summary. Add lines 4 throug		049.	•	(45,738,
		Net income summary. Combine line 3, colum	n (d), and line 10		►	197,685.
Pa	art		answered "Yes" to Form	n 990, Part IV, line 19, or i	reported more than	
		\$15,000 on Form 990-EZ, line 6a.		(b) Pull tabs/instant		(d) Total gaming (add
nue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c)
Revenue						
ш.	1	Gross revenue				
es	2	Cash prizes				
ect Expenses	3	Noncash prizes				
Direct I	4	Rent/facility costs				
	5	Other direct expenses			1	
	6	Volunteer labor	└── Yes % └── No	└── Yes % │── No	└── Yes % └── No	
	7	Direct expense summary. Add lines 2 throug	h 5 in column (d)			()
	8	Net gaming income summary. Combine line	1, column d, and line 7			
~	-					
а	ls f	ter the state(s) in which the organization opera the organization licensed to operate gaming a 'No," explain:	ctivities in each of these			Yes No
		ere any of the organization's gaming licenses r 'Yes," explain:			year?	Yes No
	_					
0320	82 0	1-13-11			Schedule G (For	m 990 or 990-EZ) 2010

27 13101102 733030 2468 2010.05040 MUSICIANS ON CALL, INC. 2468_1

Schedule G (Form 990 or 990 EZ) 2010 MUSICIANS ON CALL, INC.	L3-406	7116	Page 3
11 Does the organization operate gaming activities with nonmembers?		Yes	No
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?		Yes	
13 Indicate the percentage of gaming activity operated in:	······ I		
a The organization's facility	13	a	%
b An outside facility		5	%
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records	S:		
Name			
Address 🕨			
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	🗌 No
b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amoun	nt		
of gaming revenue retained by the third party $ ightarrow $ \$			
c If "Yes," enter name and address of the third party:			
Name			
Address			
16 Gaming manager information:			
Name			
Gaming manager compensation 🕨 \$			
Description of services provided 🕨			
Director/officer Employee Independent contractor			
17 Mandatory distributions:			
a Is the organization required under state law to make charitable distributions from the gaming proceeds to	_	-	
retain the state gaming license?	L	Yes	└── No
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in	the		
organization's own exempt activities during the tax year ► \$ Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, colum	ana (iii) and	(4) 000	
lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional infor			
032083 01-13-11 Schedule G	(Form 990) or 990)-EZ) 2010
101102 733030 2468 2010.05040 MUSICIANS ON CALL, INC	•	246	81

13101102 733030 2468

2010.05040 MUSICIANS ON CALL,

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	HEDULE J rm 990)	Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest	ŀ		1545-00	47
1	···· · · · ,	Compensated Employees		ZU	IU	J
Dena	rtment of the Treasury	Complete if the organization answered "Yes" to Form 990, Part IV, line 23.		Open to		ic
	al Revenue Service	Attach to Form 990. See separate instructions.		Inspe		
Nan	ne of the organizatio		Employer i			mber
		MUSICIANS ON CALL, INC.	13-4	106711	6	
Pa	rt I Question	s Regarding Compensation				<u> </u>
					Yes	No
a		ate box(es) if the organization provided any of the following to or for a person listed in Form	990,			
		line 1a. Complete Part III to provide any relevant information regarding these items.				
	First-class or o					
	Travel for com	panions Payments for business use of personal re ation and gross-up payments I Health or social club dues or initiation fee				
		spending account Personal services (e.g., maid, chauffeur, o				
			liei)			
h	If any of the boxes	on line 1a are checked, did the organization follow a written policy regarding payment or				
, N	•	rovision of all of the expenses described above? If "No," complete Part III to explain		1b		
2		require substantiation prior to reimbursing or allowing expenses incurred by all officers, dir				
		EO/Executive Director, regarding the items checked in line 1a?		2		
	,					
3	Indicate which, if a	ny, of the following the organization uses to establish the compensation of the organization's	S			
	CEO/Executive Dire	ctor. Check all that apply.				
	X Compensation	committee Written employment contract				
		compensation consultant I Compensation survey or study				
	X Form 990 of o	ther organizations	ommittee			
4		any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing				
2	organization or a re	e payment or change-of-control payment from the organization or a related organization?		4a		x
a b		ceive payment from, a supplemental nonqualified retirement plan?				X
		ceive payment from, an equity-based compensation arrangement?				X
Ū		les 4a-c, list the persons and provide the applicable amounts for each item in Part III.				
	Only section 501()(3) and 501(c)(4) organizations must complete lines 5-9.				
5	For persons listed i	n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	n			
	contingent on the r	evenues of:				
а						X
b		ation?		5b		X
		r 5b, describe in Part III.				
6		n Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	n			
	contingent on the r					v
a h	Any related array			6a		X
a	Any related organiz	ation?		6b		
7		r 6b, describe in Part III. a Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed navments				
'		n Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments		7	х	
Q		es 5 and 6? If "Yes," describe in Part III reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to th			- 23	
0	-	ption described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		8		x
9		d the organization also follow the rebuttable presumption procedure described in		···· •		
5		a the organization also follow the rebuttable presumption procedure described in a solution procedure described in a solution of the rebuttable presumption of the rebuttable presum		9		
LHA		eduction Act Notice, see the Instructions for Form 990.		ule J (Form	990)	2010

