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Form **990-EZ**

Short Form 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)

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form

OMB No 1545-1150

2008

Open to Public Inspection

U		rtment of	the Treasury		.(©), T ◀		ssets less t			e end of the			rm ing requirem	nents			inspec	tion
O			2008 calend						July			8, and en			June		, 2	
(I)		heck if ap		Please	_		organization		July		,	o, and on					tification	
		Address cl		use IRS	i NI		Dance W							i	6 ;	or iden	34160	
\Rightarrow	□ •	Name cha	nge	label or print or	-					not delivere	od to street	t address)	Room/suite			one nu		
	=	Initial retur		type	ļ		gomerv			not delivere	d to street	t address,	100/10 Suite		201		377-0	1718
\mathcal{L}	= '	Terminatio		See Specific	. —		<u> </u>		and ZIP + 4	1				·		<u> </u>		77.10
	=	Amended : Application		Instruc- tions		-	ty NJ 07	-	and Zir + -	•					roup umbe	Exemp er	tion ▶	
	=_		on 501(c)(3)						nnt char	tahla trus	te muet	attach	G Acco				Cash	✓ Accrual
	·	Jectic	<i>,,,</i> 2011(c)(2)						0 or 990-E		to must i	attacii	Other	-			Casii	W Accidai
			<u> </u>		<u></u>						-		1			•	ganizatioi	o ic not
	ı V	Nebsit	e: ▶ <u>www</u>	v.nimbu	usd	lancewo	rks.org								_		gariizatioi edule B (F	
Ø	JC	Organiz	ation type (d	check or	nly o	one) – 🗸	501(c) (3) ∢ (in	sert no)	4947	(a)(1) or	527		Z, or				
क्ट्यू स्टाइक			_									ross recei	ots are nor	mallv	not n	nore tha	n \$25.00	A return is
2 3 S			red, but if th											,			,	
	L A	Add lines	5b, 6b, and	7b, to lir	ıne 9	to detern	mine gross	receipts,	if \$1,000,0	000 or mor	e, file For	m 990 inst	ead of Forn	n 990-	EZ	▶ \$		\$55,426
	Pa	rt I	Revenue	, Expe	ense	es, and	Chang	es in N	let Ass	ets or F	und Ba	lances	See the	ınstr	uction	ons fo	r Part I)
		1	Contributio	ns, gifts	s, gi	rants, an	nd sımılar	amounts	s received	i						1		\$25,284
		2	Program s	ervice i	reve	enue inc	luding g	overnme	ent fees a	and contra	acts					2		\$30,142
			Membersh													3		0
		4	Investment	t incom	ne											4		0
		5a	Gross amo	ount fro	om s	sale of a	assets ot	her than	inventor	γ		5a			0			
		b	Less [,] cost	or othe	er b	oasis and	d sales e	xpenses	3			5b			0			
	a	С	Gain or (los	ss) from	ı sal	e of asse	ets other t	han inve	ntory (Sul	btract line	5b from	ı lıne 5a) (a	attach sch	edule).	5c		0
	Ž	6	Special events									gaming, ch	eck here 🕨	· []	{		
	Revenue	а	Gross reve	enue (no	ot 11	ncluding	3 \$		(of contrib	utions	1 - 1						
	œ.		reported o		•							6a			0	2		
}			Less: direc					•	•			6b						^
j		c Net income or (loss) from special events and activities (Subtract line 6b from line 6a) 7a Gross sales of inventory, less returns and allowances							ie 6a)		ö	6c		0				
<u> </u>						•	s returns	and all	owances			7a 7b			0			
Ž			Less cost	-					,							7c		٥
SCAINITION OF THE PROPERTY OF		с 8	Gross prof Other reve				ales of in	ventory	(Subtract	t line /b i	rom ine	<i>r</i> a) .	•		、 -	8		0
Ď.		9	Total reve				2. 3. 4. 5	5c. 6c. 7	c. and 8				_		,	9		\$55,426
	\exists	10	Grants and										5			10		0
		11	Benefits pa					acii acii	sauloj	•	·	EIVE	اي	١.		11		0
	တ္ဆ	12	Salaries, o					nnlovee	henefits		カドじ	المرايار	. /ŵ) ·	-	12		0
	benses	13	Profession							contract	O'S		010. 10	<u>\5</u> /		13		\$46,576
	g	14	Occupanc				-			1 1		C 03	لر "،"	4	. [14		0
	ш	15	Printing, p	ublicati	ions	s, posta	ge, and s	hipping		• \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	I DE	C 033	111	7		15		\$1,096
	- 1	16	Other expe	enses ((des	scribe 🕨	See at	tached	schedule	e \ū			1.01		.) [16		\$14,643
		17	Total expe	enses.	Add	d lines 1	10 throug	h 16	<u>:_</u>	<u>\</u>	400	305			>	17		\$62,315
	ts	18	Excess or	(deficit	t) fo	r the yea	ar (Subtr	act line	17 from !	line 9) . 🔪	الجكسرا	· .			L	18		-\$6,889
	Net Assets	19	Net assets	s or fur	nd I	balances	s at beg	inning o	f year (fr	rom line :	27, colu	ımn (A)) (must agre	ee w	ith 🏻			
	ğ		end-of-yea	ar figure	e re	eported	on prior	year's r	eturn)						-	19		\$23,889
	É	20	Other char												. · -	20		0
		21	Net assets												<u> </u>	21		\$17,011
	Ра	rt II	Balance						-	(B) are \$	2,500,00	Ju or mo						
		_		•			tructions	tor Part	II)				(A) Be				(B) End o	
	22		n, savings,		vest	tments				•				Φ.	23,00	39 22 0 23		\$17,011
	23		I and buildi	-					•			•				0 23 0 24		0
	24		r assets (d	escribe	• ▶)		¢	23,88			\$17,011
	25		l assets	/-l	. L			•						Ψ.	-5,00	0 26		<u>Ψ17,011</u> Λ
	26 27	i ota Net	I liabilities assets or 1	(aescrit fund ha	ibe l alar	nces (lin	e 27 of c	:olumn /	B) must	agree wit	th line 2	1)		\$	23,88			\$17,011
			y Act and P		_								Cat No			1	Form 99	0-EZ (2008)

