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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)

OMB No 1545-0047

Inspection

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

Open to Public

A	For the 20	008 calendar year, or tax year beginning JUL 1, 2008 and ending	JUN 30, 2009	
В	Check if	Please C Name of organization	D Employer identifi	cation number
	applicable	use IRS		
	Address change	Print or THE BROOKLYN CONSERVATORY OF MUSIC		
	Name change	type Doing Business As	11-1	532426
\sqsubseteq	Instial return	See Number and street (or P.O. box if mail is not delivered to street address) Room/suite	1 '	
Ļ	Termin-	Instruc- 58 SEVENTH AVENUE	718-	<u>622-3300</u>
\sqsubseteq	Amended	City or town, state or country, and ZIP + 4	G Gross receipts \$	<u>2,983,170.</u>
L	Applica- tion pending	BROOKLYN, NY 11217-3608	H(a) is this a group re	
	Parianty	F Name and address of principal officer.GEORGE E. BADECKER	for affiliates?	Yes X No
		SAME AS C ABOVE	H(b) Are all affiliates inc	
		pt status X 501(c) (3) ◀ (insert no) 4947(a)(1) or 527	-	list. (see instructions)
		▶ WWW.BQCM.ORG	H(c) Group exemptio	
			of formation: 189/IN	State of legal domicile: NY
F	$\overline{}$	ummary	C TAIDTUTDITAL	AND
e S		efly describe the organization's mission or most significant activities. TO PROMOT	F INDIAIDOWR	AND
nan		OMMUNITY GROWTH THROUGH MUSIC.		
Governance	ł.	eck this box if the organization discontinued its operations or disposed of mo- imber of voting members of the governing body (Part VI, line 1a)	3	10
ၓ	1	imber of voting members of the governing body (Part VI, line 1b)	4	10
es &		tal number of employees (Part V, line 2a)	5	229
į.	6-16	23-injumber of wall inteers (estimate if necessary)	6	0
Actività	RE	tal number of volunteers (estimate if necessary) tal gross unrelated business revenue from Part VIII, line 12, column (C)	7a	0.
1	b Ne	it unrelated business axable income from Form 990-T, line 34	7b	0.
1	NO	V 1 2 2010 [2]	Prior Year	Current Year
Revenue 7	1 8 Co	ontributions and grants (Part VIII, line 1h)	581,847.	523,833.
ğ	19-P	ogram, service revenue (Part VIII, line 2g)	2,499,012.	2,171,987.
8	10 QK	restment Income (Part VIII, column (A), lines 3, 4, and 7d)	50,145.	-213,415.
Œ-		her revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	45,547.	54,840.
_	1	tal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,176,551.	2,537,245.
201	13 Gr	ants and similar amounts paid (Part IX, column (A), lines 1·3)		
-	14 Be	enefits paid to or for members (Part IX, column (A), line 4)	·	
Zsasua enses	15 Sa	laries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	2,922,614.	2,497,905.
) Sus	16a Pro	ofessional fundraising fees (Part IX, column (A), line 11e)		
꿃	b To	tal fundraising expenses (Part IX, column (D), line 25)		
	17 Ot	her expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	1,126,347.	<u>716,957.</u>
	18 To	tal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	4,048,961.	3,214,862.
_	19 Re	evenue less expenses Subtract line 18 from line 12	-872,410.	-677,617 .
Net See Sold		<u> </u>	Beginning of Year	End of Year
(20 To	tal assets (Part X, line 16)	3,123,657.	2,453,446.
٥	21 To	tal liabilities (Part X, line 26)	749,977.	761,178.
_		et assets or fund balances Subtract line 21 from line 20	2,373,680.	1,692,268.
P		Signature Block	and to the heat of my knowled	ge and helief it is true correct
	an	nder penafices of perjury, I declare that I have examined this return, including accompanying schedules and statements ind complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledg	and to the best of my knowled	ge and belief, it is true, collect,
۸.		No train of the A	111/	2 210
Sig	1 1	Signature of officer	Date	
Hei	re		7	
		GEORGE E. BADECKER, CHAIR Type or print name and title		
		pagarer's Date, / C		er's identifying number
Pai		leparers \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	elf- ⊓ployed ▶ ☐ (seè in:	structions) 474074
Pre	parer's Fi	m's name (or 1.11m7, AND CARR CDAS 1.1.P	EIN >	·
Use		ours if 1012 AND CARR, CFAS 111F	LIII P	
	ac	NEW YORK, NY 10017	Phone no ▶ 2	12-697-2299
Ma		discuss this return with the preparer shown above? (see instructions)		. X Yes No

orm	n 990 (2008)	THE BROOKI	LYN CONS	ERVAT	ORY OF MU	SIC	11-1532426	Page 2
Pa	rt III Statement of							
1	Briefly describe the orga					NTINUATION		
•	THE CONSERVA						שחווסמי אייע	
		RESENTING F						
	CONCERTS IN						ONSERVATORY	
	MAKES MUSIC							
_		•					TING ONN CON	<u>. </u>
2	Did the organization uni		t program serv	ices aunng	the year which w	ere not listed on		.
	the prior Form 990 or 99						Ц	s X No
_	If "Yes", describe these							□
3	Did the organization cea		-	changes in	how it conducts, a	any program services	;?	s X No
	If "Yes", describe these	•						
4	Describe the exempt pu			_		-	•	
	Section 501(c)(3) and 50				•	•	of grants and	
	allocations to others, th	e total expenses, and	revenue, if any	, for each _l	program service re	ported.		
								
4a	(Code:) (Expenses \$ 2 ,					Revenue \$)
	THE BROOKLYN							
	GROWTH THROU			WSIC .	<u>ACCESSIBL</u>	E TO PEOPLI	E OF ALL AGE	S,
	BACKGROUNDS	AND SKILL I	LEVELS.			··		
							_	
					•			
					<u></u>	<u> </u>		
								
						•		
					·			
4b	(Code:) (Expenses \$		ıncludir	ng grants of \$	\/	Revenue \$	
7.5	(0000.) (Expenses w		meiadii	ig grants or φ	, ,	i revenue v	,
								
					- -			
					<u> </u>			
								
		•						
		-						
		 .						
4¢	(Code) (Expenses \$		ıncludır	g grants of \$)(Revenue \$)
	 							
		_						
								_
	· · · ·				<u>_</u>			
			_				<u>-</u> :	
						_		
			 :					
							_	
			<u> </u>					
4d	Other program services	. (Describe in Schedule	e O.)					
	(Expenses \$	ıncluding	grants of \$) (Reve	nue \$)	
<u>4e</u>	Total program service	expenses > \$	2,544,	<u> 398. (</u>	Must equal Part I)	K, Line 25, column (B)	1)	
							Form	990 (2008)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			<u>-</u>
	If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
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		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice			
	on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6.		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
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		i	
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?			
	If "Yes," complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	X	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was			
	prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	X	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	X	
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		X
þ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		X
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, Part II	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		l	
	located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		<u> </u>
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> X</u>
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		<u> </u>
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		<u> </u>
21	Did the organization report more than \$5,000 on Part IX, column (A), line 19 If "Yes," complete Schedule I, Parts I and II	21		<u> </u>
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		<u>X</u>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K.			
	If "No", go to question 25	24a		<u> </u>
þ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
ر	any tax-exempt bonds?	24c		
d ac-	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	the state of the s	_	İ	77
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u> </u>
Þ	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a	_		75
^^	prior year? If "Yes," complete Schedule L, Part I	25b		<u> </u>
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			37
07	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		<u>X</u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial			7-
	contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		<u>X</u>

