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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

OMB No 1545-0047

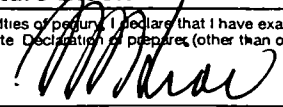
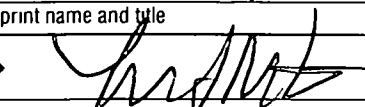
2008Open to Public
Inspection**A** For the **2008** calendar year, or tax year beginning **JUL 1, 2008** and ending **JUN 30, 2009**

B Check if applicable: ☐ Address change ☐ Name change ☐ Initial return ☐ Termination ☐ Amended return ☐ Application pending	Please use IRS label or print or type: See Specific Instructions	C Name of organization CHAMBER MUSIC AMERICA, INC.		D Employer identification number 13-2934575
		Doing Business As		E Telephone number (212) 242-2022
		Number and street (or P.O. box if mail is not delivered to street address) Room/suite 305 SEVENTH AVENUE - 5TH FLOOR		G Gross receipts \$ 4,227,106.
		City or town, state or country, and ZIP + 4 NEW YORK, NY 10001-6008		H(a) Is this a group return for affiliates? ☐ Yes ☒ No H(b) Are all affiliates included? ☐ Yes ☐ No If "No," attach a list (see instructions) H(c) Group exemption number ▶
F Name and address of principal officer MARGARET M. LIOI SAME AS C ABOVE				
I Tax-exempt status ☒ 501(c) (03) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527				
J Website: ▶ WWW.CHAMBER-MUSIC.ORG				
K Type of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶ L Year of formation: 1977 M State of legal domicile: NY				

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities TO DEVELOP AND STRENGTHEN AN EVOLVING CHAMBER MUSIC COMMUNITY.	
	2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its assets	
	3 Number of voting members of the governing body (Part VI, line 1a)	32
	4 Number of independent voting members of the governing body (Part VI, line 1b)	31
	5 Total number of employees (Part V, line 2a)	14
	6 Total number of volunteers (estimate if necessary)	31
	7a Total gross unrelated business revenue from Part VIII, line 12, column (C)	424,936.
	7b Net unrelated business taxable income from Form 990-T, line 34	0.
Revenue	8 Contributions and grants (Part VIII, line 1h)	2,909,452.
	9 Program service revenue (Part VIII, line 2g)	867,870.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 5)	1,050,869.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c-9c, 10c, and 11e)	24,140.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	4,852,331.
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	660,005.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	744,029.
Expenses	16a Professional fundraising fees (Part IX, column (A), line 11e)	55,601.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 222,095.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-11j)	1,020,369.
	18 Total expenses - Add lines 13-17 (must equal Part IX, column (A), line 25)	2,424,403.
Net Assets or Fund Balances	19 Revenue less expenses - Subtract line 18 from line 12	2,427,928.
	20 Total assets (Part X, line 16)	11,571,654.
	21 Total liabilities (Part X, line 26)	1,804,404.
	22 Net assets or fund balances - Subtract line 21 from line 20	9,767,250.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.			
Signature of officer 		Date 5.10.10	
MARGARET M. LIOI, CEO Type or print name and title			
Preparer's signature 	Date 5/10/10	Check if self-employed ☐	Preparer's identifying number (see instructions)
Firm's name (or yours if self-employed), address, and ZIP + 4 LUTZ AND CARR, CPAS LLP 300 EAST 42ND STREET NEW YORK, NY 10017		EIN ▶ 13-2934575 Phone no. ▶ 212-697-2299	

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

2G15

Part III Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission:

THE MISSION OF CHAMBER MUSIC AMERICA, INC. IS TO DEVELOP AND STRENGTHEN AN EVOLVING CHAMBER MUSIC COMMUNITY.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☒ Yes ☐ No

If "Yes", describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

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.

SEE SCHEDULE O FOR CONTINUATION(S)

4a (Code) (Expenses \$ 1,192,510. including grants of \$ 720,720.) (Revenue \$)
GRANT PROGRAMS - THROUGH CMA'S FIVE GRANT PROGRAMS, IN WHICH FUNDING IS AWARDED TO ENSEMBLES AND CONCERT PRESENTERS, 49 GRANTS WERE GIVEN IN THE FOLLOWING AREAS:

1) CLASSICAL COMMISSIONING: 13 GRANTS WERE AWARDED FOR THE CREATION OF NEW CHAMBER MUSIC WORKS IN THE CLASSICAL TRADITION;

2) NEW JAZZ WORKS: COMMISSIONING AND ENSEMBLE DEVELOPMENT: 12 GRANTS WERE AWARDED FOR THE CREATION AND PRESENTATION OF NEW WORKS IN THE JAZZ IDIOM FOR SMALL ENSEMBLES;

3) PRESENTING JAZZ: 10 GRANTS WERE AWARDED TO PRESENTERS FOR JAZZ PERFORMANCES

4) FRENCH-AMERICAN JAZZ EXCHANGE: 4 GRANTS WERE AWARDED TO AMERICAN JAZZ MUSICIANS THROUGH THIS COLLABORATIVE PROGRAM WITH (CONT'D SCH O)

4b (Code) (Expenses \$ 466,337. including grants of \$) (Revenue \$ 326,945.)
CHAMBER MUSIC MAGAZINE

TO HIGHLIGHT THE WORK OF CHAMBER ENSEMBLES AND PRESENTERS THROUGHOUT THE COUNTRY, AND TO KEEP THE FIELD INFORMED OF NEWS WITHIN AND BEYOND THE CHAMBER MUSIC COMMUNITY, CMA PUBLISHES "CHAMBER MUSIC" MAGAZINE BI-MONTHLY. RECEIPT OF THE MAGAZINE IS A BENEFIT OF MEMBERSHIP IN CMA.

4c (Code) (Expenses \$ 246,059. including grants of \$) (Revenue \$ 123,699.)
NATIONAL CONFERENCE

CMA PRODUCES AN ANNUAL CONFERENCE EACH JANUARY THAT BRINGS THE MEMBERS OF THE FIELD TOGETHER FOR A WEEKEND OF LEARNING, SHARING BEST PRACTICES, SHOWCASE PERFORMANCES, AND CONCERTS. THE WEEKEND CULMINATES IN AN AWARDS BANQUET AT WHICH A DISTINGUISHED MEMBER OF THE ENSEMBLE MUSIC FIELD IS CELEBRATED WITH THE RICHARD J. BOGOMOLNY NATIONAL SERVICE AWARD, CMA'S HIGHEST HONOR.