Form 990-EZ (2008)					Page ∠
Part III Statement of Program Service Accom	plishments (See the insti	ructions for Part	III.)		Expenses
What is the organization's primary exempt purpose?	ance education and dance	e performances		(Rec	quired for 501(c)(3) (4) organizations
Describe what was achieved in carrying out the organizatescribe the services provided, the number of persons be	ation's exempt purposes. In nefited, or other relevant info	n a clear and conc ormation for each p	rogram title	and	4947(a)(1) trusts, onal for others)
28 Jersey City Home Season Performances. Three					
student/senior citizen matinee performances. Fe		npaniment by loc	al		
musicians. Total attendance was approximately		 hava		28a	\$17, 140
(Grants \$ 7,222) If this amount inclinate JC Grooves: 2,000 middle school students expositely	sed to educational dance	nerformances		208	\$17, 140
After-school dance program serving 25 students					
(Grants \$ 0) If this amount incli	udes foreign grants, check	here	▶ □	29a	\$16, 14 0
30 Cumberland County College Performance produ	ced by New Jersey State	Council on the Ai	ts.		
Total attendance was approximately 400 people.					
(Grants \$ 0) If this amount incli	udes foreign grants, check	here	▶ □	30a	\$1,460
31 Other program services (attach schedule) .	,,,,				. ,
	udes foreign grants, check	here .	▶ □	31a	\$5,200
32 Total program service expenses (add lines 28a th			<u> </u>	32	\$39,940
Part IV List of Officers, Directors, Trustees, and Key					ons for Part IV) (e) Expense
(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contribution employee benefit deferred compe	plans &	account and other allowances
Samuel Pott, 242 Montgomery St, Apt B Jersey City NJ 07302	Artistic Director, 60	\$10,300		0	0
Michelle deFremery, 274 Pacific Ave	Trustee, 1; Teacher, 8	, ,			
Jersey City NJ 07304	Trustee, 1, reaction, 0	\$2,160		0	0
Judith Pott, 336 Central Park West, #9A New York NY 10025	Trustee, 1	0		0	0
DeVon Nolt, 442-D Lorimer St #185	General Manager, 10				
Brooklyn, NY 11206		\$6,005		0	0
		ļ			
					_
			-		

Pa	Other Information (Note the statement requirements in the instructions for Part VI.)			
			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity .	33		✓
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	34		1
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T		-	į
а	Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?	35a		✓
b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b		
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Schedule N	36		✓_
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions [37a]	<u> </u>		
b	Did the organization file Form 1120-POL for this year?	37b		
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were	S.L		
	any such loans made in a prior year and still unpaid at the start of the period covered by this return?	38a		<u> </u>
b	If "Yes," complete Schedule L, Part II and enter the total amount involved		4,	``
39	Section 501(c)(7) organizations Enter		* .	15.
а	Initiation fees and capital contributions included on line 9		,	, KR
b	Gross receipts, included on line 9, for public use of club facilities		1	,}
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶			1
b	Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction			
	during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule			
	L, Part I	40b		✓
С	Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶		41 N	
d	Enter amount of tax on line 40c reimbursed by the organization ▶			
е	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	# 1 40e	*	<u>√</u>
41	List the states with which a copy of this return is filed ▶ New Jersey			
42a	The books are in care of ▶ Corporation Located at ▶ 242 Montgomery St Apt B Jersey City NJ ZIP + 4 ▶) 29 07302-	92-71 4066	0 <u>5</u>
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority	1		
	over a financial account in a foreign country (such as a bank account, securities account, or other financial		Yes	<u>No</u>
	account)?	42b	· 3	<u>√</u> ,
	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.	, *		
С	At any time during the calendar year, did the organization maintain an office outside of the US? If "Yes," enter the name of the foreign country	42c		✓_
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here			▶ □
	and enter the amount of tax-exempt interest received or accrued during the tax year			
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of		Yes	No
••	Form 990-EZ	44	* '64# E	
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	1	Ø Z	
		1-70		