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee.			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an			
	indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other			
	person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a_		X
b	Have a family member who had a direct or indirect business relationship with the organization?			
	If "Yes," complete Schedule L, Part IV	28b		X
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional			
	corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		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 liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X

Page 5

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of		163	110
	U.S. Information Returns. Enter -0- if not applicable			
ь	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			1
•	(gambling) winnings to prize winners?	1c	х	
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 229			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	За		х
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			-
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		x
b	If "Yes," enter the name of the foreign country:			
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and			
	Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		х
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited			
	Tax Shelter Transaction?	5c		
6a	Did the organization solicit any contributions that were not tax deductible?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
С	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			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7 <u>g</u>		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3)			
	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have			
	excess business holdings at any time during the year?	_8_		X
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		_X
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		X
10	Section 501(c)(7) organizations. Enter: N/A			
a	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter: N/A Gross income from members or shareholders			
-				
D	Gross income from other sources (Do not net amounts due or paid to other sources against			
10-	amounts due or received from them) 11b	40-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b	12a		
<u> </u>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b			L

Form 990 (2008) THE BROOKLYN CONSERVATORY OF MUSIC 11-1532426 Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Sec	tion A. Governing Body and Management			
			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,			
	processes, or changes in Schedule O See instructions.			
1a	Enter the number of voting members of the governing body 1a 10			
b	Enter the number of voting members that are independent 1b 10			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	з		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
-	governing body?	7a		X.
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following:			
а	The covering had 0	8a	X	
	Each committee with authority to act on behalf of the governing body?	8b	X	
	Does the expensation have local chanters hypothes, or officiate?	9a	21	X
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,	34		
	and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must	90		
10	describe in Schedule O the process, if any, the organization uses to review the Form 990	10		х
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	10		
• •	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		х
Sec	tion B. Policies			
			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	140
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give use	120		
	An	12b	x	
_	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120	_4_	
·	in Schedule O how this is done	400		х
13	Does the organization have a written whistleblower policy?	12c		X
14	Does the organization have a written document retention and destruction policy?			X
15	Did the process for determining compensation of the following persons include a review and approval by independent	14		
13	persons, comparability data, and contemporaneous substantiation of the deliberation and decision:			
_	The organization's CEO, Executive Director, or top management official?	45-	X	
	Other officers or key employees of the organization?	15a		X
D		15b		
16-	Describe the process in Schedule O. (see instructions)			
IOa	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	40-		v
_	taxable entity during the year?	16a	-	<u> </u>
D	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			
500	exempt status with respect to such arrangements? tion C. Disclosure	16b		
17	List the states with which a copy of this Form 990 is required to be filed NY	. —		
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	iOf		
	public inspection. Indicate how you make these available. Check all that apply			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, are	nd fina	ncial	
	statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organizar	ion 🕨	·	
	<u>THE ORGANIZATION - 718-230-5030</u>			
83200	26 SEVENTH AVENUE, BROOKLYN, NY 11217			
12-18-	08	Form	990 (2008)

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Section A.

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

Check this box if the organization did not compensate any officer, director, trustee, or key employee

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- 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

(A)	(B)	<u>y 01</u>	IICEI		<u>ecic</u> C)	or, trustee		(D)	(E)	(F)		
Name and Title	Average	•		Posi	-)		Reportable	Reportable	Estimated		
	hours	(c	hecl	c all	that	арр	ly)	compensation	compensation	amount of		
	per week	용						from the	from related organizations	other compensation		
	Week	individual trustee or director				ated		organization	(W-2/1099-MISC)	from the		
		ustee	institutional trustee		8	npens		(W-2/1099-MISC)	`	organization		
		daal	itonal	_	old F	st con	_			and related		
		Indiv	In SEE	Officer	Key employee	Highest compensated employee	Fem			organizations		
JERRI SINES MAYER										,		
CHAIRPERSON	1.00	x		X				0.	0.	0.		
MICHAEL SCHWARTZ												
VICE CHAIRPERSON	1.00	X		X				0.	0.	0.		
GEORGE BADECKER												
SECRETARY	1.00	X		X				0.	0.	0.		
LAURA AVERY												
TRUSTEE	1.00	X	<u> </u>					0.	0.	0.		
MELISSA ROMAN BURCH												
TRUSTEE	1.00	X				_		0.	0.	0.		
STEVEN E. GLASS							İ					
TRUSTEE	1.00	X	<u> </u>		ļ	<u> </u>	<u> </u>	0.	0.	0.		
ANDREA KNUTSON							İ		_	_		
TRUSTEE	1.00	X	_	_	_		\vdash	0.	0.	0.		
DON MARGOULEFF, MD	4 00						l			•		
TRUSTEE	1.00	X	-				-	0.	0.	0.		
SEAN SAVAGE	1 00	٠,,				l	ŀ			0		
TRUSTEE	1.00	X			┢			0.	0.	0.		
PHYLLIS WHITE THORNE TRUSTEE	1.00	.						0.	o.	0		
AARON FELDER	1.00	Δ	 		-	├		U •	<u> </u>	0.		
INTERIM EXEC. DIR.	40.00			x				90,000.	0.	10,186.		
ANDREW CHIPOK	40.00			^			_	30,000.	0.	10,100.		
DIRECTOR OF FIN. & ADMIN	40.00	ĺ		x				89,857.	0.	9,451.		
DIRECTOR OF FIN: & ADMIN	40.00		\vdash	^		一		05,057.		<u> </u>		
			1									
						I^-						
						T						
		L.										

832007 12-18-08

orm	1 990 (2008) THE BROOF	KLYN COM	<u>1S</u>	ERV	VA!	ro:	RY	0	F MUSIC	11-1	<u>532</u>	<u>426</u>	Pa	ige 8
r ai	T VII Section A. Officers, Directors, Tru (A) Name and title	(B) (C) Average Position hours (check all that ap							(D) Reportable compensation	(E) Reportable compensation			(F) timate	_
		per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organization (W-2/1099-MIS	ıs	comp fro orga and	other pensation the anization relate nization	e on ed
									1		_			
		-											 	
4 14	T-1-1						Ĺ		170 057		_	1.		<u> </u>
2	Total Total number of individuals (including those compensation from the organization	in 1a) who red	ceiv	ed n	nore	tha	n \$1	00,	179,857. 000 in reportable	<u>.</u>	0.	15	9,63	37. 0
3	Did the organization list any former officer,	director or trus	stee	, ke	y em	olqı	yee,	or h	nighest compensated er	mplovee on	[Yes	No
4	line 1a? If "Yes," complete Schedule J for si For any individual listed on line 1a, is the su	uch individual						•••				3	_	X
5	and related organizations greater than \$150 Did any person listed on line 1a receive or a	ccrue compen	ısat	ion f						 ices rendered to	-	4		<u>X</u>
	the organization? If "Yes," complete Schedution B. Independent Contractors											5		<u>X</u>
1	Complete this table for your five highest conthe organization NONE	mpensated ind	lepe	ende	nt c	ontr	racto	rs t	 - · · · · · · · · · · · · · · ·	\$100,000 of con	ipensa			
	(A) Name and business	address							(B) Description of s	services	Co	(C) ompen) ———
								_						
	· · · · · · · · · · · · · · · · · · ·													
						_		+						
2	Total number of independent contractors (in		ın 1	I) wt	no re	cei	ved r	nor	e than \$100,000 in com	pensation				
	from the organization	0								l		orm 9	90 (2	008)