4d Other program services (Describe in Schedule O)

(Expenses \$ 149,428. including grants of \$) (Revenue \$)

4e Total program service expenses ► \$ 2,054,334. (Must equal Part IX, Line 25, column (B).)

Form 990 (2008)

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>		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? <i>If "Yes," complete Schedule C, Part III</i>		
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? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		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 credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? <i>If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>	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? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>	X	
13 Is the organization a school as described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the U.S.?		X
b 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.? <i>If "Yes," complete Schedule F, Part I</i>		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? <i>If "Yes," complete Schedule F, Part II</i>		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? <i>If "Yes," complete Schedule F, Part III</i>		X
17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If "Yes," complete Schedule G, Part I</i>	X	
18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20 Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		X
21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	
22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	X	
23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? <i>If "Yes," complete Schedule J</i>	X	
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 "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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? <i>If "Yes," complete Schedule L, Part I</i>		X
b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? <i>If "Yes," complete Schedule L, Part I</i>		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? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>		X

Form 990 (2008)

Part IV Checklist of Required Schedules (continued)

	Yes	No
28 During the tax year, did any person who is a current or former officer, director, trustee, or key employee		
a 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)? <i>If "Yes," complete Schedule L, Part IV</i>		X
b Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes," complete Schedule L, Part IV</i>		X
c 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? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		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? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>		X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		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? <i>If "Yes," complete Schedule R, Part VI</i>		X

Form 990 (2008)

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Yes	No
1a Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable.		
1b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	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.		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	X	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	X	
b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	X	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		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?		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
6a Did the organization solicit any contributions that were not tax deductible?		X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7 Organizations that may receive deductible contributions under section 170(c).		
a Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	X	
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d If "Yes," indicate the number of Forms 8282 filed during the year		
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
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?		
9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		
a Did the organization make any taxable distributions under section 4966?		
b Did the organization make a distribution to a donor, donor advisor, or related person?		
10 Section 501(c)(7) organizations. Enter: N/A		
a Initiation fees and capital contributions included on Part VIII, line 12		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11 Section 501(c)(12) organizations. Enter: N/A		
a Gross income from members or shareholders		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year: N/A		

Form 990 (2008)

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)**Section 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	32	
1b Enter the number of voting members that are independent	31	
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?		X
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?		X
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
5 Did the organization become aware during the year of a material diversion of the organization's assets?		X
6 Does the organization have members or stockholders?	X	
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	X	
7b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	X	
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?	X	
9a Does the organization have local chapters, branches, or affiliates?		X
b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
10 Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	X	
11 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

Section B. Policies

	Yes	No
12a Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	X	
13 Does the organization have a written whistleblower policy?	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 persons, comparability data, and contemporaneous substantiation of the deliberation and decision:		
a The organization's CEO, Executive Director, or top management official?	X	
b Other officers or key employees of the organization? Describe the process in Schedule O (see instructions)		X
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b 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 exempt status with respect to such arrangements?		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **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 for public inspection. Indicate how you make these available. Check all that apply.
☐ Own website ☒ Another's website ☒ Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial 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 organization: **MARGARET M. LIOI - 212-242-2022**
305 SEVENTH AVE, NEW YORK, NY 10001-6008

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

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

- 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.

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
LOUISE K. SMITH CHAIR	1.00	X		X				0.	0.	0.
PHILLIP YING PRESIDENT	1.00	X		X				0.	0.	0.
DANIEL R. GUSTIN VICE PRESIDENT	1.00	X		X				0.	0.	0.
JOHN R. KIRK TREASURER	1.00	X		X				0.	0.	0.
CHARLOTTE SCHROEDER SECRETARY	1.00	X		X				0.	0.	0.
MARGARET M. LIOI CEO	50.00	X		X				185,486.	0.	27,105.
MARY LOU ALESKIE TRUSTEE	1.00	X						0.	0.	0.
ROBERT W. ASHTON TRUSTEE	1.00	X						0.	0.	0.
NADINE ASIN TRUSTEE	1.00	X						0.	0.	0.
LOUISE BASBAS TRUSTEE	1.00	X						0.	0.	0.
ANGELA MYLES BEECHING TRUSTEE	1.00	X						0.	0.	0.
BILLY CHILDS TRUSTEE	1.00	X						0.	0.	0.
JAMES F. DUNHAM TRUSTEE	1.00	X						0.	0.	0.
DEREK E. GORDON TRUSTEE	1.00	X						0.	0.	0.
ALBERT HARCLERODE TRUSTEE	1.00	X						0.	0.	0.
JULIE HIMMELSTRUP TRUSTEE	1.00	X						0.	0.	0.
LAURA KAMINSKY TRUSTEE	1.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
BAYLA KEYES TRUSTEE	1.00	X						0.	0.	0.
SHIRLEY KIRSHBAUM TRUSTEE	1.00	X						0.	0.	0.
STEVEN MACKEY TRUSTEE	1.00	X						0.	0.	0.
SUSAN MUSCARELLA TRUSTEE	1.00	X						0.	0.	0.
MAURY OKUN TRUSTEE	1.00	X						0.	0.	0.
BERNARD PHILLIPS TRUSTEE	1.00	X						0.	0.	0.
CHRISTOPHER REX TRUSTEE	1.00	X						0.	0.	0.
JAMES E. ROCCO TRUSTEE	1.00	X						0.	0.	0.
LAURA SEWELL TRUSTEE	1.00	X						0.	0.	0.
DAVID STAM TRUSTEE	1.00	X						0.	0.	0.
1b Total								185,486.	0.	27,105.