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13101102 733030 2468

13-4067116

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

	(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation	
(A) Name	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	reported in prior Form 990 or Form 990-EZ	
(i)	133,148.	10,000.	0.	10,000.	5,548.		0.	
<u>1 DR. LESLIE FAERSTEIN (ii</u>		0.	0.	0.	0.	0.	0.	
(i)								
<u>2</u> (ii								
(i) 3 (ii								
<u>3</u> (ii (i)								
4 (ii								
(i)								
_5 (ii								
(i)								
<u>6</u> (ii								
(i)								
7 (ii								
(i) 8 (ii								
<u>8</u> (ii (i)								
_9 (ii								
(i)								
_10 (ii								
(i)								
<u>11</u> (ii								
(i)								
_ <u>12</u> (ii								
(0)								
<u>13</u> (ii (i)								
14 (ii								
(i)								
_15 (ii								
(i)								
<u>16</u> (ii								

Part III Supplemental Information

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

PART I, LINE 7: A COMPENSATION COMMITTEE MEETS ANNUALLY TO REVIEW THE

EXECUTIVE DIRECTOR'S COMPENSATION. IN 2010 THE COMMITTEE USED A REPORT FROM

AN INDEPENDENT CONSULTING COMPANY, AND APPROVED \$10,000 BONUS AND \$10,000

403(B) CONTRIBUTION FOR THE EXECUTIVE DIRECTOR IN LIEU OF SALARY INCREASE.

Schedule J (Form 990) 2010

SCHEDULE O (Form 990 or 990-EZ)

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 990-EZ. OMB No. 1545-0047

Employer identification number

13-4067116

Name of the organization MUSICIANS ON CALL, INC.

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

TO USE MUSIC AND ENTERTAINMENT TO PROMOTE OR COMPLEMENT THE HEALING

PROCESS FOR PATIENTS/RESIDENTS OF HEALTH CARE FACILITIES IN THE

INTEREST OF IMPROVING QUALITY OF LIFE AND CREATING A BETTER LIVING AND

HEALING ENVIRONMENT. THE ORGANIZATION CURRENTLY CONDUCTS ACTIVITIES IN

NEW YORK, PENNSYLVANIA, TENNESSEE, AND FLORIDA.

FORM 990, PART VI, SECTION A, LINE 2: BOARD MEMBERS MICHAEL SOLOMON,

JEFFREY R. SOLOMON AND AUDREY S. WEINER HAVE A FAMILY RELATIONSHIP.

FORM 990, PART VI, SECTION B, LINE 11: MUSICIANS ON CALL AUDIT COMMITTEE REVIEWED 990. IT WAS SENT TO THE BOARD OF DIRECTORS FOR THEIR INFORMATION PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C: ANNUALY, BOARD MEMBERS AND OFFICERS MUST REVIEW AND SIGN THE CONFLICT OF INTEREST POLICY. IF THERE IS A CONFLICT OF INTEREST, THE PERSON WOULD RECUSE HIM OR HERSELF FROM ANY VOTE. THE AUDIT COMMITTEE DECIDES WHETHER CONFLICTS EXIST.

FORM 990, PART VI, SECTION B, LINE 15A: A COMPENSATION COMMITTEE MEETS ANNUALLY TO REVIEW THE EXECUTIVE DIRECTOR'S COMPENSATION. CONCLUSIONS ARE REVIEWED WITH THE EXECUTIVE DIRECTOR AND THE REST OF THE BOARD. IN 2010 THE COMMITTEE USED A REPORT FROM AN INDEPENDENT CONSULTING COMPANY TO BE USED IN COMPARISON WITH OTHER SIMILAR ORGANIZATIONS' COMPENSATION.

 FORM
 990,
 PART VI,
 SECTION C,
 LINE 19:
 IF
 SOMEONE
 IS
 INTERESTED
 IN
 THE

 LHA
 For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
 Schedule O (Form 990 or 990-EZ) (2010)
 Schedule O (Form 990 or 990-EZ) (2010)

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 32
 32

INC.

2468 1

MATERIALS THEY CAN SUBMIT A WRITTEN REQUEST BY MAIL OR E-MAIL AND A COPY	. 0
THE DOCUMENTS WILL BE PROVIDED. MUSICIANS ON CALL ALSO PARTICIPATE WITH	
NYPAS OF THE BETTER BUSINESS BUREAU AND HAVE RECEIVED A PERFECT SCORE.	
FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:	
NET UNREALIZED GAINS ON INVESTMENTS: 36,7	91
FORM 990, PART XI, LINE 2C	
THE PROCESS HAS NOT BEEN CHANGED SINCE PRIOR YEAR.	
032212	105
Schedule O (Form 990 or 990-EZ) 33 \$101102 733030 2468 2010.05040 MUSICIANS ON CALL, INC. 2468	

Schedule O (Form 990 or 990-EZ) (2010) Name of the organization MUSICIANS ON CALL, INC.

Page 2 Employer identification number 13-4067116

2010 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

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Asset No.	Description	Da Acqi	ite Jired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
		0 0 0	000		.000	16	49,308.			49,308.	41,438.		2,683.
2	LEASEHOLD IMPROVEMENTS	000	000		.000	16	9,374.			9,374.	9,374.		0.
3	WEBSITE	0 0 0	000		.000	16	63,076.			63,076.			3,154.
	* TOTAL 990 PAGE 10 DEPR						121,758.		0.	121,758.	50,812.	0.	5,837.
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(D) - Asset disposed