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

	Section 501(c)(3) All other organizations must complete.	and 501(c)(4) organizat lete column (A) but are	tions must complete al	l columns. ete columns (B) (C), and	(D)
	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		CAPONICO	garrararaxponida	охроново
	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			i	
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				·
5	Compensation of current officers, directors,				
	trustees, and key employees	199,494.	157,589.	36,355.	5,550.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,965,204.	1,552,402.	358,130.	54,672.
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits	238,196.	188,162.	43,407.	6,627.
10	Payroll taxes	95,011.	75,053.	17,315.	2,643.
11	Fees for services (non-employees):				
а	Management				
b	Legal	2,570.		2,570.	
C	Accounting	36,705.		36,705.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	4,401.		4,401.	
g	Other	4,483.		4,483.	<u></u>
12	Advertising and promotion	64,787.	58,308.	6,479.	
13	Office expenses	12,164.	3,041.	7,907.	1,216.
14	Information technology	33,771.	25,328.	6,754.	1,689.
15	Royalties				
16	Occupancy	291,623.	256,263.	27,791.	<u>7,569.</u>
17	Travel	14,939.	3,735.	9,710.	1,494.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	13,768.		13,768.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	111,947.	105,231.	5,597.	1,119.
23	Insurance	-			
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а	ARTISTIC FEES	49,032.	49,032.		
b	CREDIT CARD FEES	33,103.	31,448.	1,655.	
С	MUSIC SUPPLIES AND MAIN	17,106.	17,106.		
d	INSTRUMENT EXPENSE	12,232.	12,232.		
е	PERFORMANCE TECHNICAL F	4,335.	4,335.		
f	All other expenses	9,991.	<u>5,133.</u>	3,423.	1,435.
<u>25</u>	Total functional expenses Add lines 1 through 24f	3,214,862.	2,544,398.	586,450.	84,014.
26	Joint Costs . Check here ▶			İ	
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined		j		
	educational campaign and fundraising solicitation				
	12-18-09				Form 990 (2008)

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Form 990 (2008)
Part X | Balance

Pa	<u>π λ</u>	Balance Sneet			
_			(A) Beginning of year		(B) End of year
	1	Cash · non-interest-bearing	46,988.	1	16,276.
	2	Savings and temporary cash investments	40,500.	2	10,270.
	3	Pledges and grants receivable, net	185,510.	3	55,730.
	4	Accounts receivable, net	146,549.	4	103,669.
	5	Receivables from current and former officers, directors, trustees, key	140,349.	4	103,003.
	9	·		_	
		employees, or other related parties. Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section			
	i	4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete		_	
	l _	Part II of Schedule L		6	· - · · · · · · · · · · · · · · · · · ·
ets	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use	40.540	8	
	9	Prepaid expenses and deferred charges	18,748.	9	15,478.
	10a	,			
	b	Less: accumulated depreciation. Complete			
		Part VI of Schedule D	1,937,755.	10c	1,836,912.
	11	Investments - publicly traded securities	670,475.	11	
	12	Investments - other securities See Part IV, line 11	106,058.	12	413,807.
	13	Investments - program-related. See Part IV, line 11		_13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	11,574.	15	11,574.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	3,123,657.	16	2,453,446.
	17	Accounts payable and accrued expenses	174,213.	_17	161,410.
	18	Grants payable		_18	_
	19	Deferred revenue	292,151.	19_	324,430.
	20	Tax-exempt bond liabilities		20	
es	21	Escrow account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees,			
jä		highest compensated employees, and disqualified persons. Complete Part II			-
_		of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	250,000.	23	249,000.
	24	Unsecured notes and loans payable		24	
	25	Other liabilities. Complete Part X of Schedule D	33,613.	25	26,338.
	26	Total liabilities. Add lines 17 through 25	749,977.	26	761,178.
		Organizations that follow SFAS 117, check here X and complete			
Š		lines 27 through 29, and lines 33 and 34.			
ä	27	Unrestricted net assets	2,096,713.	27	1,568,657.
Bal	28	Temporanly restricted net assets	103,500.	28	15,000.
b	29	Permanently restricted net assets	173,467.	_29	108,611.
Ţ		Organizations that do not follow SFAS 117, check here and			
ĕ		complete lines 30 through 34.			
sets	30	Capital stock or trust principal, or current funds		30	
As	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds		32	
_	33	Total net assets or fund balances	2,373,680.	33	1,692,268.
D-	34	Total liabilities and net assets/fund balances	3,123,657.	34	2,453,446.
Pai	rt XI	Financial Statements and Reporting	<u> </u>		IV I N-
			•		. Yes No
1		unting method used to prepare the Form 990 CashX Accrual	Other		<u> </u>
2a		the organization's financial statements compiled or reviewed by an independent as	ccountant?		2a X
b		the organization's financial statements audited by an independent accountant?		•	. 2b X
С		es" to lines 2a or 2b, does the organization have a committee that assumes respons		audıt) I I
_		w, or compilation of its financial statements and selection of an independent accou			2c X
За		result of a federal award, was the organization required to undergo an audit or audit and ONAR Computer A 1993	ts as set forth in the Sing	le Aud	l 1
		and OMB Circular A-133?			. 3a X
		es," did the organization undergo the required audit or audits?		·· ·	. 3b
63201	1 12-18	-uo			Form 990 (2008)

SCHÉDULE À

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2008 Open to Public Inspection