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization

1

- 3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual
- 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3		X
4	X	
5		X

Section B. Independent Contractors

- 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

NONE

(A) Name and business address	(B) Description of services	(C) Compensation

- 2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization

0

SEE SCHEDULE J-2 FOR PART VII, SECTION A CONTINUATION

Form 990 (2008)

Part VII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1 a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e	246,730.			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	984,814.			
	g	Noncash contributions included in lines 1a-1f \$					
	h	Total. Add lines 1a-1f		1,231,544.			
	Program Service Revenue	2 a	MEMBERSHIP DUES	Business Code 713990	353,389.	353,389.	
b		MAGAZINE ADVERTISING	541800	323,844.		323,844.	
c		REGISTRATION FEES	713990	123,699.	123,699.		
d		PUBLICATION SALES	511120	3,101.	3,101.		
e							
f		All other program service revenue					
g		Total. Add lines 2a-2f		804,033.			
Other Revenue		3	Investment income (including dividends, interest, and other similar amounts)		231,826.		
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6 a	Gross Rents	(i) Real 101,092.				
	b	Less rental expenses					
	c	Rental income or (loss)	101,092.				
	d	Net rental income or (loss)		101,092.		101,092.	
	7 a	Gross amount from sales of assets other than inventory	(i) Securities 1851628.				
	b	Less cost or other basis and sales expenses	2118625.				
	c	Gain or (loss)	-266997.				
	d	Net gain or (loss)		-266,997.		-266,997.	
	8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a				
	b	Less direct expenses	b				
	c	Net income or (loss) from fundraising events					
	9 a	Gross income from gaming activities See Part IV, line 19	a				
	b	Less direct expenses	b				
	c	Net income or (loss) from gaming activities					
10 a	Gross sales of inventory, less returns and allowances	a					
b	Less cost of goods sold	b					
c	Net income or (loss) from sales of inventory						
Miscellaneous Revenue	11 a	MISCELLANEOUS	Business Code 900099	6,983.	6,983.		
	b						
	c						
	d	All other revenue					
	e	Total. Add lines 11a-11d		6,983.			
	12	Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e		2,108,481.	487,172.	424,936.	-35,171.

Part IX Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 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	395,720.	395,720.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	325,000.	325,000.		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	217,474.	167,455.	28,272.	21,747.
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	446,942.	320,146.	56,168.	70,628.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	24,147.	17,144.	3,139.	3,864.
9 Other employee benefits	28,328.	18,426.	3,683.	6,219.
10 Payroll taxes	48,584.	34,161.	5,900.	8,523.
11 Fees for services (non-employees)				
a Management				
b Legal	2,425.		2,425.	
c Accounting	26,281.	14,224.	8,465.	3,592.
d Lobbying				
e Professional fundraising services. See Part IV, line 17	55,601.			55,601.
f Investment management fees				
g Other	194,314.	145,104.	44,452.	4,758.
12 Advertising and promotion	194,356.	191,023.	3,007.	326.
13 Office expenses	72,556.	46,788.	13,050.	12,718.
14 Information technology				
15 Royalties				
16 Occupancy	152,417.	80,128.	47,117.	25,172.
17 Travel	55,438.	50,409.	4,992.	37.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	143,716.	115,929.	25,501.	2,286.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	39,201.	28,812.	4,927.	5,462.
23 Insurance	6,791.	4,375.	1,254.	1,162.
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.)				
a <u>PANEL HONORARIA</u>	92,950.	92,950.		
b <u>MISCELLANEOUS</u>	14,728.	6,540.	8,188.	
c _____				
d _____				
e _____				
f All other expenses _____				
25 Total functional expenses Add lines 1 through 24f	2,536,969.	2,054,334.	260,540.	222,095.
26 Joint Costs. Check here ☐ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	65,846.	1	28,721.
	2 Savings and temporary cash investments	537,533.	2	1,374,124.
	3 Pledges and grants receivable, net	2,471,393.	3	1,838,885.
	4 Accounts receivable, net	77,998.	4	56,630.
	5 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L.		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L.		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	61,941.	9	45,245.
	10a Land, buildings, and equipment - cost basis	10a 1,047,318.		
	b Less accumulated depreciation. Complete Part VI of Schedule D.	10b 401,499.	10c	645,819.
	11 Investments - publicly traded securities	7,430,408.	11	5,658,790.
	12 Investments - other securities. See Part IV, line 11.	241,515.	12	409,966.
	13 Investments - program-related. See Part IV, line 11.		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11.		15	
16 Total assets. Add lines 1 through 15 (must equal line 34).	11,571,654.	16	10,058,180.	
Liabilities	17 Accounts payable and accrued expenses	51,766.	17	49,456.
	18 Grants payable	823,273.	18	900,496.
	19 Deferred revenue	7,917.	19	6,670.
	20 Tax-exempt bond liabilities		20	
	21 Escrow account liability. Complete Part IV of Schedule D.		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L.		22	
	23 Secured mortgages and notes payable to unrelated third parties	906,100.	23	893,791.
	24 Unsecured notes and loans payable		24	
	25 Other liabilities. Complete Part X of Schedule D.	15,348.	25	15,348.
	26 Total liabilities. Add lines 17 through 25.	1,804,404.	26	1,865,761.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	-2,730.	27	-712,947.
	28 Temporarily restricted net assets	3,305,025.	28	2,528,536.
	29 Permanently restricted net assets	6,464,955.	29	6,376,830.
	Organizations that do not follow SFAS 117, check here ☐ and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	9,767,250.	33	8,192,419.
	34 Total liabilities and net assets/fund balances	11,571,654.	34	10,058,180.

Part XI Financial Statements and Reporting

- 1 Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
- b Were the organization's financial statements audited by an independent accountant?
- c If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b If "Yes," did the organization undergo the required audit or audits?

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047

2008

Open to Public Inspection

Employer identification number

13-2934575

The organization is not a private foundation because it is (Please check only **one** organization)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).** (Attach Schedule H)

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state _____

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II)

9 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete the Part III)

10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).** (see instructions)

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a ☐ Type I b ☐ Type II c ☐ Type III - Functionally integrated d ☐ Type III - Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f ☐ If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box _____

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?

(ii) A family member of a person described in (i) above?

(iii) A 35% controlled entity of a person described in (i) or (ii) above?

h Provide the following information about the organizations the organization supports

[illegible]

Schedule A (Form 990 or 990-EZ) 2008

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)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	862,995.	591,539.	700,721.	2909452.	1231544.	6296251.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 - 3	862,995.	591,539.	700,721.	2909452.	1231544.	6296251.
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)						3330910.
6 Public Support. Subtract line 5 from line 4						2965341.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4	862,995.	591,539.	700,721.	2909452.	1231544.	6296251.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	302,823.	354,138.	274,018.	527,055.	231,826.	1689860.
9 Net income from unrelated business activities, whether or not the business is regularly carried on	391,160.	426,829.	382,475.	379,340.	358,853.	1938657.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)	7,153.	10,767.	3,269.	7,406.	6,983.	35,578.
11 Total support. Add lines 7 through 10						9960346.
12 Gross receipts from related activities, etc. (see instructions)					12	2,493,846.

