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Department of the Treasury

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 2008 Open to Public Inspection

Form 990 (2008)

O

Internal Revenue Service 9/01/08 8/31/09 For the 2008 calendar year, or tax year beginning and ending Please Check if applicable C Name of organization Employer identification number use IRS MANCHESTER COMMUNITY MUSIC SCHOOL Address change label or 02-0376586 Name change Doing Business As orint or type Number and street (or P O box if mail is not delivered to street address) Room/suite Telephone number Initial return See 2291 ELM STREET 603-644-4548 Specific Termination City or town, state or country, and ZIP + 4 1,207,917 G Gross receipts \$ Instruc 03104 Amended return MANCHESTER NH tions F Name and address of principal officer H(a) is this a group return for Application pending affiliates? Yes Are all affiliates included? If "No," attach a list (see instructions) X 501(c) Tax-exempt status 3) ◀ (insert no) 4947(a)(1) or 527 www.mcmusicschool.org H(c) Group exemption number ▶ Type of organization | X | Corporation | 1983 Trust Association Year of formation M State of legal domicile Part 1 Summary 1 Briefly describe the organization's mission or most significant activities TO CHANGE LIVES THROUGH THE POWER OF LEARNING, SHARING AND MAKING MUSIC. 2000 activities & Governance TO PROVIDE INSTRUCTION AND PERFORMANCE OPPORTUNITIES FOR THE AMATEUR. ASPIRING AND PROFESSIONAL MUSICIAN. Check this box ▶ if the organization discontinued its operations or disposed of more than 25% of its assets 19 Number of voting members of the governing body (Part VI, line 1a) 19 Number of independent voting members of the governing body (Part VI, line 1b) 4 5 54 Total number of employees (Part V, line 2a) 85 6 Total number of volunteers (estimate if necessary) 0 7a 7a Total gross unrelated business revenue from Part VIII, line 12, column (C) 0 b Net unrelated business taxable income from Form 990-T, line 34 7b Pnor Year **Current Year** EXPENSED ANAPPEL 273,957 319,925 8 Contributions and grants (Part VIII, line 1h) 837,988 883,340 Program service revenue (Part VIII, line 2g) 257 3,052 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 554 4,395 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 1,115,551 1,207,917 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 76,033 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) Benefits paid to or for members (Part IX, column (A), line PECEIVED

Salaries, other compensation, employee benefits (Part IX, column (A), lines 5 692,431 832,564 16a Professional fundraising fees (Part IX, column (A), 11e b Total fundraising expenses (Part IX, column (D), line 25) MAR 1 382,772 392,987 17 Other expenses (Part IX, column (A), lines 11a-11d, 11/1-24f) 18 Total expenses Add lines 13-17 (must equal Part IX, column A) 12 13 1,161,451 1,215,336 -45,900 -7,419 19 Revenue less expenses Subtract line 18 from line 12 End of Year Beginning of Year 985,335 1,011,326 20 Total assets (Part X, line 16) 950,203 954,641 21 Total liabilities (Part X, line 26) 35,132 56,685 22 Net assets or fund balances Subtract line 21 from line 20 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 Sign Here Signature of officer Date C.EO Jeanine Type or print name and title Preparer's identifying number Check if Preparer's (see instructions) Paid selfsignature 2/01/10 employed 012-40-1726 Preparer's Hessiøn & Pare, P.C. 02-0428003 EIN Firm's name (or yours **Use Only** Stark Street Phone if self-employed), 03101-1970 603-669-5477 address, and ZIP + 4 Manchester, NH Yes May the IRS discuss this return with the preparer shown above? (see instructions)

DAA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

) (Revenue \$

915, 062 (Must equal Part IX, Line 25, column (B))

including grants of \$

4e Total program service expenses > \$

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
2	complete Schedule A	1_	X	
2 3	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	,		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete	3		A.
•	Schedule C, Part II	4		х
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)	-		
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to	<u> </u>		
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete			
	Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"		1	
	complete Schedule D, Part IV	9		X
0	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
1	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D,			
	Parts VI, VIII, IX, or X as applicable	11	X.	
2	Did the organization receive an audited financial statement for the year for which it is completing this return			
_	that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	X	
3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Х	· ·
4a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		<u> </u>
þ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	445		х
_	business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		
5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	15		X
6	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	13		
Ü	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		X
7	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		X
8	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
9	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
0	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
1	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
2	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
3	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete			
	Schedule J	23		X
4a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	1	ŀ	
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions			
	24b–24d and complete Schedule K If "No," go to question 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
5a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			3.5
_	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u> </u>
þ	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified			v
	person from a prior year? If "Yes," complete Schedule L, Part I	25b		<u>X</u>
6	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or		J	v
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		<u> </u>
7	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or	27	İ	x
	substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		

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			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or			l
	employee), or an indirect business relationship through ownership of more than 35% in another entity			l
	(individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,			ĺ
	Part IV	28a		_ X_
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes,"			l
	complete Schedule L, Part IV	28b		X
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a			
	professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
	III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			1
	VI	37		X

Form 990 (2008)

Form 990 (2008) MANCHESTER COMMUNITY MUSIC SCHOOL 02-0376586 Page 5 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 1a Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? X 1c 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 54 If at least one is reported on line 2a, did the organization file all required federal employment tax returns? X 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year covered by 3a this return? X За If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O b 3ь 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 X 4a 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? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? Х 5b If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5c 6a Did the organization solicit any contributions that were not tax deductible? X 6a If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). Did the organization provide goods or services in exchange for any guid pro guo contribution of more than Х 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? X 7с If "Yes," indicate the number of Forms 8282 filed during the year 7d Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal X 7е Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? X 7f For all contributions of qualified intellectual property, did the organization file Form 8899 as required? X 7g For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? X 7h 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? X 8 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds X Did the organization make any taxable distributions under section 4966? 9a X b Did the organization make a distribution to a donor, donor advisor, or related person? 9b Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 а 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter

12a

11a

11b

Gross income from members or shareholders

amounts due or received from them)

Gross income from other sources (Do not net amounts due or paid to other sources against

If "Yes," enter the amount of tax-exempt interest received or accrued during the year

Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

orm 990 (2008)	MANCHESTER	COMMUNITY	MUSIC	SCHOOL	

02-0376586

Part VI . Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Sec	tion A. Governing Body and Management						
				-		Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe th	е					
	circumstances, processes, or changes in Schedule O. See instructions						
1a	Enter the number of voting members of the governing body	1a	19		[
b	Enter the number of voting members that are independent	1b	19				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship wi	th					
	any other officer, director, trustee, or key employee?				2		X
3	Did the organization delegate control over management duties customarily performed by or under the dir	ect				}	
	supervision of officers, directors or trustees, or key employees to a management company or other person	n?			3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 9	90 wa	s filed?		4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?				5		X
6	Does the organization have members or stockholders?				6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members	ers					
	of the governing body?				7a	X_	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons	?			7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	g					
	the year by the following						
а	The governing body?				8a	X	
b	Each committee with authority to act on behalf of the governing body?				8Ь_	Х	
9a	Does the organization have local chapters, branches, or affiliates?				9a		X
ь	If "Yes," does the organization have written policies and procedures governing the activities of such chap	ters,					
	affiliates, and branches to ensure their operations are consistent with those of the organization?				9b		<u> </u>
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organization	zations	;		}		Į
	must describe in Schedule O the process, if any, the organization uses to review the Form 990				10	Х	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reach	ed at			ł		
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O				11		_X_
Sec	tion B. Policies			_			
						Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13				12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could gi	ve					
	rise to conflicts?				12b	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				12c		X
13	Does the organization have a written whistleblower policy?				13	X	
14	Does the organization have a written document retention and destruction policy?				14	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 delibera	cision				:	
а	The organization's CEO, Executive Director, or top management official?				15a	X	
b	Other officers or key employees of the organization?				15b		X
	Describe the process in Schedule O (see instructions)						
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?				16a		X
þ	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate					1	
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safegu	ard					
	the organization's exempt status with respect to such arrangements?				16b		
Sec	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed NH						
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (50	I(c)(3):	s only)				
	available for public inspection. Indicate how you make these available. Check all that apply						
	Own website X Another's website X Upon request						
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, confl	ict of in	nterest				
	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 re	cords	of the				
	organization ► KRISTIN ROWLANDS 2291 ELM STR						
M	ANCHESTER N	H	03104	60	03-64	4 - 4	<u>548</u>
						200	12000

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 or	ganization did not comper	sate	any d	office	er, di	rector	, tru	stee, or key employee		
(A)	(B)	Average Position (check all that apply)						(D)	(E)	(F)
Name and Title	Average hours per week	Individual trustee or director		Officer	Xey employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related
		•	ee			nsated				organizations
STEVE CLAYMA	N	╁		-	-	\vdash				<u></u>
VICE PRES.	2	x		X		1 1		0	0	0
THOMAS BUCHA		1	_	<u> </u>						
TREASURER	2	x		х				0	0	Ó
SUSAN GRODMA					-			, -		
SECRETARY	2	x		x				0	0	0
	WRY	7								
PRESIDENT	2	x		X		1		o	0	0
VIRGINIA CAT	E									
PAST PRES.	2	x				Į I		0	0	0
KEVIN FITZGE	RALD									
HONORARY DIR	2	X						0	0	0
FRANK RICH							-			
DIRECTOR	2	X		L				0	0	0
MAUREEN GRAN	DE	ĺ								
DIRECTOR	2	X		L				0	0	0
KIT RENO			İ		İ					
DIRECTOR	2	X	L	<u></u>				0	0	0
DENNIS J. HA	LEY, JR.			1						
DIRECTOR	2	X						0	0	0
DONNA NICHOL		1								
DIRECTOR	2	X			<u> </u>			0	0	0
JEFF RAPSIS					İ		İ			
DIRECTOR	2	X	_		<u> </u>	\sqcup		0	0	0
KEVIN STICKN		1			ĺ	1 1	:			
DIRECTOR	2	X	_			\sqcup		0	0	0
ADELE BOUFFO		1								
DIRECTOR	2	X	<u> </u>		<u> </u>	├ ─-		0	0	0
LAURA CHEN										^
DIRECTOR	2	X	<u> </u>		<u> </u>			0	0	0
JOYCE CRAIG	1							o	0	^
DIRECTOR JANET KOLKER	2	X	<u> </u>							0
DIRECTOR		x			1			o	o	0
DIKECTOR	22	$\perp_{\mathbf{V}}$			Щ.	LL				

Part VI	Section A	A. Officers, [Directors, Trus	tees	, Ke	y En	plo	yees	, and	d Highest Compensated E	mployees (continued)				
	(A) 1		(B)	Posi	tion (C)	nat ap	nntv\	(D)	(E)	_	(F)		
, Nam	ge and title	ho	verage week	or director		Officer	Key employee	Highest compensated employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	com fr org and	other pension the aniza d rela	of r ation ne ition	
JAME		BARDI									_				
DIREC			2	X	 	<u> </u>		_		0	0	<u> </u>			
DIREC		AGAN	2	x						o	o	.[(
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2 Tota	I number of ındı	viduals (inclu	uding those in 1	a) w	ho re	ceiv	ed m	nore	_	\$100,000 in reportable con	pensation from the	<u> </u>			
orga	nization > 0													Van I	No
3 Did t	he organization	list any form	ner officer, dire	ctor c	or tru	stee	key	emp	oloye	ee, or highest compensated			\dashv	Yes	No
emp	loyee on line 1a	? If "Yes," co	omplete Schedu	ıle J	for s	uch i	ındıv	ıdual		and other compensation from			3		X
the c	organization and									complete Schedule J for su			4	Ī	Х
	idual any person liste	d on line 1a i	receive or accru	ue co	mpe	nsat	ion f	rom :	any ι	unrelated organization for			+		
	ices rendered to 3. Independent			com	plete	Sch	edul	e J fo	or su	ch person	 		5	l	X
1 Com	plete this table	for your five	highest comper	nsate	ed inc	depe	nder	nt co	ntrac	ctors that received more tha	n \$100,000 of				
com	pensation from		(A) usiness address						T	Descrip	(B) strong of services		Соп	(C)	
		reame ung pe	osiness doutes			-		_							
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2 T-,	Laurahara da da		atroptes (- 1		he:		\ <u>t</u>		L	d mare than \$100,000					
	I number of inde pensation from			ıırıg t	11056	: in 1	, wn			d more than \$100,000 in			0		
044												_	(990 /	2000