Name of the organization

Employer identification number

Pa	rt I	Reason	for Public Char	iby Status (All assessing	CVATOR	CI OF	MOSIC	4 \ /2 2 2			L-1532426
				rity Status (All organia				t) (see ins	tructions)		
	organ			because it is (Please ch	-	-					
1	烘			s, or association of chur			ection 170	(b)(1)(A)(i).		
2				70(b)(1)(A)(ii). (Attach So							
3	닉			rtal service organization							
4	لـــا	A medical re	search organization	operated in conjunction	with a hos	spital desc	nbed in se	ection 170)(b)(1)(A)(ii	ii). Enter t	he hospital's name,
		city, and sta	-								
5				benefit of a college or u	niversity o	wned or o	perated by	a govern	mental un	t describe	ed in
)(b)(1)(A)(iv). (Compl	· ·							
6	닏	A federal, sta	ate, or local governm	nent or governmental uni	it describe	d in sectio	n 170(b)(1)(A)(v).			
7	لــا	_	-	ceives a substantial part	of its supp	oort from a	governme	ental unit d	or from the	general p	oublic described in
			(b)(1)(A)(vi). (Comple	·							
8	\vdash			section 170(b)(1)(A)(vi).	•	-					
9		_	-	ceives (1) more than 33						•	•
			•	nctions - subject to certa	-	•	-				-
				axable income (less sec	tion 511 ta	ex) from bu	isinesses a	acquired b	y the orga	ınızatıon a	after June 30, 1975.
			509(a)(2). (Complete	·							
10	님			perated exclusively to te	=	-			• •		
11	ш			perated exclusively for the						-	
				ations described in secti				2). See se	ction 509(a)(3). Che	ck the box that
				organization and compl		_					
_	\Box	a Type		_ ,,		e III - Fund	-	-		d L	Type III - Other
е	ш	-	•	at the organization is not			-	•			
				than one or more public						∂(a)(1) or s	section 509(a)(2).
f		_		tten determination from	the IRS th	atitis a Ty	pe I, Type	II, or Type	e III		
		•	organization, check the								
g				organization accepted a			-				<u> </u>
				lirectly controls, either a	lone or tog	jether with	persons o	described	in (ii) and (iii) below,	Yes No
				upported organization?		••••			•		11g(i)
		• •	·	n described in (i) above?					••		11g(ii)
			•	person described in (i)		• • •	• •	•••			11g(iii)
h		Provide the 1	rollowing information	about the organizations	s tne organ	lization su	oports.				
-				(iii) Type of	Circh In Albana		6.3 D.d	4.6 . 41	(.3)	46.	
(i)		of supported	(ii) EIN	organization		organization sted in your		u notity the	(vi) Is organization	s the on in col.	(vii) Amount of
	orga	inization		(described on lines 1-9		document?		support?	(i) organiz U.S	ed in the	support
				above or IRC section (see instructions))	Yes	No	Yes	No	Yes	No	
			 	(See manuemons))			100			110	
								İ			
					 -			<u> </u>		1	
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T											
Tota		\			<u> </u>			<u> </u>			
ця	ror P	TIVACY ACT A	iu Paperwork Redu	ction Act Notice, see the	ne instruc	mons for F	·orm 990,		Schedul	e A (Form	990 or 990-EZ) 2008

13	That have years. If the Form 550 is for the organization's mot, second, third, for that tax year as a section	50 .	(0)(0)					
	organization, check this box and stop here							
Sec	ction C. Computation of Public Support Percentage				_			
14	Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14						
15	Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15		_	%			
16a	33 1/3% support test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or m	nore, c	heck this box and		_			
	stop here. The organization qualifies as a publicly supported organization			ightharpoons]			
b	33 1/3% support test - 2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3%	or m	ore, check this box					
	and stop here. The organization qualifies as a publicly supported organization			ightharpoons]			
17a	10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, or 16b, a	and lin	e 14 is 10% or more,					
	and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Pai	rt IV h	ow the organization		_			
	meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization				_]			
b	10% -facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 1	17a, a	nd line 15 is 10% or					
	more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain	ın Pa	rt IV how the					
	organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	anızatı	on	▶	Ţ			
18	Private foundation, if the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box a	nd se	e instructions		-1			

Schedule A (Form 990 or 990-EZ) 2008

Part I	II Support Schedule for (Organizations	Described in	Section 509(a	(Complete only	r if you checked the bo	ox on line 9 of Part I.)
Sectio	n A. Public Support						
Calenda	ar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gift	s, grants, contributions, and						
mer	mbership fees received (Do not				·		
ıncl	ude any "unusual grants.")			ļ			
mer form any	oss receipts from admissions, rchandise sold or services per- med, or facilities furnished in activity that is related to the anization's tax-exempt purpose						
3 Gro	ess receipts from activities that						
	not an unrelated trade or bus- ss under section 513						
	revenues levied for the organ-						
ızat	ion's benefit and either paid to						
	expended on its benail						
	nished by a governmental unit to						
	organization without charge						
	al. Add lines 1 · 5		-				
	ounts included on lines 1, 2, and						
3 re	eceived from disqualified persons						
from exce	unts included on lines 2 and 3 received other than disqualified persons that sed the greater of 1% of the total of lines 9, 11, and 12 for the year or \$5,000						
c Add	d lines 7a and 7b						
8 Put	olic support (Subtract line 7c from line 6)						
Sectio	n B. Total Support						
Calenda	ar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Am	ounts from line 6						
dıvı sec	oss income from interest, dends, payments received on curties loans, rents, royalties d income from similar sources						
(less	elated business taxable income s section 511 taxes) from businesses uired after June 30, 1975						
	d lines 10a and 10b						
11 Net acti whe	income from unrelated business ivities not included in line 10b, ether or not the business is ularly carned on						
12 Oth or k	ner income. Do not include gain loss from the sale of capital lets (Explain in Part IV)						
	al support (Add lines 9, 10c, 11, and 12)			L	L		
	st five years. If the Form 990 is for eck this box and stop here	the organization's	s first, second, thi	rd, fourth, or fifth t	ax year as a section	on 501(c)(3) organız	ation,
	n C. Computation of Publ	ic Support Pe	rcentage	··	· ·	· · · · · · · · · · · · · · · · · · ·	
	olic support percentage for 2008 (column (f))		15	%
	olic support percentage from 2007		•			16	%
	n D. Computation of Inve	-		I			
17 Inve	estment income percentage for 20	08 (line 10c, colur	nn (f) divided by li	ne 13, column (f))		17	%
18 Inve	estment income percentage from:	2007 Schedule A,	Part IV-A, line 27h),		18	%
	1/3% support tests - 2008. If the				e 15 is more than		
	re than 33 1/3%, check this box a	=					▶□
	1/3% support tests - 2007. If the						and
	18 is not more than 33 1/3%, che	_					ightharpoons
	vate foundation. If the organization		-		his box and see in	structions .	▶ □
					Scl	nedule A (Form 990	u or 990-EZ) 2008