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	29.77 %
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15	49.55 %
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 more, check this box and stop here. The organization qualifies as a publicly supported organization ☐		
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 more, check this box and stop here. The organization qualifies as a publicly supported organization ☒		
17a 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how 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 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ☐		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ☐		

Schedule A (Form 990 or 990-EZ) 2008

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.)**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 - 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 Total support (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ☐						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	%

19a 33 1/3% support tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ☐

b 33 1/3% support tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ☐

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

Schedule A (Form 990 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 answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No 1545-0047

2008

Open to Public
Inspection

Name of the organization

CHAMBER MUSIC AMERICA, INC.

Employer identification number

13-2934575

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the 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)		
3 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 advised funds are the organization's property, subject to the organization's exclusive legal control?		☐ Yes ☐ No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit?		☐ Yes ☐ No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e.g., recreation or pleasure)	☐ Preservation of an historically important land area
☐ Protection of natural habitat	☐ Preservation of certified historic structure
☐ Preservation of open space	

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

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable 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, violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during 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)? ☐ Yes ☐ No

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) 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 financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a Revenues included in Form 990, Part VIII, line 1	▶ \$ _____
b Assets included in Form 990, Part X	▶ \$ _____

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

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply).

- a ☐ Public exhibition
 b ☐ Scholarly research
 c ☐ Preservation for future generations

- d ☐ Loan or exchange programs
 e ☐ Other _____

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? ☐ Yes ☐ No

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? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV and complete the following table

- c Beginning balance
 d Additions during the year
 e Distributions during the year
 f Ending balance

	Amount
1c	
1d	
1e	
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 V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	7,286,751.				
b Contributions					
c Investment earnings or losses	-119,871.3.				
d Grants or scholarships					
e Other expenditures for facilities and programs	227,029.				
f Administrative expenses					
g End of year balance	5,861,009.				

2 Provide the estimated percentage of the year end balance held as

- a Board designated or quasi-endowment ► 3.00 %
 b Permanent endowment ► 97.00 %
 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
 (ii) related organizations

	Yes	No
3a(i)		X
3a(ii)		X
3b		

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

Part VI Investments - 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) Depreciation	(d) Book value
1a Land				
b Buildings		917,075.	305,896.	611,179.
c Leasehold improvements		12,929.	5,028.	7,901.
d Equipment		69,105.	61,831.	7,274.
e Other		48,209.	28,744.	19,465.
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c))				645,819.

Schedule D (Form 990) 2008

Part VII Investments - Other Securities. See Form 990, Part X, line 12

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives and other financial products		
Closely-held equity interests		
Other _____		
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.

(a) Description of investment type	(b) Book value	(c) Method of valuation 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
----------------	--

[illegible]

Part X	Other Liabilities. See Form 990, Part X, line 25
---------------	---

(a) Description of liability	(b) Amount
Federal income taxes	
SECURITY DEPOSIT PAYABLE	15,348.
Total. (Column (b) should equal Form 990, Part X, col (B) line 25.)	15,348.

On Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	2,108,481.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	2,536,969.
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-428,488.
4	Net unrealized gains (losses) on investments	4	-1,146,343.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net). Add lines 4-8	9	-1,146,343.
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	-1,574,831.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	962,138.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	-1,146,343.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	-1,146,343.
3	Subtract line 2e from line 1	3	2,108,481.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)	5	2,108,481.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	2,536,969.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Losses reported on Form 990, Part IX, line 25	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	2,536,969.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)	5	2,536,969.

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

PART V, LINE 4: THE RESIDENCY ENDOWMENT'S PURPOSE IS TO FUND GRANTS

MADE THROUGH CMA'S RESIDENCY PARTNERSHIP PROGRAM, WHICH BRINGS LIVE

CHAMBER MUSIC TO COMMUNITIES ACROSS THE COUNTRY IN SETTINGS OTHER THAN

TRADITIONAL CONCERT HALLS.

THE COMMISSIONING ENDOWMENT'S PURPOSE IS TO FUND GRANTS MADE THROUGH CMA'S

CLASSICAL COMMISSIONING PROGRAM, WHICH SUPPORTS THE COMPOSER'S FEE,

ENSEMBLE HONORARIA, AND COPYING COSTS.

Part XIV Supplemental Information (continued)

THE GENERAL ENDOWMENT'S PURPOSE IS TO FUND CMA'S GENERAL OPERATIONS.

THE CLEVELAND QUARTET AWARD ENDOWMENT'S PURPOSE IS TO PROVIDE FEE SUBSIDY
FOR THE ENSEMBLE CHOSEN TO RECEIVE THE BIENNIAL CLEVELAND QUARTET AWARD.

Department of the Treasury
Internal Revenue Service

▶ **Attach to Form 990 or Form 990-EZ** Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a

OMB No 1545-0047

2008

Open To Public Inspection

Name of the organization

CHAMBER MUSIC AMERICA, INC.

Employer identification number
13-2934575

Part I	Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17
---------------	--

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a ☒ Mail solicitations
b ☐ Email solicitations
c ☐ Phone solicitations
d ☒ In-person solicitations
e ☒ Solicitation of non-government grants
f ☒ Solicitation of government grants
g ☐ Special fundraising events

- 2 a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☐ Yes☒ No

- b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table.

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(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			
DAVID BURY & ASSOCIATES	FUNDRAISING CONSULTING		X	0.	55,601.	0.
Total					55,601.	

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

NY

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

Schedule G (Form 990 or 990-EZ) 2008

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a List events with gross receipts greater than \$5,000

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events (Add col (a) through col (c))
		(event type)	(event type)	(total number)	
Revenue	1	Gross receipts			
	2	Less Charitable contributions			
	3	Gross revenue (line 1 minus line 2)			
Direct Expenses	4	Cash prizes			
	5	Non-cash prizes			
	6	Rent/facility costs			
	7	Other direct expenses			
	8	Direct expense summary Add lines 4 through 7 in column (d) ▶ ()			
	9	Net income summary Combine lines 3 and 8 in column (d) ▶ ()			

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

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col. (c))	
Revenue	1	Gross revenue				
	2	Cash prizes				
Direct Expenses	3	Non-cash prizes				
	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	☐ Yes _____ % ☐ No	☐ Yes _____ % ☐ No	☐ Yes _____ % ☐ No	
	7	Direct expense summary Add lines 2 through 5 in column (d) ▶ ()				
	8	Net gaming income summary Combine lines 1 and 7 in column (d) ▶ ()				

9 Enter the state(s) in which the organization operates gaming activities _____

a Is the organization licensed to operate gaming activities in each of these states?

b If "No," Explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

b If "Yes," Explain _____

11 Does the organization operate gaming activities with nonmembers?

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	No
9a		
10a		
11		
12		

13 Indicate the percentage of gaming activity operated in**a** The organization's facility**13a** %**b** An outside facility**13b** %**14** Provide the name and address of the person who prepares the organization's gaming/special events books and records

Name ► _____

Address ► _____

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?**15a****b** If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____**c** If "Yes," enter name and address

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?**17a****b** Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ _____

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the U.S.**

► Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22.
► Attach to Form 990.