Pa	irt V	III Statem	ent of Rev	enue						
	•	*					(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
	·····							revenue	revenue	512, 513, or 514
nts	1a	Federated camp		1a						
ga	b	Membership du	es	1b						
ts, ar	C	Fundraising eve	ents	1c						
활	d	Related organiz	ations	1d						
έĒ	е	Government grants (c	contributions)	1e		12,800				
ţiş	f	All other contributions	, gifts, grants,							
혈축		and similar amounts n	not included above	1f	3	07,125				
Contributions, gifts, grants and other similar amounts	g	Noncash contributions	s included in lines 1	a-1f \$						
ರ ಕ	h	Total. Add lines	1a–1f			•	319,925			
						Busn. Code				
Program Service Revenue	2a	TUITTION	AND REGIST	PATTO	J PPPC	611600	883,340	883,340	0	
Zev.	b	TOTITON	AND REGIST	101101	N FE65	011000	003,310	003,340		
ë										
رچ	C									
Š	a							·		
La	е									
rog	f	All other program		enue						
<u> </u>	g	Total. Add lines				<u> </u>	883,340			
	3	investment inco		dividen	ds, interes	t, and				
		other similar am	•			•	257	257		
	4	Income from inv	estment of tax	k-exemp	ot bond pro	oceeds -				
	5	Royalties								·····
			(ı) Real		(n) F	ersonal				
	6a	Gross Rents		760						
	b	Less rental exps								
	С	Rental inc or (loss)		760						
	d	Net rental incom	ne or (loss)			>	760	760		
	7a	Gross amount from	(ı) Secuntı	es	(11)	Other				
		sales of assets other than inventory								
	ь	Less cost or other		_						
	_	basis & sales exps								
	С	Gain or (loss)			1					
	d	Net gain or (loss				•				
		Gross income from		onte				_		
	ou.	(not including \$	in idiididididi	J111.5						
Š			norted on line 1s							
ě		of contributions rep		-						
2		See Part IV, line 1		a				`		
Other Revenue		Less direct expe		Ь	L				1	
0		Net income or (I		-	events					
	Уa	Gross income from					İ			
		See Part IV, line 19		а						
		Less direct expe		ь						
		Net income or (I	-	ing acti	vities					
	10a	Gross sales of in	nventory, less			Į				
		returns and allow	wances	а						
	ь	Less cost of goo	ods sold	b						
	_ с	Net income or (le	oss) from sale	s of inv	entory	•				
		Miscel	laneous Revenu	е		Busn. Code				
- 1	11a	OTHER INCO	ME			900099	4,912	4,912	o	
	b	MERCHANDIS	E SALES			453220	-1,277		-1,277	
1	С									
		All other revenue	e							
		Total. Add lines				•	3,635			
	12	Total Revenue.		2a. 3. 4	. 5. 6d. 7d	· •				
	-	9c, 10c, and 11e		٠, ٦, ١	,, -		1,207,917	889,269	-1,277	0
										· · · · · · · · · · · · · · · · · · ·

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)

	All other organizations must		<u>.</u>		·
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and		· · ·		
•	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
-	the U S See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the			1	
	U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
J	trustees, and key employees	64,336		64,336	
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	686,462	628,759	57,703	
8	Pension plan contributions (include section 401(k)	- 000,102		2.7,00	
0	and section 403(b) employer contributions)				
9	Other employee benefits	21,326	16,807	4,519	<u> </u>
10	Payroll taxes	60,440	50,576	9,864	-
11	Fees for services (non-employees)	00,110	30,370	7,001	
	Management				
a b	· ·	4,840		4,840	
b	Legal	8,500		8,500	
ت ب	Accounting	0,300		0,500	
d	Lobbying Professional fundraising services See Part IV, line 17				
e	· '				
f	Investment management fees Other	9,098	4,728	4,370	·
9 42		33,215	18,562	14,653	
12	Advertising and promotion	16,732	627	16,105	
13	Office expenses	10,132	027	10,103	
14	Information technology				
15	Royalties	63,938	55,917	8,021	
16 17	Occupancy	03,330	33,31	0,021	· · · · · · · · · · · · · · · · · · ·
17	Travel				
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials				
19 20	Conferences, conventions, and meetings	46,423		46,423	
20	Interest Payments to affiliates	10,123		10,423	
21	Payments to affiliates	36,747		36,747	
22	Depreciation, depletion, and amortization	6,133	2,344	3,789	
23	Insurance	0,133	2,311	3,709	
24	Other eveness Homes eveness set	1		1	
24	Other expenses Itemize expenses not	#		1	
	covered above (Expenses grouped together and labeled miscellaneous may not exceed	#		1	
	5% of total expenses shown on line 25 below)	1		!	
_	FINANCIAL AID	83,317	83,317		
a	PRINTING AND POSTAGE	23,046	19,087	3,959	
b	PRINTING AND POSTAGE PROGRAM EXPENSE	22,646	22,646	3,333	
C	INDEPENDENT INSTR/WORKSHO	7,965	7,500	465	
d	MISCELLANEOUS	5,658	1,743	3,915	
e	, l	14,514	2,449	12,065	
f 25	All other expenses	1,215,336	915,062	300,274	
25	Total functional expenses. Add lines 1 through 24f	1,213,330	915,002	300,2/4	
26	Joint Costs. Check here Inf 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				5 990 (2028)

