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Department of the Treasury Internal Revenue Service

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)

Sponsonng 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 \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.

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

OMB No 1545-1150

Open to Public Inspection

A F	or the	2009 calendar yea	ar, or tax year beginning	July 1	, 2009, and	d ending	June 30	, 20	10
B (Check if ap					Di	Employer iden	tification numbe	er
=	Address change use IRS label or Friends of Lexington Music, Art and Drama Students, Inc.							3254051	
=	Name cha	ange print o		x, if mail is not delivered to st	reet address) Ro	oom/suite E	Telephone num	ber	
=	Initial return type. Terminated See 251 Waltham Street							B61-2320	
Ħ.	Amended	Specifi return tnstruc		and ZIP + 4	· · · · · · · · · · · · · · · · · · ·	F	Group Exemp	otion	
=		on pending tions.	Lexington, MA 02421-49	903			Number ►		
	Sect	tion 501(c)(3) organ	nizations and 4947(a)(1) none		must attach	G Accountin	g Method:	Cash A	ccrual
			completed Schedule A (Form	•		Other (spe	-		
								anization is no	
ıV	Vebsit	te: ► folmads.d	ora			1		edule B (Form	
			only one) — 🗹 501(c) (3)	◀ (insert no.) 4947(a)(1) or 527	990-EZ, o			,
	Check D		anization is not a section 509(a)		· · · · · · · · · · · · · · · · · · ·	·		than \$25,000	Δ
		_	return is not required, but if the		-		-		, 7
			line 9 to determine gross receipt				<u>▶ \$</u>		33,377
	art I		xpenses, and Changes						33,377
_	1		gifts, grants, and similar am			··	. 1		24,278
	2	_	-				<u> </u>		24,270
		-	e revenue including govern				. 3		
	3	•	ies and assessments						
	4	Investment inco			1 1		. 4		2,048
	5a		rom sale of assets other th	•		·			
	b		her basis and sales expens				—		
Ф	C		om sale of assets other tha	* *		· _			
Revenue	6	•	activities (complete applicable part	• •		, check here ► L	_		
Š	а	Gross revenue (of contribut					
æ		reported on line	:1)		. 6a	6	,948		
	b	Less: direct exp	enses other than fundraisi	ng expenses	. 6b		864		
	С	Net income or (I	loss) from special events a	nd activities (Subtract li	ine 6b from line	e 6a)	. 6c		6,084
	7a	Gross sales of in	nventory, less returns and	allowances	. 7a				
	b	Less: cost of go	ods sold		. 7 b				
	С	Gross profit or (loss) from sales of inventor	y (Subtract line 7b fron	n line 7a)		. 7с		
	8	Other revenue (d	describe ► bank errors		550	-N./ED	7 8		103
	9	Total revenue.	Add lines 1, 2, 3, 4, 5c, 6c,	7c, and 8	REC	-[VEV_	9		32,513
	10	Grants and sımi	ilar amounts paid (attach so	chedule)			တ္တြ 10		25,996
	11	Benefits paid to	or for members		9 . NOA 3	_ h	Õl 44		
9	12	Salaries, other o) 11 2 12						
penses	13	Professional fee	_ 13						
	14	Occupancy, rent, utilities, and maintenance							
Щ	15	Printing, publications, postage, and shipping						 	1,906
	16	Other expenses (describe flowers, gifts, memorial donation, website, filing fees, etc.							688
	17	Total expenses. Add lines 10 through 16							28,590
m	18	Excess or (defic	cit) for the year (Subtract lin	e 17 from line 9)			. 18		3,923
ĕ	19		und balances at beginning						
488			re reported on prior year's						28,123
Net Assets	20		in net assets or fund balance						(9,007)
ž	21		ind balances at end of year				▶ 21		23.039
9	art II		eets. If Total assets on line						
			(See the instructions for			(A) Beginnii		(B) End of year	
22) Ca	eh eavinge and	investments	•				,	
23		-					28,123 22		23,039
						. ——	23		
24		ner assets (descr	ribe ▶	<u> </u>))	24		
25							28,123 25		23,039
26		otal liabilities (des	scribe ► I balances (line 27 of colur	nn (D) much name a	(inc. 01))	26		
27	NE	el assels of Tuno	i Daiances (line 27 of colur	nn 161 must aaree with	iinezii	1	28 123 27	/ I	23 039