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that

OMB No 1545-0047 Open to Public

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

Inspection Employer identification number

	THE BROOKLYN CONSE		11-1532426
Pa	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	
	organization answered "Yes" to Form 990, Part IV, Iin	ne 6.	•
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		· · · · · · · · · · · · · · · · · · ·
3	Aggregate grants from (during year)		
4			
-	Aggregate value at end of year	Limited the constant bald in decree	
5	Did the organization inform all donors and donor advisors in		
_	are the organization's property, subject to the organization's	-	Yes No
6	Did the organization inform all grantees, donors, and donor a		
D-	for charitable purposes and not for the benefit of the donor		
Pa			Part IV, line 7
1	Purpose(s) of conservation easements held by the organization	tion (check all that apply).	
	Preservation of land for public use (e.g., recreation or	pleasure) Preservation of an hi	stoncally important land area
	Protection of natural habitat	Preservation of certif	ied historic structure
	Preservation of open space		
2	Complete lines 2a-2d if the organization held a qualified con-	servation contribution in the form of a con	servation easement on the last day
	of the tax year		·
	•		Held at the End of the Year
а	Total number of conservation easements		2a
b	Total agrees restricted by approximation accounts		2b
c	Number of conservation easements on a certified historic st		2c
d	Number of conservation easements included in (c) acquired	` ,	2d
	Number of conservation easements modified, transferred, re		
3		eleased, extinguished, or terminated by th	e organization during the taxable
	year ▶		
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the pe	<u> </u>	
	enforcement of the conservation easements it holds?		Yes No
6	Staff or volunteer hours devoted to monitoring, inspecting, a		
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing easements during the year	
8	Does each conservation easement reported on line 2(d) abo	ve satisfy the requirements of section 170	O(h)(4)(B)(ī)
	and section 170(h)(4)(B)(ii)?		L Yes L No
9	In Part XIV, describe how the organization reports conservat	tion easements in its revenue and expens	e statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	ation's financial statements that describes	the organization's accounting for
	conservation easements		
Pa	rt III Organizations Maintaining Collections o	of Art, Historical Treasures, or C	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, no	ot to report in its revenue statement and b	salance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	•	•
	the footnote to its financial statements that describes these		iblic service, provide, in rail Arv, the text or
_			
b	If the organization elected, as permitted under SFAS 116, to		
	or other similar assets held for public exhibition, education, o	or research in furtherance of public service	e, 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 tre	easures, or other similar assets for financia	al gain, provide
	the following amounts required to be reported under SFAS 1	116 relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		• \$
b	Assets included in Form 990, Part X		> \$
_			-
LHA	For Privacy Act and Paperwork Reduction Act Notice, se	e the Instructions for Form 990.	Schedule D (Form 990) 2008

832051 12-23-08

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)			OKLYN CONS					53242		
that apply): a	Par									<u> </u>
a Public exhibition d Loan or exchange programs e Other Scholarly research e Other Scholarly research e Other Scholarly research e Other Scholarly research e Other Scholarly research e Other Scholarly research e Other Scholarly research e Other Scholarly research e Other Scholarly research e Other Scholarly Research e Other Scholarly Research e Other Scholarly Research e Other Scholarly Research e Other Scholarly Research e Other Scholarly Research e Other Scholarly Research e Other Scholarly Research e Other Scholarly Research e Other Scholarly Research e Other Scholarly Research e Other Scholarly Research e Other Scholarly Research e Other Scholarly Research e Other Scholarly Research e Other Research e Other Scholarly Research e Other Resear	3		records, check any	of the following the	nat are a signif	icant us	e of its collection i	tems (che	ck all	
b										
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 to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV Trust, Escrow and Custodial Arrangements. Complete if 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? If "Yes" es," explain the arrangement in Part XIV and complete the following table C Beginning balance C Beginning balance Distributions during the year E plain the arrangement in Part XIV Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10. [a) Current year [b) Fress, "explain the arrangement in Part XIV Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10. [a) Current year [b) Pror year [c) Two years back [d) Three years back [e) Four years back [e) Four years back [f) Four years back [g) Grants or scholarships Grants or scholarships	а		d							
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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?	_						<u> </u>			<u>No</u>
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on Form 990, Part X? 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 20 Did the organization include an amount on Form 990, Part X, line 21? 11										
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c Beginning balance d Additions during the year e Distributions during the year 1 te 1d		on Form 990, Part X?			·•			Yes	<u> </u>	J No
c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? bif "Yes," explain the arrangement in Part XIV Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance 173,467. b Contributions 20,644. c Investment earnings or losses 1,903. d Grants or scholarships e Other expenditures for facilities and programs 87,403. 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 ▶	b	If "Yes," explain the arrangement in Part XIV a	and complete the fo	llowing table						
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f Ending balance 1f							. 1d			
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b Contributions 20,644. c investment earnings or losses 1,903. d Grants or scholarships e Other expenditures for facilities and programs 87,403. f Administrative expenses 108,611. 2 Provide the estimated percentage of the year end balance held as. a Board designated or quasi-endowment >		<u></u>			(c) Two yea	r <u>s back</u>	(d) Three years bac	k (e) Fou	r years	back
c investment earnings or losses d Grants or scholarships e Other expenditures for facilities and programs 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 ▶	1a	Beginning of year balance								
d Grants or scholarships e Other expenditures for facilities and programs 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 ▶	b	Contributions			<u> </u>					
e Other expenditures for facilities and programs 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 ▶	С	Investment earnings or losses .	1,903.							
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Provide the estimated percentage of the year end balance held as. a Board designated or quasi-endowment ▶	f	Administrative expenses		<u></u> .						
a Board designated or quasi-endowment ▶	g	End of year balance	108,611.			i				
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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 (iii) related organizations (iii) related organizations (iii) related organizations (iv) unrelated organizations (iv) un	b	Permanent endowment ► 100.00	%							
by: (i) unrelated organizations (ii) related organizations (iii) related organizations (iii) related organizations (iii) related organizations (iiii) related organizations (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	С	Term endowment >9	6							
(i) unrelated organizations (ii) related organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds	За	Are there endowment funds not in the posses	ssion of the organiza	ation that are held	and administe	ered for t	the organization			
(ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds		by:							Yes	No
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? Describe in Part XIV the intended uses of the organization's endowment funds		(i) unrelated organizations	•••					3a(i)		X
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?		(ii) related organizations					••••	3a(ii)		X
	b	If "Yes" to 3a(ii), are the related organizations	listed as required o	n Schedule R?						
Part VI Investments - Land, Buildings, and Equipment, See Form 990 Part X line 10	4									
Tare to provide the provide th	Par	t VI Investments - Land, Building	s, and Equipme	ent. See Form 99	0, Part X, line	10.				
Description of investment (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Depreciation (d) Book value		Description of investment	, ,			(c) [Depreciation	(d) Boo	k valu	е
1a Land 15,000. 15,000.	1a	Land			15,000.			<u>1</u>	5,0	00.
b Buildings										
c Leasehold improvements										
d Equipment		, , , , , , , , , , , , , , , , , , , ,								
e Other 3,213,515. 1,391,603. 1,821,912.				3 2	13.515	1.	391.603.	1.82	1.9	12.
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) 1,836,912.			rm 990, Part X. colu							

Schedule D (Form 990) 2008

₹ 4 .

11-1532426 Page 3 Schedule D (Form 990) 2008 THE BROOKLYN CONSERVATORY OF MUSIC Part VII Investments - Other Securities. See Form 990, Part X, line 12 (a) Description of security or category (c) Method of valuation. (b) Book value Cost or end-of-year market value (including name of security) Financial derivatives and other financial products Closely-held equity interests Other CASH HELD FOR INVESTMENT END-OF-YEAR MARKET VALUE 413,807. Total (Col (b) should equal Form 990, Part X, col (B) line 12.) ▶ Part VIII Investments - Program Related. See Form 990, Part X, line 13 (c) Method of valuation. (b) Book value (a) Description of investment type Cost or end-of-year market value Total. (Col (b) should equal Form 990, Part X, col (B) line 13.) Part IX Other Assets. See Form 990, Part X, line 15 (b) Book value (a) Description Total. (Column (b) should equal Form 990, Part X, col (B) line 15) ▶ Part X Other Liabilities. See Form 990, Part X, line 25. (b) Amount (a) Description of liability Federal income taxes <u> 26,33</u>8. CAPITAL LEASE OBLIGATION 26,338. Total. (Column (b) should equal Form 990, Part X, col (B) line 25.) In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions

19

under FIN 48 832053 12-23-08

· 4

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Schools

▶ To be completed by organizations that answer "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

Inspection

Employer identification number

	THE BROOKLYN CONSERVATORY OF MUSIC	11-1	<u>53</u> 2	426	
				YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaw	's,			
	other governing instrument, or in a resolution of its governing body?		_1 _	Х	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochu	ıres,			
	catalogues, and other written communications with the public dealing with student admissions, programs, and si	cholarships?	2	X	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during	ng the			
	period of solicitation for students, or during the registration period if it has no solicitation program, in a way that r	nakes			
	the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain		3_	X	
	THE BROOKLYN CONSERVATORY OF MUSIC ADVERTISES IN A NEWSP				
	STATING THAT ALL RACES AND NATIONAL ORIGINS ARE ACCEPTED)			
		<u>-</u>			
4	Does the organization maintain the following?				
а	Records indicating the racial composition of the student body, faculty, and administrative staff?		4a	X	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminate		4b	Х	
С		th student			
	admissions, programs, and scholarships?		4c	X	
d	Copies of all material used by the organization or on its behalf to solicit contributions?		4d	X	
	If you answered "No" to any of the above, please explain (if you need more space, attach a separate statement.)			
_	Does the company description of the company of the				
5	Does the organization discriminate by race in any way with respect to:		5 -		X
a			<u>5a</u>		X
b	Complement of fourths or advantage staff?		<u>5b</u>		X
C	, , , , , , , , , , , , , , , , , , , ,		5c		X
d			5d 5e		X
	,		5f		X
١		1	5g		X
9		•	5y 5h		X
- 11	Other extracumcular activities?		311		
	Tryou answered Tes to any or the above, please explain. (if you need more space, attach a separate statement	• •	i	l	
6a	Does the organization receive any financial aid or assistance from a governmental agency?		6a		X
	Has the organization's right to such aid ever been revoked or suspended?	•	6b		X
	If you answered "Yes" to either line 6a or line 6b, please explain using an attached statement.				
7	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05	of			
•	Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No." attach an explanation	·	7	x	
	ties 1.100 / 0.02 0.00 0.0				

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

Schedule E (Form 990 or 990-EZ) 2008

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

➤ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of the organization

THE BROOKLYN CONSERVATORY OF MUSIC

Employer identification number 11-1532426

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
LEVELS. THE CONSERVATORY PROVIDES MUSIC INSTRUCTION AT ITS LOCATION IN
PARK SLOPE, BROOKLYN. THROUGH ITS MUSIC PARTNERS PROGRAM, MUSIC
INSTRUCTION IS PROVIDED TO SCHOOL CHILDREN IN THE NEW YORK CITY PUBLIC
SCHOOLS. THE CONSERVATORY ALSO PRESENTS OVER 100 PUBLIC PERFORMANCES
EACH YEAR, FEATURING WORLD-CLASS ARTISTS, LOCAL MUSICIANS AND STUDENT
PERFORMERS.
· · · · · · · · · · · · · · · · · · ·
FORM 990, PART VI, SECTION A, LINE 10: AT THIS TIME, THE BROOKLYN
CONSERVATORY OF MUSIC GOVERNING BODY DOES NOT REVIEW THE FORM 990 BEFORE
FILING. THE ORGANIZATION USES THE FOLLOWING PROCEDURES TO PREPARE, REVIEW,
APPROVE AND FILE THE FORM 990:
1. PREPARATION OF FORM 990 BY AN INDEPENDENT CPA FIRM
2. INTERNAL STAFF REVIEW AND CORRECTIONS OF DRAFT 990 PREPARED BY AN
INDEPENDENT CPA FIRM
3. FORM 990 REVIEW AND APPROVAL BY CFO, EXECUTIVE DIRECTOR AND BOARD
CHAIR
4. SIGNATURE BY THE BROOKLYN CONSERVATORY OF MUSIC EXECUTIVE DIRECTOR
OR BOARD CHAIR
5. SUBMISSION OF FORM 990 TO IRS BY DEADLINE

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 832211 12-18-08

Schedule O (Form 990) 2008

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

➤ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of the organization

THE BROOKLYN CONSERVATORY OF MUSIC

Employer identification number 11-1532426

FORM 990, PART VI, SECTION B, LINE 15: THE BROOKLYN CONSERVATORY OF MUSIC
USES COMPARABLE COMPENSATION DATA TO REVIEW, ANALYZE AND DETERMINE THE
INITIAL COMPENSATION OF THE EXECUTIVE DIRECTOR AND OF OTHER STAFF BASED ON
RESEARCH REGARDING THE COMPENSATION FOR SIMILARLY QUALIFIED PERSONS IN
FUNCTIONALLY COMPARABLE POSITIONS AT SIMILARLY SITUATED ORGANIZATIONS
REPORTED IN FORM 990 OF COMPARABLE ORGANIZATIONS OR IN COMPENSATIONS
SURVEYS. AFTER THE FIRST YEAR OF EMPLOYMENT, COMPENSATION IS DETERMINED BY
PERFORMANCE AND BY COLA ADJUSTMENTS. (THE ORGANIZATION DOES NOT USE
COMPARABLE COMPENSATION DATA TO DETERMINE THE COMPENSATION OF THE EXECUTIVE
DIRECTOR AND OF OTHER STAFF AFTER THE FIRST YEAR OF EMPLOYMENT.)
THE INITIAL COMPENSATION OF THE EXECUTIVE DIRECTOR IS REVIEWED AND APPROVED
BY THE ORGANIZATION'S GOVERNING BOARD. THE INITIAL COMPENSATION OF OTHER
STAFF IS REVIEWED AND APPROVED BY THE EXECUTIVE DIRECTOR AND THE HUMAN
REOSURCES STAFF. THE ORGANIZATION'S BOARD USES CONTEMPORANEOUS
DOCUMENTATION AND RECORDKEEPING WITH RESPECT TO THE DELIBERATIONS AND
DECISIONS REGARDING THE INITIAL COMPENSATION OF THE EXECUTIVE DIRECTOR.
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS
FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST. THE BROOKLYN
CONSERVATORY OF MUSIC DOES NOT CHARGE THE PUBLIC FOR THESE DOCUMENTS, AND
PROVIDES SUCH DOCUMENTS TO THE PUBLIC VIA A SCANNED COPY SENT VIA EMAIL.
THE ORGANIZATION DOES NOT MAKE ITS GOVERNING DOCUMENTS AVAILABLE TO THE

THE PROCESSES OF THE AUDIT COMMITTEE HAVE NOT CHANGED SINCE LAST YEAR.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 832211 12-18-08

Schedule O (Form 990) 2008

GENERAL PUBLIC.