_P	art /	Balance Sneet									
				(A) Beginning of year		(B End of					
	1	Cash—non-interest bearing		89,732	1		37,	452			
	2	Savings and temporary cash investments		11,619				302			
	3	Pledges and grants receivable, net		15,000			10,				
	4	Accounts receivable, net		33,051	4		21,				
	5	Receivables from current and former officers, directors, tr	ustoes key	33,031	-		21,	222			
	ľ	employees, or other related parties Complete Part II of Si	•		اءا						
	6	Receivables from other disqualified persons (as defined u			5						
	ľ	4958(f)(1)) and persons described in section 4958(c)(3)(B									
		Part II of Schedule L) Complete								
'n	7	Notes and loans receivable, net			7						
et	8	Inventones for sale or use					-				
Assets	ů	Prepaid expenses and deferred charges		40,647	8		52,	145			
⋖	100	Land, buildings, and equipment cost basis	10a 930,55°		9		<u> </u>	173			
		Less accumulated depreciation Complete	10a 950,55	' -							
	"	Part VI of Schedule D	106 140,35	795,286	40-	7	90,	205			
į	44		140,33	793,260			<i>30,</i>	203			
	11	Investments—publicly traded securities			11						
	12	Investments—other securities See Part IV, line 11			12						
	13	Investments—program-related See Part IV, line 11			13						
	14	Intangible assets			14						
	15										
	16	Total assets. Add lines 1 through 15 (must equal line 34) Accounts payable and accrued expenses		29,775	17	1,0					
	17		<u>31,</u>	040							
	18	Grants payable		168,957	18		80,	012			
	19	Deferred revenue		100,957	19		ου,	012			
Liabilities	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	•								
		employees, highest compensated employees, and disqua	штео		22						
_	22	persons Complete Part II of Schedule L Secured mortgages and notes payable to unrelated third p	nartica	751,471	22	7	41,	989			
	23		<u> </u>	707							
	25	24 Unsecured notes and loans payable 24 25 Other lighting Complete Red V of Schooling D									
	26	Other liabilities Complete Part X of Schedule D Total liabilities. Add lines 17 through 25		950,203	25 26	0	54,	641			
ω.	20	Organizations that follow SFAS 117, check here	Z] and	750,205	20	······	J I ,	011			
Balances		complete lines 27 through 29, and lines 33 and 34	S and								
an	27	Unrestricted net assets		27,762	27		56,	685			
3al	28	Temporarily restricted net assets		7,370	28		50,	003			
	29	Permanently restricted net assets		7,370	29						
or Fund	23	Organizations that do not follow SFAS 117, check her	- ► □		-23			-			
T F		and complete lines 30 through 34.			1						
ō	30	Capital stock or trust principal, or current funds		i	30						
ets	31	• • •	und	·-··	31						
SS	32	Paid-in or capital surplus, or land, building, or equipment f			32						
t A	33	Retained earnings, endowment, accumulated income, or o	other lunos	35,132	33	 -	56,	685			
Net Assets	34	Total net assets or fund balances		985,335	34	1,0	30, 11	326			
	art X	Total liabilities and net assets/fund balances Financial Statements and Reporting		903,333	34 1		<u> </u>	<u> </u>			
	MIC.	t maneiar otatements and reporting					Yes	No			
1	Acc	counting method used to prepare the Form 990	ash X Accrual	Other				-110			
2a		ere the organization's financial statements compiled or revie				2a		Х			
c		ere the organization's financial statements audited by an ind	•			2b	Х				
-		Yes" to lines 2a or 2b, does the organization have a commit	•	or oversight of		<u></u> -					
		a audit, review, or compilation of its financial statements and		-		2c	х				
32		a result of a federal award, was the organization required to	·								
		Single Audit Act and OMB Circular A-133?				3a		Х			
b		Yes," did the organization undergo the required audit or aud	lits?			3b					
			· · · · · · · · · · · · · · · · · · ·				000				