OMB No. 1545-0047

2008

Open to Public
Inspection

Name of the organization

CHAMBER MUSIC AMERICA, INC.

Employer identification number
13-2934575

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed. ☐

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KRONOS QUARTET 1242 9TH AVENUE SAN FRANCISCO, CA 94122	23-7444956	501(C)(3)	23,000.	0.			COMMISSIONING GRANT
PRISM QUARTET 257 W HARVEY STREET PHILADELPHIA, PA 19144	38-2996081	501(C)(3)	20,000.	0.			COMMISSIONING GRANT
SHANGHAI QUARTET 597 UPPER MOUNTAIN AVENUE MONTCLAIR, NJ 07043-1622	54-1683540	501(C)(3)	20,000.	0.			COMMISSIONING GRANT
DORIAN WIND QUINTET PO BOX 231417 NEW YORK, NY 10023	23-7148050	501(C)(3)	19,000.	0.			COMMISSIONING GRANT
FESTIVAL OF NEW TRUMPET MUSIC 28 ROCK HILL ROAD NEW HAVEN, CT 06513	20-8308397	501(C)(3)	18,000.	0.			COMMISSIONING GRANT
SO PERCUSSION, INC. 233 NORMAN AVE., #309 BROOKLYN, NY 11222	20-4485651	501(C)(3)	17,500.	0.			COMMISSIONING GRANT

2 Enter total number of section 501(c)(3) and government organizations

30.

3 Enter total number of other organizations

0.

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

Schedule I (Form 990) 2008

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Use Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
FRENCH-AMERICAN JAZZ EXCHANGE	4	37,000.	0.		
JAZZ NEW WORKS	12	253,000.	0.		
RESIDENCY PARTNERSHIP	3	35,000.	0.		

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

SCHEDULE I, PART I, LINE 2: CONTRACTS ARE ISSUED AT THE BEGINNING OF THE GRANT PERIOD; INTERIM REPORTS ARE REQUIRED PERIODICALLY, DEPENDING ON THE LENGTH OF THE GRANT CYCLE; FINAL REPORTS ARE REQUIRED AT THE CONCLUSION OF EACH GRANT PERIOD.

STAFF REVIEWS INTERIM REPORTS AND PRO-ACTIVELY CONTACTS GRANTEEES THROUGHOUT THE YEAR TO MONITOR PROGRESS. IT IS STATED IN THE GRANT CONTRACT THAT THE GRANTEE MUST NOTIFY CMA IN WRITING OF ANY CHANGES FROM THE GRANTEE'S ORIGINAL APPLICATION THAT MIGHT OCCUR. CMA HAS THE RIGHT TO REFUSE TO

Part IV Supplemental Information

APPROVE PROPOSED CHANGES.

SCHEDULE I-1
(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)
Attach to Form 990 to list additional information for
Part II and Part III, Schedule I (Form 990).

OMB No. 1545-0047
2008

Open to Public
Inspection

Name of the organization

CHAMBER MUSIC AMERICA, INC.

Employer identification number

13-2934575

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non cash assistance	(h) Purpose of grant or assistance
CHIARA STRING QUARTET 3800 OLD CHENEY RD. STE. 101-102 LINCOLN, NE 68516	32-0120371	501(C)(3)	17,000.	0.			COMMISSIONING GRANT
IMANI WINDS 77-11 35TH AVE., #5K JACKSON HEIGHTS, NY 11372	13-4128918	501(C)(3)	17,000.	0.			COMMISSIONING GRANT
ENSO STRING QUARTET 39 CLAREMONT AVE., #114 NEW YORK, NY 10027	90-0490678	501(C)(3)	15,000.	0.			COMMISSIONING GRANT
MUSIC OF REMEMBRANCE PO BOX 27500 SEATTLE, WA 98165	91-1923624	501(C)(3)	15,000.	0.			RESIDENCY PARTNERSHIP PROGRAM GRANT
RED CEDAR CHAMBER MUSIC PO BOX 154 MARION, IA 52302	42-1473672	501(C)(3)	15,000.	0.			RESIDENCY PARTNERSHIP PROGRAM GRANT
SOUTHERN ILLINOIS UNIV. SCHOOL OF MUSIC - SOUTHERN ILLINOIS UNIVERSITY - CARBONDALE, IL 62901	37-6005961	501(C)(3)	15,000.	0.			RESIDENCY PARTNERSHIP PROGRAM GRANT
ZEITGEIST 275 EAST FUORTH ST. ST. PAUL, MN 55101	41-1425985	501(C)(3)	15,000.	0.			COMMISSIONING GRANT
JAZZMOBILE 154 W 127TH STREET NEW YORK, NY 10027	13-2614483	501(C)(3)	12,000.	0.			RESIDENCY PARTNERSHIP PROGRAM GRANT

2 Enter total number of Section 501(c)(3) and government organizations

3 Enter total number of other organizations

832241 12-17-08

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

Schedule I-1 (Form 990) 2008

SCHEDULE I-1
(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)
▲ Attach to Form 990 to list additional information for
Part II and Part III, Schedule I (Form 990).

OMB No. 1545-0047

2008

Open to Public
Inspection

Name of the organization

CHAMBER MUSIC AMERICA, INC.