Page	
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Ferm 990-EZ	(2008)				Page 4					
Part VI	Section 501(c)(3) organizations only and complete the tables for lines 50 at		d) organizations m	ust answer questi	ons 46–49					
46 Did th	ne organization engage in direct or indirect p	olitical campaign activ	ities on behalf of or	in opposition to	Yes No					
candı	dates for public office? If "Yes," complete S	chedule C, Part I			46 ✓					
47 Did th	ne organization engage in lobbying activities	If "Yes," complete So	chedule C, Part II		47 ✓					
48 Is the	e organization operating a school as describe	ed in section 170(b)(1)(/	A)(II)? If "Yes," comp	lete Schedule E	48 ✓ 49a ✓					
	a the organization make any transfer to an exempt non-character related organization									
	es," was the related organization(s) a section	_	•		49b					
	plete this table for the five highest compensativeceived more than \$100,000 of compensations.				employees) who					
(a) N	Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances					
None										
Total numb	per of other employees paid over \$100,000	None								
	plete this table for the five highest compensation from the organization. If there is no		actors who each red	ceived more than \$1	00,000 of					
	(a) Name and address of each independent contractor p	oaid more than \$100,000	(b) T	ype of service	(c) Compensation					
None										
										
	••••••									
Total numb	per of other independent contractors each re	100 000 \$100 000	>	None						
Total Hullik	Under penalties of perjury, I declare that I have examin			- · · · · · · · · · · · · · · · · · · ·	est of my knowledge					
	and belief, it is true, correct, and complete Declarati									
Sign	HA	-		11/29/10						
Here	Signature of officer			Date						
	DeVon Nolt, General Manager									
	Type or print name and title			,	•					
Paid Preparer's	Preparer's signature	Dat	e Check if self- employed		Number (See instructions)					
Use Only	Firm's name (or yours if self-employed),			EIN ►						
	address, and ZIP + 4			Phone no ► ()						
May the IR	RS discuss this return with the preparer show	n above? See instruct	ions	. <u> </u>	Yes No					
				F	orm 990-EZ (2008)					

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

Open to Public Inspection

Employer identification number Name of the organization 26 3416084 Nimbus Dance Works inc. Part I Reason for Public Charity Status (All organizations must complete this part.) (see instructions) The organization is not a private foundation because it is: (Please check only one organization.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H.) 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: 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.) 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.) R A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33\% % 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 33/4 % 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 Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions) 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 c Type III-Functionally integrated **b** Type II **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). If the organization received a written determination from the IRS that it is a Type II, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the g following persons? Yes No (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? 11g(i) 11g(ii) (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? 11g(iii) Provide the following information about the organizations the organization supports. (i) Name of supported (ii) EIN (iii) Type of organization (iv) is the organization (v) Did you notify (vii) Amount of (vi) Is the organization (described on lines 1-9 in col (i) listed in your organization in col the organization in support above or IRC section governing document? col (i) of your (i) organized in the (see instructions)) support? 1152 Yes Yes Yes

Par	(Complete only if you chec	janizations l ked the box	Described in on line 5, 7,	Sections 17 or 8 of Part I	0(b)(1)(A)(iv) .)	and 170(b)(I)(A)(vi)
Sec	tion A. Public Support						
Ca	lendar year (or fiscal year beginning in) 🕨	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Totai
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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					ļ	
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) Public support. Subtract line 5 from line 4.						
Sec	tion B. Total Support					•••	
	lendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10 .						
12	Gross receipts from related activities, etc	•	,			12	
13	First five years. If the Form 990 is for organization, check this box and stop he	re	<u></u> ::_	d, third, fourth			on 501(c)(3)
	tion C. Computation of Public Su	LN				T	
14	Public support percentage for 2008 (line		-	***		14	<u>%</u>
15	Public support percentage from 2007 Scl					15	<u>%</u>
	and stop here. The organization qualifies	as a publicly	supported organ	nization			▶ □
	331/3 % support test—2007. If the organization qua	lifies as a publ	icly supported of	organization .			▶ □
17a	10%-facts-and-circumstances test—20 more, and if the organization meets the "facts-and-circum organization meets the "facts-and-circum	acts-and-circur	mstances" test,	check this box	and stop here	Explain in Part	IV how the
b 18	10%-facts-and-circumstances test—2007 more, and if the organization meets the "facts-and-circumsta Private foundation. If the organization did	acts-and-circum inces" test. The	nstances" test, c organization qua	heck this box a ilifies as a public	and stop here. By supported or	Explain in Part ganization	IV how the

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.)