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No 1545-0047 2008

> Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

MANCHESTER COMMUNITY MUSIC SCHOOL

Employer identification number 02 - 0376586

P	art I	Reas	on for Public Charity	Status (All organizations	must c	omplete	this p	art.) (s	see in	struction	ons)			
The -	orgar			it is (Please check only one org					-					
1		A church, cor	nvention of churches, or asso	ciation of churches described in	section 1	70(b)(1)(A)(i).							
2	\mathbf{X}		cribed in section 170(b)(1)(A											
3	\Box			e organization described in secti	ion 170(b)	(1)(A)(iii)	. (Attach	Schedu	ıle H)					
4	П			in conjunction with a hospital de						ne hospi	ital's name.			
	_	city, and state	•	,							,			
5		•		a college or university owned or	operated	by a gove	rnmenta	al unit de	escribed	ın				
			b)(1)(A)(iv). (Complete Part		•••	-, · J · · ·	•							
6	\Box			vernmental unit described in sec	tion 170í	6)(1)(A)(v	١.							
7	H			ubstantial part of its support from				n the ne	neral ni	iblic				
•	ш	_	section 170(b)(1)(A)(vi). (Co	•	, a gove	morna, an		ii iiic gc	nera. pe					
8	\Box			70(b)(1)(A)(vi). (Complete Part II	1.3									
9	H			more than 33 1/3 % of its suppo		ntribution	s memb	erchin f	oos and	darnee				
•	ш		, ,	ot functions—subject to certain e						-				
			· ·	•	·									
		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.)												
10	\Box		-	xclusively to test for public safety			a)(4) (se	e instru	ctions)					
11	Н	•	•	xclusively for the benefit of, to pe		-								
• •	ш	•		d organizations described in sec				•		tion				
				e type of supporting organization	•									
		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												
-	ىب			and other than one or more public						ction				
	509(a)(1) or section 509(a)(2)													
f			, ., .	mination from the IRS that it is a	Type I, Ty	pe II, or T	ype III s	upportin	g					
		-	check this box			•							\Box	
9		Since August	17, 2006, has the organization	on accepted any gift or contributi	on from a	ny of the								
•		following per	_	, ,,,										
		-		ntrols, either alone or together wi	th person:	s describe	d in (ii)					Yes	No	
				the supported organization?							11g(ı)		[
		(ii) A family	member of a person describe	ed in (i) above?							11g(n)			
		(iii) A 35% c	ontrolled entity of a person de	escribed in (i) or (ii) above?							11g(iii)		
h		Provide the f	ollowing information about th	e organizations the organization	supports									
(1)	Name	e of supported	(ii) EIN	(iii) Type of organization	(iv) is the	organization	(v) Did	ou notify	(vi)	ls the	(vii) Am	ount of		
` '		anization	(,	(described on lines 1-9	1 ' '	sted in your		nization in	organizat	100 ni noi:	supp			
				above or IRC section	governing	document?	col (ı)	of your port?	1,, ,	zed in the				
				(see instructions))	Yes	No	Yes	No	Yes	No				
					1			 -	_					
					1									
					<u> </u>									
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[nta			I	Ŧ	ŧ	: 1		i	1	: 1	1			

02-0376586

Page 2 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 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total Add lines 1-3 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 Section B. Total Support Calendar year (or fiscal year beginning in) (f) Total (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 Amounts from line 4 Gross income from interest, dividends. payments received on securities loans. rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or 10 loss from the sale of capital assets (Explain in Part IV) 11 Total support. Add lines 7 through 10 12 12 Gross receipts from related activities, etc. (see instructions) 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 14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) Public support percentage from 2007 Schedule A, Part IV-A, line 26f 15 15 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 16a and stop here. The organization qualifies as a publicly supported organization 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 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

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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02-0376586

Page 3

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)

<u> </u>	ction A. Public Support						
Ca	llendar 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 Add lines 7a and 7b						
8	Public support (Subtract line 7c from				 	 	_ -
	line 6)						
	tion B. Total Support			· · · · · · · · · · · · · · · · · · ·	·		
	lendar 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)			<i>o</i>			
13	Total support. (Add lines 9, 10c, 11,						
	and 12)	L	<u> </u>				
14	First five years. If the Form 990 is for the organization, check this box and stop here		second, third, fourt	n, or fifth tax year a	s a section 501(c)(3)	▶ [
Sec	tion C. Computation of Public Su		age				
15	Public support percentage for 2008 (line 8,			ິກ)	······································	15	%
16	Public support percentage from 2007 Scher		•			16	%
	tion D. Computation of Investme						
 17	Investment income percentage for 2008 (lin			olumn (f))		17	%
18	Investment income percentage from 2007 \$, ,	•			18	%
19a	33 1/3 % support tests—2008. If the organ			4, and line 15 is m	ore than 33 1/3 %,	and line	
	17 is not more than 33 1/3 %, check this bo	x and stop here . T	he organization qu	alifies as a publicly	supported organiza	ation	▶ [
b	33 1/3 % support tests—2007. If the organ	nization did not che	ck a box on line 14	or line 19a, and lin	e 16 is more than 3	3 1/3%, and	
	line 18 is not more than 33 1/3 %, check this	s box and stop he	re. The organization	n qualifies as a pub	licly supported orga	nization	▶
20	Private foundation If the organization did	not check a box on	line 14 10a or 10h	check this box ar	d eas instructions		▶ [

Schedule A (Form 990 or 990-EZ) 2008 MANCHESTER COMMUNITY MUSIC SCHOOL 02-0

02-0376586

Page 4

Part IV Supplemental Information. Complete this part to provide the explanation required by Part II, line 10, Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information (see instructions)

SCHEDULE D

Department of the Treasury Internal Revenue Service

Name of the organization

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

Employer identification number

MANCHESTER COMMUNITY MUSIC SCHOOL 02-0376586 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if Part I 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 Aggregate contributions to (during year) 2 Aggregate grants from (during year) Aggregate value at end of year 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? 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? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV. Part II 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 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 Total number of conservation easements 2a 2b Total acreage restricted by conservation easements 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 2dNumber of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 the taxable year ▶ __ Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and Yes enforcement of the conservation easements it holds? Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section Yes 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? 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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III 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 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 Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