Employer identification number

13-2934575

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PITTSBURGH NEW MUSIC ENSEMBLE 527 COYNE TERRACE PITTSBURGH, PA 15207	25-1364030	501(C)(3)	11,500.	0.			COMMISSIONING GRANT
INTERNATIONAL FESTIVAL OF ARTS AND IDEAS - 195 CHURCH STREET, 12TH FLOOR - NEW HAVEN, CT 06510	06-1444222	501(C)(3)	11,000.	0.			PRESENTING JAZZ GRANT
JAZZ ST. LOUIS 3547 OLIVE STREET, SUITE 212 ST. LOUIS, MO 63103	43-1761629	501(C)(3)	11,000.	0.			PRESENTING JAZZ GRANT
MONTGOMERY COUNTY COMMUNITY COLLEGE - 340 DEKALB PIKE - BLUE BELL, PA 19422	23-1760325	501(C)(3)	11,000.	0.			PRESENTING JAZZ GRANT
WALKER ART CENTER 1750 HENNEPIN AVENUE MINNEAPOLIS, MN 55403	41-0693929	501(C)(3)	11,000.	0.			PRESENTING JAZZ GRANT
WORLD MUSIC INSTITUTE 29 WEST 27TH STREET, STE. 930 NEW YORK, NY 10001	13-3323045	501(C)(3)	11,000.	0.			PRESENTING JAZZ GRANT
IO QUARTET 11 HILLSIDE AVENUE, #2F NEW YORK, NY 10040	26-0785220	501(C)(3)	10,500.	0.			COMMISSIONING GRANT
ARS NOVA WORKSHOP, INC. 3909 WARREN ST. PHILADELPHIA, NY 19104	38-3714248	501(C)(3)	10,000.	0.			PRESENTING JAZZ GRANT

2 Enter total number of Section 501(c)(3) and government organizations

3 Enter total number of other organizations

832241 12-17-08 LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I-1 (Form 990) 2008

SCHEDULE I-1
(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)
 Attach to Form 990 to list additional information for
 Part II and Part III, Schedule I (Form 990).

OMB No. 1545-0047
2008

Open to Public
Inspection

Name of the organization

CHAMBER MUSIC AMERICA, INC.

Employer identification number
13-2934575

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CORNISH COLLEGE OF THE ARTS 1000 LENORA STREET SEATTLE, WA 98121	91-0916534	501(C)(3)	10,000.	0.			PRESENTING JAZZ GRANT
EARSHOT JAZZ SOCIETY OF SEATTLE 3429 FREMONT PLACE N, #309 SEATTLE, WA 98103-8650	94-3051601	501(C)(3)	10,000.	0.			PRESENTING JAZZ GRANT
WALDEN CHAMBER PLAYERS 68 BOYLSTON STREET WATERTOWN, MA 02472	04-3505960	501(C)(3)	10,000.	0.			RESIDENCY PARTNERSHIP PROGRAM GRANT
CALDER QUARTET 200 SOUTH GRAND AVENUE LOS ANGELES, CA 90012	20-8430367	501(C)(3)	9,500.	0.			COMMISSIONING GRANT
FLYNN CENTER FOR THE PERFORMING ARTS, LTD. - 153 MAIN STREET - BURLINGTON, VT 05401	03-0277052	501(C)(3)	9,490.	0.			PRESENTING JAZZ GRANT
KERRY TOWN CONCERT HOUSE, INC. 415 N FOURTH AVENUE ANN ARBOR, MI 48104	38-2542823	501(C)(3)	8,680.	0.			PRESENTING JAZZ GRANT
ARTSWEGO SUNY OSWEGO 105 MAHAR HALL OSWEGO, NY 13126	15-0543477	501(C)(3)	6,000.	0.			RESIDENCY PARTNERSHIP PROGRAM GRANT
MUSICAL CHAIRS CHAMBER ENSEMBLE 850 HOWARD AVE., STE. 1J STATEN ISLAND, NY 10301	20-1458258	501(C)(3)	6,000.	0.			RESIDENCY PARTNERSHIP PROGRAM GRANT

2 Enter total number of Section 501(c)(3) and government organizations

3 Enter total number of other organizations

832241 12-17-08 LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I-1 (Form 990) 2008

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees

► Attach to Form 990. To be completed by organizations that
answered "Yes" to Form 990, Part IV, line 23.

OMB No 1545-0047

2008

Open to Public
Inspection

Name of the organization

CHAMBER MUSIC AMERICA, INC.

Employer identification number

13-2934575

Part I Questions Regarding Compensation

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

- | | |
|--|--|
| ☐ First-class or charter travel | ☐ Housing allowance or residence for personal use |
| ☐ Travel for companions | ☐ Payments for business use of personal residence |
| ☐ Tax indemnification and gross-up payments | ☐ Health or social club dues or initiation fees |
| ☐ Discretionary spending account | ☐ Personal services (e.g., maid, chauffeur, chef) |

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

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

3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's
CEO/Executive Director. Check all that apply.

- | | |
|---|---|
| ☒ Compensation committee | ☒ Written employment contract |
| ☐ Independent compensation consultant | ☒ Compensation survey or study |
| ☒ Form 990 of other organizations | ☒ Approval by the board or compensation committee |

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a

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

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

Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8.

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

- a** The organization?
- b** Any related organization?

If "Yes," to line 5a or 5b, describe in Part III.

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

- a** The organization?
- b** Any related organization?

If "Yes" to line 6a or 6b, describe in Part III.

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

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

Yes No

1b

2

4a

4b

4c

5a

5b

6a

6b

7

8

X

X

X

X

X

X

X

X

X

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

Schedule J (Form 990) 2008

1

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

[illegible]

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the Organization

CHAMBER MUSIC AMERICA, INC.

Employer Identification number

13-2934575

(A)

(B)
Average
hours
per
week

(C)
Position
(check all that apply)

Individual trustee or director
Institutional trustee
Officer
Key employee
Highest compensated employee
Former

(D)
Reportable
compensation
from
the
organization
(W-2/1099-MISC)

(E)
Reportable
compensation
from related
organizations
(W-2/1099-MISC)

(F)
Estimated
amount of
other
compensation
from the
organization
and related
organizations

[illegible]

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

Schedule J-2 (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.

OMB No. 1545-0047

2008Open to Public
Inspection

Name of the organization

CHAMBER MUSIC AMERICA, INC.