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information. 2008
Open to Public Inspection

Name of the organization	тне	BROOKLYN	CONSERVATO	RY OF MISTO	,	Employer iden	tification number
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Current Year Deduction	0	0.		0.	.0	_	69,759	7,882.	8,049.	0.	1,133.	21,699.	3,154.	111,676.	111,676.		
Current Sec 179		0.			0.	·-								0	0		
Accumulated Depreciation		0			.0		853,459.	.068,77	6,706.	1,782.	148,336.	188,692.	3,062.	1279927.	1279927.		
Basis For Depreciation		0		15,000.	15,000.		2573375.	111,246.	40,245.	1,782.	157,603.	313,496.	15,768.	3213515.	3228515.		
Reduction In Basis	-	0			0				_					0	o		
Bus % Excl																	
Unadjusted Cost Or Basis		0		15,000.	15,000.		2573375.	111,246.	40,245.	1,782.	157,603.	313,496.	15,768.	3213515.	3228515.		
No No	16		_				119D	19B	19B	19B	119р	119D	19C				
Life	.000						10.0019D	5.00	5.00	5.00	10.001	10.0019D	7.00				
Method				_H_			SL	SL	SL	SL	SL	$_{ m SI}$	SL				
Date Acquired																	
Description	* 000 *	THER	LAND	LLAND	2004	OTHER BUILDING AND 3IMPROVEMENTS COMPUTER EQUIPMENT AND 4SOFTWARE		SSOFTWARE	6LIBRARY	7FURNITURE AND FIXTURES	8PIANO AND INSTRUMENTS	WEBSITE	THER	0			
Asset No	. 73		_ 	ਜ			ന്	4	<u>ΓΩ</u>	9	7	80	ס			 	

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

Department of the Treasury Internal Revenue Service

Depreciation and Amortization (Including Information on Listed Property) 990

► Attach to your tax return.

OMB No 1545-0172

Name(s) shown on return Business or activity to which this form relates

► See separate instructions.

Identifying number

	BROOKLYN CONSERVA	TORY OF M	USIC FOR	M 990 P	AGE 10		11-1532426
Par	t Election To Expense Certain Prope	erty Under Section 1	79 Note: If you have any lis	ted property, o	complete Part	V before yo	ou complete Part I.
1 M	aximum amount. See the instruction	is for a higher limit	for certain businesses			. 1	250,000.
2 To	otal cost of section 179 property plac	ced in service (see	instructions)			2	
3 T	hreshold cost of section 179 property	y before reduction	in limitation .			3	800,000.
4 R	eduction in limitation. Subtract line 3	from line 2 If zero	or less, enter -0-			4	
5 Do	ollar limitation for tax year Subtract line 4 from lin	ne 1 If zero or less, enter	-0- If married filing separately, see	instructions		5	
6	(a) Description of p	roperty	(b) Cost (busin	ess use only)	(c) Electe	d cost	
		<u> </u>					
7 L	sted property Enter the amount from	n line 29		7			•
8 T	otal elected cost of section 179 prop	erty Add amounts	s in column (c), lines 6 and	7		8	
9 Te	entative deduction. Enter the smalle	r of line 5 or line 8		-		9	
10 C	arryover of disallowed deduction from	m line 13 of your 2	007 Form 4562			. 10	
11 B	usiness income limitation. Enter the s	smaller of busines	s income (not less than zei	ro) or line 5		. 11	
12 S	ection 179 expense deduction. Add	lines 9 and 10, but	t do not enter more than lii	ne 11		12	
13 C	arryover of disallowed deduction to 2	2009 Add lines 9	and 10, less line 12	. 🕨 13			
Note:	Do not use Part II or Part III below for	or listed property	Instead, use Part V.				
Par	t II Special Depreciation Allow	ance and Other D	epreciation (Do not ınclu	de listed prope	erty.)		
14 S	pecial depreciation for qualified prop	erty (other than lis	ted property) placed in sei	rvice during the	e tax year .	14	
15 P	roperty subject to section 168(f)(1) el	lection				. 15	
<u>16 O</u>	ther depreciation (including ACRS)					16	
Par	t III MACRS Depreciation (Do n	ot include listed p	roperty) (See instructions.)			
			Section A				
17 M	ACRS deductions for assets placed	in service in tax ye	ears beginning before 200	В		17	
18 if	you are electing to group any assets placed in se	rvice during the tax year	into one or more general asset acc	ounts, check here	▶□		
	Section B - Assets	s Placed in Service	e During 2008 Tax Year	Using the Gen	eral Depreci	ation Syste	em
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
<u>19a</u>	3-year property						
b	5-year property		153,273.	5 YRS.	HY	SL	15,931.
_с	7-year property		15,768.	7 YRS.	HY	SL	3,154.
_d	10-year property		3,044,474.	10 YRS	. HY	SL	92,591.
е	15-year property			-			
f	20-year property						
9	25-year property			25 yrs		S/L	
		/		27 5 yrs	MM	S/L	
h	Residential rental property	/		27.5 yrs.	MM	S/L	
		,	*****	39 yrs.	MM	S/L	
i	Nonresidential real property	/			ММ	S/L	
	Section C - Assets	Placed in Service	During 2008 Tax Year U	sing the Alteri	native Depre	ciation Sys	tem
20a	Class life					S/L	
b	12-year	7		12 yrs		S/L	
c	40-year	/		40 yrs	MM	S/L	· · · · · · · · · · · · · · · · · · ·
Par				· · · · · · · · · · · · · · · · · · ·			-
	sted property Enter amount from lin	e 28				21	
	otal. Add amounts from line 12, lines	• •	es 19 and 20 in column /a			. -21	
	nter here and on the appropriate line	-		-	_		111 676
	nter nere and on the appropriate line: or assets shown above and placed in			LIOI IS - SEE INST	'		111,676.
			e current year, enter the	_			
816251	ortion of the basis attributable to sec		congrato restrictions	23		1	Form 4500 (0000)
11-08-0	8 TO FEBRUIN TRUUCTION	n Activolice, see	acharate mian nemonis.				Form 4562 (2008)