		R COMMUNITY M			<u> 12 - 037658</u>			Page 2
Pa	rt III · Organizations Maintaining					r Assets (continued)	
3	Using the organization's accession and other items (check all that apply)	ecords, check any of the fol	lowing that are a sig	nıficant use	of its collection			
а	Public exhibition	d Loan o	r exchange program	s				
b	Scholarly research	e Other		-				
c	Preservation for future generations							
4	Provide a description of the organization's coll Part XIV	ections and explain how the	y further the organiz	ation's exem	ipt purpose in			
5	During the year, did the organization solicit or	receive donations of art, his	torical treasures, or	other similar		П	v П	No
-	assets to be sold to raise funds rather than to art IV Trust, Escrow and Custod				assuared "Ve		Yes 📋	NO
FB					isweied ies	יוווים או	9 9 0,	
	Part IV, line 9, or reported a							
1a	Is the organization an agent, trustee, custodia	n or other intermediary for c	ontributions or other	assets not		Г		
	included on Form 990, Part X?						Yes 📋	No
Ь	If "Yes," explain the arrangement in Part XIV a	nd complete the following to	ible		Г			
					-		Amount	
C	Beginning balance				ļ_	1c		
d	Additions during the year				ļ_	1d		
е	Distributions during the year				Ļ	1e		
f	Ending balance				L	1f		
2a	Did the organization include an amount on For	m 990, Part X, line 21?					Yes 📙	No
b	If "Yes," explain the arrangement in Part XIV							
	ert V Endowment Funds. Comp	lete if organization an	swered "Yes" to	Form 99	0, Part IV, lir	ne 10		
		(a) Current year	(b) Prior year	(c) Two yea		ee years back	(e) Four year	s back
1a	Beginning of year balance							
b	Contributions							
-	Investment earnings or losses							
ب			~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~					
ď	,							
е	Other expenditures for facilities							
_	and programs							
t	Administrative expenses			ļ			·	
g	End of year balance			l			i	
2	Provide the estimated percentage of the year	end balance held as						
а	Board designated or quasi-endowment _	%						
	Permanent endowment %							
С	Term endowment ▶ %							
3a	Are there endowment funds not in the posses	sion of the organization that	are held and admini	stered for th	е			7
	organization by						Yes	No
	(i) unrelated organizations						3a(i)	
	(ii) related organizations						3a(ii)	4
b	If "Yes" to 3a(ii), are the related organizations	listed as required on Sched	ule R?				3b	
4	Describe in Part XIV the intended uses of the	organization's endowment f	unds			<u>-</u>		
Pa	ert VI Investments—Land, Build	ings, and Equipment	t. See Form 990), Part X,	line 10			
	Description of investment	(a) Cost or other basis	(b) Cost or ot		(c) Depreciation	n	(d) Book value	•
		(investment)	basis (other)				
1a	Land		57	,023			57,	023
	Buildings			,131	40,	856	645,	275
	Leasehold improvements			,795		824		971
	Equipment						·	
	Other		17	,608	11.	672	5,	936
	I. Add lines 1a–1e (Column (d) should equal Fe	orm 990 Part X column (B)		<u>•</u>		•	790,	
		555, . 5, 65,5,77 (57					<u>_</u>	

Schedule D (Form 990) 2008 MANCHESTER COMMUNITY		02-0376586	Page
Part VII . Investments—Other Securities. See Form 99	00, Part X, line 12		
(a) Description of security or category	(b) Book value	(c) Method of	valuation
(including name of security)		Cost or end-of-yea	r market value
Financial derivatives and other financial products			
Closely-held equity interests			
Other			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. See Form 9	90, Part X, line 13		
(a) Description of investment type	(b) Book value	(c) Method of	valuation
		Cost or end-of-year	
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	•		
Part IX Other Assets. See Form 990, Part X, line 15			
(a) Description			(b) Book value
	·		
		.,	
			<u>. </u>
Total. (Column (b) should equal Form 990, Part X, col (B) line 15)	····	<u> </u>	
Part X Other Liabilities. See Form 990, Part X, line 2		<u> </u>	
(a) Description of liability	(b) Amount		
Federal income taxes	<u> </u>		
	<u> </u>		
	<u> </u>		
	<u> </u>	}	
	· · · · · · · · · · · · · · · · · · ·		
			
	-		
	<u> </u>		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	<u> </u>		
In Part XIV, provide the text of the footnote to the organization's financial state	ements that reports the organi	ization's liability for	
uncertain tax positions under FIN 48			

	edule D (Form 990) 2008 MANCHESTER COMMUNITY MUSIC SCHOOL	02-037658	6	Page 4
	art 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	1,207,917
2	`Total expenses (Form 990, Part IX, column (A), line 25)		2	1,215,336
3	Excess or (deficit) for the year Subtract line 2 from line 1		3	-7,419
4	Net unrealized gains (losses) on investments		4	
5	Donated services and use of facilities		5	24,472
6	Investment expenses		6	
7 `	· · · · · · · · · · · · · · · · · · ·		7	
8	Other (Describe in Part XIV)		8	4,500
9	Total adjustments (net) Add lines 4-8		9	28,972
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9		10	21,553
	art XII Reconciliation of Revenue per Audited Financial Statements With F	Revenue per Reti		
1	Total revenue, gains, and other support per audited financial statements	ļ	1	1,240,178
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
а	 	24 470		
b		24,472		
С		7 700		
d		7,789	_	20 261
е			2e	32,261
3	Subtract line 2e from line 1		3	1,207,917
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а				
b				
С	Add lines 4a and 4b		4c	1 000 010
	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part 1, line 12)		5	1,207,917
Pa	art XIII Reconciliation of Expenses per Audited Financial Statements With	Expenses per Re		1 010 605
1	Total expenses and losses per audited financial statements		1	1,218,625
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а				
b	· · ·			
С	 		į	
d	Other (Describe in Part XIV)	3,289		2 222
е	Add lines 2a through 2d	ļ	2e	3,289
3	Subtract line 2e from line 1	ļ	3	1,215,336
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b			
	Other (Describe in Part XIV)			
	Add lines 4a and 4b	}	4c	1 015 336
	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)		5	1,215,336
_	art XIV Supplemental Information			
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, lines 1a and 4, Part III, l	art IV, lines 1b		
	2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b			
	<u> Part XI, Line 8 - Reconcilation of Changes - Other</u>	<u> </u>		
_;	MERCHANDISE_SALES	<u> </u>		<u>3,289</u>
_:	DONATED_PIANO	\$		4,500
•	MEDGUANDIGE GALEG	÷		-3,289
-	MERCHANDISE SALES			='='
_				
_	Part XII, Line 2d - Revenue Amounts Included in Fi	inancials -	Other	
_;	MERCHANDISE_SALES	<u> </u>		<u>3,289</u>

	-0376586	Page 5
Part XIV : Supplemental Information (continued)		
_DONATED_PIANO	\$	_ 4,500
Part XIII, Line 2d - Expense Amounts Included in Final	ncialsOt	her
_MERCHANDISE_SALES	\$	<u>3,289</u>
	- 	
	 -	
	- -	
	· —	

SCHEDULE E.