Sec	tion A. Public Support						
Ca	alendar 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.")					\$25,284	\$25,284
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					\$30,142	\$30,142
3	Gross receipts from activities that are not an unrelated trade or business under section 513					0	0
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf					0	0
5	The value of services or facilities furnished by a governmental unit to the organization without charge					0	0
6	Total. Add lines 1-5	ļ				\$55,426	\$55,426
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .					0	0
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		<u> </u>		·	0	0
8 8	Add lines 7a and 7b					U	0
Sec	tion B. Total Support	<u> </u>	<u> </u>		<u> </u>		\$55,426
	alendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6	(-7	(-,	(0) 2000	(2) 2001	\$55,426	\$55,426
_	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources					0	0
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975					0	0
С	Add lines 10a and 10b					0	0
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on					0	0
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)					0	0
13	Total support. (Add lines 9, 10c, 11, and 12.)						\$55,426
14	First five years. If the Form 990 is for to organization, check this box and stop it	the organizatio here	n's first, secor	nd, third, fourth	n, or fifth tax y	ear as a section	n 501(c)(3) ► 🗸
Sec	tion C. Computation of Public Su		ntage				
15 16	Public support percentage for 2008 (lin Public support percentage from 2007 S	e 8, column (f Schedule A. Pa) divided by lin	e 13, column ((f)	15 16	%
	tion D. Computation of Investmen			<u> </u>	· · · · · · · · · · · · · · · · · · ·		70
17	Investment income percentage for 2008		X	by line 13. co	olumn (fl)	17	%
18	Investment income percentage from 20			•		18	%
19a	331/3 % support tests—2008. If the orga 17 is not more than 331/3 %, check this be	anization did no	ot check the be ere. The organi	ox on line 14, a zation qualifies	as a publicly	supported organ	nization 🕨 🗌
b	33\% support tests—2007. If the organ line 18 is not more than 33\% %, check this	zation did not box and stop	check a box on here. The organ	line 14 or line nization qualifies	19a, and line 1 s as a publicly	6 is more than 3 supported orgar	3%%, and nization ► _

	orm 990 or 990-l	Z) 2008								Pa
rt IV	Suppleme Part II line	ntal Info	r mation. 7b: or Pa	Complete art III line	this pai	rt to provi	de the exp	lanation req nal informat	uired by Pa	art II, line 1 structions)
	r dit ii, iiio	114 01 1	70, 01 1	211 111, 11110	12.110	ido diliy o	trior additio	- Indianomat	1011. (000 111	<u> </u>
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SCHEDULE O (Form 990)

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Open to Public

OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

► Attach to Form 990. Name of the organization

Employer identification number 26 3416084

Nimbus Dance Works The calculation of assets at the beginning of the year was incorrect, leading to incorrect accounting of net assets at the beginning and end of the year, as well as on the balance sheet. The following lines have been changed to reflect the correct calculations: Part I, Line 19 Part I. Line 21 Part II, Line 22. Column A and B Part II, Line 25. Column A and B Part II, Line 27. Column A and B

Nimbus Dance Works Inc. 26-3416084

Form: 990 EZ Question: 16

Other Expenses Schedule

Type Marketing	<u>Total</u> \$3,479
Production supplies	\$323
Travel	\$1,542
Studio rental	\$88
Costumes	\$2,906
Other program expenses	\$332
Fundraising expense	\$1,804
Insurance	\$222
Licenses and permits	\$750
Office expense	\$1,170
Per diem	\$350
Service fee	\$1,067
Internet	\$58
Merchandise	\$88
Bank service charges	\$40
Business gift	\$21
Dues, subscriptions	\$403

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Other Program Services

<u>Date</u>	<u>Program</u>	Cost
March 1, 2009	Performance at Two Rivers Theater, Red Bank, NJ	\$500
March 29, 2009	Performance at Passage Theater, Trenton, NJ	\$1,000
April 16, 2009	Performance at Rutgers University, New Brunswick, NJ	\$1,500
May 7, 2009	Reception with company dancers, New York, NY	\$1,400
May 27, 2009	Performance at Riverside Theater, New York, NY	\$800