25

$\overline{}$	m 4562 (2008)	THE BRO												<u>426</u>	
Pá	Listed Property (I recreation, or amu		iles, certai	n oth	ner vehic	cles, cel	lular tele	phone	s, certain	compute	ers, and	property	y used fo	or enterta	ainment
	Note: For any vehi through (c) of Sec	ıcle for which you	are using tion B, and	the Sec	standan tion C if	d mileag fapplica	ge rate oi ble	dedu	cting leasi	e expens	е, сотр	olete onl	y 24a, 2	4b, colui	nns (a)
Sec	ction A - Depreciation and	Other Informati	on (Cauti	on: S	See the i	nstructi	ons for l	mıts fc	or passeng	ger auton	nobiles.)			
<u>24a</u>	Do you have evidence to supp	oort the business/in	ivestment u	se cla	aimed?	<u> </u>	es	No	24b If "Y	es," is th	e evide	nce writ	ten?	Yes [No
		Date Bus placed in inve	(c) siness/ stment ercentage		(d) Cost or her basis	l four	(e) sis for depri siness/inve use only	stment	(f) Recovery period	Me	g) thod/ rention	Depre	(h) eciation ection	Ele sectio	(i) cted on 179 ost
25	Special depreciation allows	ance for qualified	listed pro	perty	placed	ın servi	ce durin	the ta	ax year ar	ıd				-	
	used more than 50% in a q				•						25			_	
26	Property used more than 5	0% in a qualified	business	use:	•										
			%											-	
			%												
			%							ļ					
<u>27</u>	Property used 50% or less	in a qualified bus	siness use	:					,						
			%							S/L·					
			%			_				S/L -					
			%							S/L·				ļ	
28	Add amounts in column (h)	, lines 25 through	n 27. Ente	here	and or	ı lıne 21	, page 1	-			28	<u> </u>			
<u>29</u>	Add amounts in column (i),	line 26 Enter he	re and on	line 7	, page	1			•				29		
							on Use								
If yo	mplete this section for vehic ou provided vehicles to your se vehicles.												ng this s	section f	or
				(a	a)	(b)		(c)	(d)	(e)	(1	r)
30 Total business/investment miles driven during the Vehicle Vehicle Vehicle Vehicle Vehicle							Veh	ıcle							
year (do not include commuting miles)															
31	Total commuting miles drive	en during the yea	ar												
32	Total other personal (nonco	ommuting) miles													
33	Total miles driven during th	e year						İ							
	Add lines 30 through 32 \dots			_											
34	Was the vehicle available for during off-duty hours?	or personal use	Y	es	No	Yes	No	Yes	No.	Yes	No	Yes	No	Yes	No
35	Was the vehicle used prima		.												
	than 5% owner or related p	•													
36	Is another vehicle available														
_	use?	action C. Ouse				/h = D==	, si al a Mal	.:	<u> </u>	. Th - :- 5	·	<u>!</u>	l		
	wer these questions to dete	ection C - Quest ermine if you mee											re not m	ore thar	5%
	ners or related persons.	chov statement t	bat probit	uto 0	ll poroe		of vehicle		ludina no			_		1 1/2 -	T
31	Do you maintain a written p employees?	· · · ·	promi	nis a		nai use i	or venici	es, inc		nmuting,	by you	r		Yes	No
	Do you maintain a written p	=						•			our				
	employees? See the instruc		-			ficers, c	lirectors	or 1%	or more	owners			-		
	Do you treat all use of vehic		•										-	<u> </u>	├
	Do you provide more than f	=				ınformat	tion from	your e	employees	s about					
	the use of the vehicles, and				•						•				1
	Do you meet the requireme							-							-
	Note: If your answer to 37,	38, 39, 40, or 41	ıs "Yes," o	lo no	t compl	ete Sec	tion B fo	r the c	covered ve	hicles					<u>L.</u>
Pa	art VI Amortization									—		i		<i>(C</i>	
	(a) Description of cos	ts	(b) Date amort			(C) Amortizal	ole		(d) Code	(e Amortu		ton	Ar	(f) nortization	
			begin	5		amoun			section		penod or per			this year	
42	Amortization of costs that b	pegins during you	ur 2008 tad 1	yea	ır:					- 1					. <u>-</u>
			 					-				-			-

Form **4562** (2008)

43

43 Amortization of costs that began before your 2008 tax year

44 Total. Add amounts in column (f) See the instructions for where to report

Form **8868** (Rev. April 2009)

(Rev. April 2009)
Department of the Trausury
Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No. 1545-1709

Form 8868 (Rev. 4-2009)

• If y	you are filing for an Automatic 3-Month Extension, complete only Part I and check this box you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this ot complete Part II unless you have already been granted an automatic 3-month extension on a previously fi	-								
Pai	Automatic 3-Month Extension of Time. Only submit original (no copies needed).									
	poration required to file Form 990-T and requesting an automatic 6-month extension - check this box and con	nplete 	▶ □							
	her corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request ar income tax returns.	exten	sion of time							
noted (not a you r	ronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electron automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consist submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic fictions governed and click on e-file for Chanties & Nonprofits.	cally if	(1) you want the additional ated Form 990-T. Instead,							
Type print		Emp	loyer identification number							
P	THE BROOKLYN CONSERVATORY OF MUSIC	1	1-1532426							
File by due da filing y	Number street and seem seemts as Ma D.O. have seem street									
return ınstruc										
Chec	k type of return to be filed (file a separate application for each return)									
	Form 990 Form 990-T (corporation) Form 41 Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 52 Form 990-EZ Form 990-T (trust other than above) Form 66 Form 990-PF Form 1041-A Form 88	227 069								
Te If t	THE ORGANIZATION The books are in the care of ▶ 26 SEVENTH AVENUE - BROOKLYN, NY 11217 The blephone No. ▶ 718-230-5030 The organization does not have an office or place of business in the United States, check this box this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the If it is for part of the group, check this box ▶ and attach a list with the names and EINs of all		-							
1	I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unto FEBRUARY 15, 2010, to file the exempt organization return for the organization named as is for the organization's return for: Calendar year or X tax year beginning JUL 1, 2008 , and ending JUN 30, 2009		The extension							
2	If this tax year is for less than 12 months, check reason Initial return		Change in accounting period							
За	If this application is for Form 990-BL 990-PF 990-T. 4720 or 6069 enter the tentative tax, less any									
	nonrefundable credits. See instructions	<u>3</u> a	\$							
b	If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated	_	_							
_	tax payments made. Include any prior year overpayment allowed as a credit	3b	\$							
С	Balance Due. Subtract line 3b from line 3a Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).									
	See instructions.	3с	\$ N/A							
Cauti	on. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form	8879-1	EO for payment instructions.							

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For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev. 4-2009)	Page 2						
• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this bo.	× ▶ 🗓						
Note. Onl complete Part II if you have already been granted an automatic 3-month extension on a previously filed							
If you a e filing for an Automatic 3-Month Extension, complete only Part I (on page 1)							
Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no co	pies needed).						
Type or Name of Exempt Organization	Employer identification number						
THE BROOKLYN CONSERVATORY OF MUSIC	11-1532426						
File by the extended due date for filing the	For IRS use only						
return See City, town or post office, state, and ZIP code. For a foreign address, see instructions BROOKLYN, NY 11217-3608							
Check type of return to be filed (File a separate application for each return). X Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 990-BL Form 990-PF Form 990-T (trust other than above) Form 4720	Form 5227 Form 8870 Form 6069						
STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previous	sly filed Form 8868.						
THE ORGANIZATION • The books are in the care of ▶ 26 SEVENTH AVENUE - BROOKLYN, NY 11217							
Telephone No ► 718-230-5030 FAX No. ►							
• If the organization does not have an office or place of business in the United States, check this box	▶ □						
If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) if this	s is for the whole group, check this						
box If it is for part of the group, check this box I and attach a list with the names and EINs of all r	members the extension is for						
4 I request an additional 3-month extension of time until <u>MAY 15, 2010</u> .							
	JUN 30, 2009						
6 If this tax year is for less than 12 months, check reason Initial return Final return	Change in accounting period						
7 State in detail why you need the extension							
ADDITIONAL TIME IS NEEDED TO COMPILE THE INFORMATION							
NECESSARY TO COMPLETE THE RETURN.							
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any							
nonrefundable credits. See instructions.	8a \$						
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated							
tax payments made Include any prior year overpayment allowed as a credit and any amount paid							
previously with Form 8868	8b \$						
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit							
with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c \$ N/A						
Signature and Verification							
Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.							
Signature Chan (Mords Title CPA	Date Date						
	Form 8868 (Rev. 4-2009)						