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Schools

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

► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization

MANCHESTER COMMUNITY MUSIC SCHOOL

Employer identification number 02 - 0376586

		-	YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter,			
	bylaws, other governing instrument, or in a resolution of its governing body?	1	X	ļ
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its			
	brochures, catalogues, and other written communications with the public dealing with student admissions,		x	
3	programs, and scholarships? Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media	2	^	_
3	during the period of solicitation for students, or during the registration period if it has no solicitation program,			
	in a way that makes the policy known to all parts of the general community it serves? If "Yes," please			
	describe If "No," please explain	3	x	
	ALL POLICIES AND PUBLICATIONS PERTAINING TO ADMISSIONS CONTAIN			
	EQUAL OPPORTUNITY ADMISSIONS STATEMENTS.			
4	Does the organization maintain the following?		7,	
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	_4a	_X_	<u> </u>
b	Records documenting that scholarships and other financial assistance are awarded on a racially	4.	v	
	nondiscriminatory basis?	4b	<u>X</u> _	-
C	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	х	}
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	X	
u	If you answered "No" to any of the above, please explain (If you need more space, attach a separate	1,4		-
	statement)			
5	Does the organization discriminate by race in any way with respect to			
a	Students' rights or privileges?	5a	_	X
b	Admissions policies?	_5b		X
		_		_ v
С	Employment of faculty or administrative staff?	5c		X
	Sahalarahina ar athar financial againtance?	5d		x
đ	Scholarships or other financial assistance?	- Ju		-
	Educational policies?	5e		x
·	Laddational policies			
f	Use of facilities?	5f		х
g	Athletic programs?	5g		X
h	Other extracurricular activities?	5h		X
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate			
	statement)			
6-	Does the experimental receive any financial aid or appletance from a governmental agreew?	6a		х
6a	Does the organization receive any financial aid or assistance from a governmental agency? Has the organization's right to such aid ever been revoked or suspended?	6b		X
b	If you answered "Yes" to either line 6a or line 6b, please explain using an attached statement	~~		
7	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of			
-	Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	7	x	

SCHEDULE O' (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

2008
Open to Public Inspection

Name of the organization

MANCHESTER COMMUNITY MUSIC SCHOOL

Employer identification number 02-0376586

Form 990, Part VI, Line 7a - Election of Members and Their Rights
THE GOVERNANCE COMMITTEE SHALL PRESENT A SLATE OF CANDIDATES AT THE
CORPORATION'S JUNE BOARD MEETING. THE ELECTION OF DIRECTORS SHALL ALSO BE
HELD AT THE CORPORATION'S AUGUST MEETING, AND SHALL BE DECIDED BY A
MAJORITY OF THOSE MEMBERS PRESENT AND VOTING. NOTWITHSTANDING THE
FOREGOING, UPON VOTE OF THE BOARD, THE ELECTION OF THE DIRECTORS MAY BE
CONDUCTED BY MAIL BY BALLOT BEING SENT TO THE DIRECTORS THEN DULY IN OFFICE
BY MAIL AT LEAST 14 DAYS BEFORE THE ELECTION DATE, IN WHICH EVENT THE
ELECTION SHALL BE VALID ONLY IF AT LEAST 51% OF THE DIRECTORS SHALL CAST
BALLOTS ON OR BEFORE THE ELECTION DATE.

Form 990, Part VI, Line 7b - Decisions Subject to Approval of Members
DECISIONS OF THE BOARD NEED TO BE APPROVED BY A QUORUM. A QUORUM CONSISTS
OF ONE-HALF OF THE DULY APPOINTED MEMBERS OF ANY COMMITTEE, AND SHALL
CONSTITUTE A QUORUM FOR ANY REGULAR, SPECIAL MEETING OR COMMITTEE MEETING
OF THE BOARD FOR THE TRANSACTION OF BUSINESS.

Form 990, Part VI, Line 10 - Organization's Process Used to Review Form 990 A COPY OF THE 990 WAS REVIEWED AT THE BOARD MEETING.

Form 990, Part VI, Line 15a - Compensation Process for Top Official SALARY FOR THE CEO IS APPROVED BY THE BOARD OF DIRECTORS. THE PROCESS FOR DETERMINING SALARIES FOR THE CEO AND OTHER KEY EMPLOYEES IS BY REVIEW OF COMPARABLE SALARIES IN THE NON-PROFIT SECTOR IN THE NEW HAMPSHIRE REGION. SALARIES ARE ALSO DETERMINED BASED ON EXPERIENCE OF THE INDIVIDUAL.