Employer identification number

13-2934575

FORM 990, PART III, LINE 2, NEW PROGRAM SERVICES:

CMA'S 'NEW WORKS: CREATION AND PRESENTATION PROGRAM' WHICH HAD
PREVIOUSLY AWARDED GRANTS SOLELY FOR NEW COMPOSITIONS, WAS EXPANDED TO
INCLUDE A THREE-YEAR COMMITMENT BETWEEN CMA AND THE GRANTEE. NOW
TITLED 'NEW JAZZ WORKS: COMMISSIONING AND ENSEMBLE DEVELOPMENT,' THE
PROGRAM PROVIDES FUNDING FOR THREE COMPONENTS:

1. CORE - THE CREATION AND PERFORMANCE OF A NEW WORK IN THE JAZZ
IDIOM;
2. CONTINUED LIFE - PROMOTING ADDITIONAL PERFORMANCES OF THE WORK
THROUGH SUBSEQUENT CONCERT ENGAGEMENTS OR RECORDING;
3. BETTER BUSINESS - OPPORTUNITIES FOR THE ENSEMBLE LEADER TO ACQUIRE
OR IMPROVE ADMINISTRATIVE SKILLS THAT WILL BENEFIT THE ENSEMBLE OVER A
LONGER-TERM, SUCH AS LEARNING ABOUT GRANTWRITING OR CONTRACT
NEGOTIATION, TECHNOLOGY, RECORD-KEEPING, ETC.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS
THE FRENCH-AMERICAN CULTURAL EXCHANGE FOR PROJECTS INVOLVING AMERICAN
AND FRENCH JAZZ MUSICIANS.

RESIDENCY PARTNERSHIP: 10 GRANTS WERE AWARDED TO ENSEMBLES AND
PRESENTERS FOR EDUCATIONAL AND AUDIENCE DEVELOPMENT ACTIVITIES IN
COMMUNITIES NATIONWIDE.

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

CONSULTING SERVICES, EDUCATION, WEBSITE

EXPENSES \$ 149428. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

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

Schedule O (Form 990) 2008

832211
12-18-08

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.

OMB No 1545-0047

2008

Open to Public
Inspection

Name of the organization

CHAMBER MUSIC AMERICA, INC.

Employer identification number

13-2934575

FORM 990, PART VI, SECTION A, LINE 6: MEMBERSHIP IS BE OPEN TO ALL PERSONS AND ORGANIZATIONS INTERESTED IN THE PURPOSES OF THE CORPORATION. EACH INDIVIDUAL OR ORGANIZATION IS REFERRED TO AS A MEMBER AND COLLECTIVELY AS MEMBERS.

FORM 990, PART VI, SECTION A, LINE 7A: THE ORGANIZATION'S BYLAWS MANDATE 21 BOARD MEMBERS FROM THE PROFESSIONAL CHAMBER MUSIC FIELD; THESE ARE IDENTIFIED AS ELECTED BOARD MEMBERS. VOTING MEMBERS CAST A BALLOT FOR SEVEN ELECTED DIRECTORS ANNUALLY.

FORM 990, PART VI, SECTION A, LINE 7B: THE BOARD HAS THE POWER TO SPECIFY WHICH MEMBERSHIP CATEGORY HAS THE RIGHT TO VOTE ON MATTERS PRESENTED TO THE MEMBERS. EACH MEMBER WITHIN A MEMBERSHIP CATEGORY ENTITLED TO VOTE HAS THE RIGHT TO CAST ONE VOTE ON EACH MATTER UNDER CONSIDERATION BY THE VOTING MEMBERS. EACH VOTING MEMBER CASTS A VOTE PURSUANT TO PROCEDURES ESTABLISHED BY THE BOARD, WHICH INCLUDES VOTING IN PERSON, BY PROXY, OR BY EMAIL.

FORM 990, PART VI, SECTION A, LINE 10: CMA'S CHIEF EXECUTIVE OFFICER AND AUDIT COMMITTEE OF THE BOARD REVIEWED THE FORM 990 BEFORE IT WAS SUBMITTED TO THE IRS. THE REVIEW WAS CONDUCTED IN MAY 2010 UNDER THE LEADERSHIP OF THE CHAIR OF THE AUDIT COMMITTEE.

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.

OMB No. 1545-0047

2008

Open to Public
Inspection

Name of the organization

CHAMBER MUSIC AMERICA, INC.

Employer identification number

13-2934575

FORM 990, PART VI, SECTION B, LINE 12C: THERE EXISTS BETWEEN CMA AND ITS BOARD, OFFICERS, AND MANAGEMENT EMPLOYEES A FIDUCIARY DUTY THAT CARRIES WITH IT A BROAD AND UNBENDING DUTY OF LOYALTY AND FIDELITY. THE BOARD, OFFICERS, AND MANAGEMENT EMPLOYEES HAVE THE RESPONSIBILITY OF ADMINISTERING THE AFFAIRS OF CMA HONESTLY AND PRUDENTLY, AND OF EXERCISING THEIR BEST CARE, SKILL, AND JUDGMENT FOR THE SOLE BENEFIT OF CMA. THOSE PERSONS SHALL EXERCISE THE UTMOST GOOD FAITH IN ALL TRANSACTIONS INVOLVED IN THEIR DUTIES, AND THEY SHALL NOT USE THEIR POSITIONS WITH CMA OR KNOWLEDGE GAINED THERE FROM FOR THEIR PERSONAL BENEFIT. THE INTERESTS OF THE ORGANIZATION MUST HAVE THE FIRST PRIORITY IN ALL DECISIONS AND ACTIONS. IT IS THE POLICY OF THE BOARD THAT THE EXISTENCE OF ANY POTENTIAL OR REAL CONFLICTS OF INTEREST SHALL BE DISCLOSED ON A TIMELY BASIS AND ALWAYS BEFORE ANY TRANSACTION IS CONSUMMATED. IT SHALL BE THE CONTINUING RESPONSIBILITY OF BOARD, OFFICERS, AND MANAGEMENT EMPLOYEES TO SCRUTINIZE THEIR TRANSACTIONS AND OUTSIDE BUSINESS INTERESTS AND RELATIONSHIPS FOR POTENTIAL CONFLICTS AND TO IMMEDIATELY MAKE SUCH DISCLOSURES.

WHILE NO CONFLICTS AMONG BOARD MEMBERS HAVE EVER ARISEN, THE POTENTIAL PROCESS OF RESOLVING A CONFLICT IS TO DISCUSS THE IMPENDING CONFLICT WITH THE INDIVIDUAL AND AGREE ON A SOLUTION THAT WOULD MAINTAIN THE HIGH DEGREE OF INTEGRITY THAT IS REQUIRED OF ALL BOARD MEMBERS WHILE SERVING CHAMBER MUSIC AMERICA'S BEST INTERESTS. IF A CONFLICT OF INTEREST COULD NOT BE SETTLED THROUGH DISCUSSION AND AMICABLE RESOLUTION, THE BOARD MEMBER WOULD BE ASKED TO RESIGN.

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.

OMB No. 1545-0047

2008

Open to Public
Inspection

Name of the organization

CHAMBER MUSIC AMERICA, INC.

Employer identification number

13-2934575

IF A CONFLICT OF INTEREST WERE TO ARISE AT THE STAFF LEVEL, THE SITUATION WOULD BE REVIEWED BY THE CEO, WHO WOULD MAKE A RECOMMENDATION TO THE BOARD FOR APPROPRIATE ACTION.

FORM 990, PART VI, SECTION B, LINE 15: A COMPARATIVE COMPENSATION REVIEW OF THE CEO WAS CONDUCTED BY A QUALIFIED COMPENSATION CONSULTANT IN 2009. THE CEO'S COMPENSATION AND BENEFITS PACKAGE WAS EVALUATED ALONGSIDE THOSE OF CEOS/EXECUTIVE DIRECTORS WHO LEAD SIMILAR TYPES AND SIZES OF ARTS ORGANIZATIONS. CMA DOES NOT HAVE OTHER COMPENSATED OFFICERS OR KEY EMPLOYEES.

FORM 990, PART VI, SECTION C, LINE 19: CMA HAS NOT MADE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS GENERALLY AVAILABLE TO THE PUBLIC; HOWEVER, CMA HAS SHARED THESE DOCUMENTS WITH MEMBERS OF THE PUBLIC WHEN REQUESTED.

FORM 990, PART XI, LINE 2C

FINANCIAL STATEMENTS AND REPORTING

THE PROCESS FOR OVERSIGHT OF THE AUDIT OF OUR FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT HAS NOT CHANGED FROM THE PRIOR YEAR.

2008 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

Asset No	Description	Date Acquired	Method	Life	Line No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
3	BUILDINGS											
	CONDOMINIUM UNIT											
	* 990 PAGE 10 TOTAL											
	BUILDINGS											
7												
	* 990 PAGE 10 TOTAL											
	OTHER											
	FURNITURE & FIXTURES											
2	FURNITURE & FIXTURES											
	* 990 PAGE 10 TOTAL											
	FURNITURE & FIXTURES											
	MACHINERY & EQUIPMENT											
1	COMPUTER EQUIPMENT											
	WEBSITE DEVELOPMENT											
5	COSTS											
	* 990 PAGE 10 TOTAL											
	MACHINERY & EQUIPMENT											
	OTHER											
4	CONDOMINIUM UNIT											
	IMPROVEMENTS											
	* 990 PAGE 10 TOTAL											
	OTHER											
	* GRAND TOTAL 990 PAGE 10 DEPR											

828102
04-23-08

(D) - Asset disposed

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

37.1



Print



Export

Name: CHAMBER MUSIC AMERICA
INC

IRS Center: OGDEN

e-Postmark: 10/28/2009 8:22:11
AM

FEIN: 13-2934575

Refund: \$0.00

Notification:

Return History

DCN	DATE	TYPE OF ACTIVITY	UPDATED BY
	10/27/2009	Upload Started	
	10/27/2009	Ready to Release by Customer	
	10/28/2009	Released for Transmission - Validation in Progress	759420
	10/28/2009	Ready to transmit - Validation Complete	
	10/28/2009	Transmitted to FD	
	10/28/2009	Accepted by FD	

**Application for Extension of Time To File an
Exempt Organization Return**

OMB No. 1545-1709

▶ **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒ **X**
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868**Part I Automatic 3-Month Extension of Time.** Only submit original (no copies needed)A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only ☐*All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns***Electronic Filing (e-file).** Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits

Type or print File by the due date for filing your return. See instructions	Name of Exempt Organization	Employer identification number
	CHAMBER MUSIC AMERICA, INC.	13-2934575
	Number, street, and room or suite no. If a P.O. box, see instructions 305 SEVENTH AVENUE - 5TH FLOOR	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions NEW YORK, NY 10001-6008	

Check type of return to be filed (file a separate application for each return)

- | | | |
|--|---|------------------------------------|
| ☒ Form 990 | ☐ Form 990-T (corporation) | ☐ Form 4720 |
| ☐ Form 990-BL | ☐ Form 990-T (sec. 401(a) or 408(a) trust) | ☐ Form 5227 |
| ☐ Form 990-EZ | ☐ Form 990-T (trust other than above) | ☐ Form 6069 |
| ☐ Form 990-PF | ☐ Form 1041-A | ☐ Form 8870 |

KEVIN RUSSELL

- The books are in the care of ▶ **305 SEVENTH AVE - NEW YORK, NY 10001-6008**

Telephone No ▶ **212-242-2022**

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 is for the whole group, check this box ☐ If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension will cover

- 1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until **FEBRUARY 15, 2010**, to file the exempt organization return for the organization named above. The extension is for the organization's return for
- ▶ ☐ calendar year _____ or
- ▶ ☒ tax year beginning **JUL 1, 2008**, and ending **JUN 30, 2009**.

- 2 If this tax year is for less than 12 months, check reason. ☐ Initial return ☐ Final return ☐ Change in accounting period

3a 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.	3a	\$
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	\$
c 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.	3c	\$ N/A

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

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

Form **8868** (Rev. 4-2009)

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868

- If you are 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 copies needed)		
Type or print File by the extended due date for filing the return. See instructions	Name of Exempt Organization	Employer identification number
	CHAMBER MUSIC AMERICA, INC.	13-2934575
	Number, street, and room or suite no. If a P.O. box, see instructions	For IRS use only
	305 SEVENTH AVENUE - 5TH FLOOR	
	City, town or post office, state, and ZIP code For a foreign address, see instructions	
	NEW YORK, NY 10001-6008	

Check type of return to be filed (File a separate application for each return)

- ☒ Form 990
 ☐ Form 990-EZ
 ☐ Form 990-T (sec 401(a) or 408(a) trust)
 ☐ Form 1041-A
 ☐ Form 5227
 ☐ Form 8870
☐ Form 990-BL
☐ Form 990-PF
☐ Form 990-T (trust other than above)
☐ Form 4720
☐ Form 6069

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

KEVIN RUSSELL

- The books are in the care of ☒ 305 SEVENTH AVE - NEW YORK, NY 10001-6008
 Telephone No ☒ 212-242-2022 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 is for the whole group, check this box ☐ If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for

- 4 I request an additional 3-month extension of time until MAY 15, 2010
- 5 For calendar year _____, or other tax year beginning JUL 1, 2008, and ending 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 Kevin Russell Title CPA Date 11/29/10

Form 8868 (Rev. 4-2009)