Form **4562**

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

OMB No 1545-0172 2008

Attachment Sequence No

Name(s) shown on return

MANCHESTER COMMUNITY MUSIC SCHOOL

Identifying number 02 - 0376586

	MANCHES	TER COMMON	ILL MOSTC	PCHOOP			02-	<u>u</u> 3 /	0300
	ess or activity to which this form relates						-		
	ndirect Depreciati			-tion 470					
Pa	Election To Expension Note: If you have a				OU COD	nnlete Pa	rt I		
1	Maximum amount See the instructi				ou coi	ipiete ra	11.1	1	250,000
2		•		500				2	230,000
3	, , , , , , , , , , , , , , , , , , , ,								800,000
4								<u>3</u>	000,000
5	Dollar limitation for tax year Subtract line			ned filmo separatel	/ see insti	ructions		5	
<u> </u>	(a) Description		icas, citer o ir mari	(b) Cost (business			Elected cost		
6						1			
•						†			
7	Listed property Enter the amount fr	om line 29			7			-	
8	Total elected cost of section 179 pro		in column (c), lines	6 and 7		<u> </u>		8	
9	Tentative deduction Enter the small	•	(-/,					9	
10	Carryover of disallowed deduction for		007 Form 4562					10	"
11	Business income limitation. Enter th	-		han zero) or line	5 (see ir	structions)		11	
12	Section 179 expense deduction Ad		•	· ·		,		12	
13	Carryover of disallowed deduction to				▶ 13	T			
Note	: Do not use Part II or Part III below f								
Pa	rt II Special Depreciati	on Allowance a	nd Other Depr	eciation (Do	not in	clude liste	d prope	rty)((See instructions)
14	Special depreciation allowance for o								
	during the tax year (see instructions	.)						_14	
15	Property subject to section 168(f)(1)	election						15	
16	Other depreciation (including ACRS	5)						16	36,747
₽₽	rt III MACRS Depreciati	on (Do not inclu	ide listed prope	erty.) (See in:	structio	ns.)			
			Secti	on A					
17	MACRS deductions for assets place	ed in service in tax ye	ars beginning befo	ге 2008				17	0
18	If you are electing to group any assets pla						<u>▶</u>	İ.,_,	
	Section B—	Assets Placed in Se	rvice During 2008	Tax Year Using	the Ger	eral Depre	ciation Sy	stem	
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depri (business/investme only-see instruc	ent use	1 (0)	Convention	(f) Me	thod	(g) Depreciation deduction
19a	3-year property								
b	5-year property								
С	7-year property								
d	10-year property								
е	15-year property								
f	20-year property								
9	25-year property			25 yrs	·		S/L		
h	Residential rental			27 5 y	rs	MM	S/L		
	property			27 5 y	rs	MM	S/L		
i	Nonresidential real			39 yrs		MM_	S/L		
	property	<u> </u>	<u> </u>			MM_	S/L		
		ssets Placed in Serv	rice During 2008 T	ax Year Using t	he Alteri	native Depre	eciation S	ystem	
20a	Class life						S/L		
	12-year			12 yr			S/L		
	40-year	L	l	40 yr	s	MM	S/L		
	art IV Summary (See ins								
21	Listed property Enter amount from							21	
22	Total. Add amounts from line 12, lin	-							26 949
	Enter here and on the appropriate li			corporationsse	e instr	1		22	36,747
23	For assets shown above and placed								
	enter the portion of the basis attribu	table to section 263A	costs		23				

Form 8868 (Rev April 2009)

Application for Extension of Time To ⊦ile an Exempt Organization Return

OMB No 1545-1709

Internal Revenue	e Service	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					
If you are	filing for an Add	ditional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this f	orm)		► <u>X</u>
		ess you have already been granted an automatic 3-month extension on a previously filed			
Part I		c 3-Month Extension of Time. Only submit original (no copies needs			
		See 200 Tester and the least test the least test the least test the least test the least test the least test the least test the least test the least test the least test test the least test the least test test test test test test test			
-	requirea to file	Form 990-T and requesting an automatic 6-month extension—check this box and comple	te		. \Box
Part I only					▶ 📋
	rations (includione tax returns	ng 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an ex	dension of		
		nerally, you can electronically file Form 8868 if you want a 3-month automatic extension o			
		w (6 months for a corporation required to file Form 990-T). However, you cannot file Form			
	· · -	he additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 88			
		nsolidated Form $990 ext{-T}$ Instead, you must submit the fully completed and signed page 2 (rm	
8868 For more	e details on the	electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nong	profits		
Type or	Name of Exe	empt Organization	Employ	er identification nur	nber
print					
File by the	MANCHE	STER COMMUNITY MUSIC SCHOOL	02-0	376586	
due date for filing your		eet, and room or suite no. If a P.O. box, see instructions			
return See	2291 E	LM STREET			
instructions	City, town or	post office, state, and ZIP code. For a foreign address, see instructions			
	MANCHE	STER NH 03104			
_	return to be f	iled (file a separate application for each return)			
X Form 99	0	Form 990-T (corporation)		Form 4720	
Form 99	0-BL	Form 990-T (sec 401(a) or 408(a) trust)		Form 5227	
Form 99	0-EZ	Form 990-T (trust other than above)		Form 6069	
Form 99	0-PF	Form 1041-A		Form 8870	
The books	are in the care	of > KRISTIN ROWLANDS			
7110 0001(3	are artific care				
Telephone	No ▶	FAX No ▶			
		ot have an office or place of business in the United States, check this box			▶ □
		rn, enter the organization's four digit Group Exemption Number (GEN)	If this is		٠
for the whole g	•		nd attach		
_	•	s of all members the extension will cover			
		3-month (6 months for a corporation required to file Form 990-T) extension of time			
		, to file the exempt organization return for the organization named above. The extension	ı is		
	rganization's re				
	calendar year	or			
—	tax year beginn				
	lax year beginn	ming 37 5 27 5 5 , and chang 37 5 27 5 5			
2 If this tax	vear is for less	s than 12 months, check reason	ge in accoun	fing petiod	
2 11 (113 (8)	year is for less	S than 12 mornins, check reason	ge in accoun	ing penda	
3a If this ap	olication is for E	Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax,	· · · · · · · · · · · · · · · · · · ·	Τ	
•	•	credits See instructions	3a	 	
		Form 990-PF or 990-T, enter any refundable credits and estimated tax	- 50	 	
		e any prior year overpayment allowed as a credit	3b	 	
		line 3b from line 3a. Include your payment with this form, or, if required,	1 35		
		- · · · ·			
	See instruction	on or, if required, by using EFTPS (Electronic Federal Tax Payment	3с	•	
		ns hake an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 88		1.4	
for payment ins		iane an electronic fund withurawal with this Fulfil 6000, SEE FULLI 6405-EO and FULLI 60	, J-LU		
		ork Reduction Act Notice, see Instructions.		Form 8868 (Re	
· J. I IIVacy AL	z and raperw	ora necession not notice, see instructions.		i onii oooo (M	2000)