	990-22 (2009)					raye 🚣
Par	Statement of Program Service Accom	plishments (See the instr	uctions for Part II	l.)		Expenses
Desc	t is the organization's primary exempt purpose? cribe what was achieved in carrying out the org				501(c)	red for section (3) and 501(c)(4) izations and section
	ner, describe the services provided, the number on program title.	of persons benefited, and o	other relevant info	mation for		a)(1) trusts; optional
28	Music - purchase of instruments, workshops for tead	chers, student transportation	to symphony, car	pet for		-
	music room, jazz guest artist, Nat'l Honors Orchestra	student expenses, New Eng				
	music and dance DVD/video library, Unsung Hero aw				00-	00.004
20	(Grants \$) If this amount Art/ceramics digital camera, art display panels, kiln	includes foreign grants, ch			28a	20,824
29	Arroceramics - orginal camera, art display panels, kill					
	(Grants \$) If this amount	includes foreign grants, ch	eck here	. ▶ □	29a	5,147
30	Film production – LHS Film Festival projector rental					
					00-	
24	(Grants \$) If this amount Other program services (attach schedule)	includes foreign grants, ch		. ▶ ⊔	30a	
31		includes foreign grants, ch		. ▶ □	31a	
32	Total program service expenses (add lines 28a t				32	25,996
Par	t IV List of Officers, Directors, Trustees, and Key					tions for Part IV.)
	(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 &	(e) Expense account and other allowances
Se	ee attached				-	
				_		
			· 			
					-	
						
				<u> </u>		

Part	Other Information (Note the statement requirements in the instructions for Part V.)			
			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		V
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34		~
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 why the organization did not report the income on Form 990-T.			
а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to 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	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets 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 −0-	ł		
b	Did the organization file Form 1120-POL for this year?	37b	<u> </u>	~
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a		1
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b			
39 a	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on line 9			
b	Gross receipts, included on line 9, for public use of club facilities			
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:			
	section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶			
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		,
С	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on			
_	organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3) and 501(c)(4) organizations. 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	40e		,
41	List the states with which a copy of this return is filed. ▶ Massachusetts			
42a		781-86	2-532	5
		02421	-4529	
b	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	_	Yes	
	account)?	42b	ļ <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.			
c	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c	1	1
	If "Yes," enter the name of the foreign country: ▶			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here		. 1	▶ □
	and enter the amount of tax-exempt interest received or accrued during the tax year			
			Voc	NIa
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of		Yes	INO
	Form 990-EZ	44	1	1
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	45		,
		<u> </u>		<u> </u>

Form **990-EZ** (2009)

Part VI

Part V	Section 501(c)(3) organizations and s 501(c)(3) organizations and section 494 and complete the tables for lines 50 and	17(a)(1) nonexem	l) nonexemr pt charitable	ot charitab trusts mus	le trusts only. At answer questio	!! sec ns 46	tion 3-49b)
46	Did the organization engage in direct or indirect	political campaigr	activities on	behalf of or	in opposition to		Yes	No
	candidates for public office? If "Yes," complete s	Schedule C, Part I				46		1
47	Did the organization engage in lobbying activities	s? If "Yes," comple	te Schedule C	C, Part II .		47		~
	Is the organization a school as described in section		•			48		~
	Did the organization make any transfers to an ex	•	_	anization? .		49a		
	If "Yes," was the related organization a section 5					49b		
	Complete this table for the organization's five high employees) who each received more than \$100,							d key
	employees) who each received more than \$100,0	(b) Title and aver		Compensation	(d) Contributions to		Expens	
	(a) Name and address of each employee paid more	hours per wee	k ii	oon ponozuon	employee benefit plans & deferred compensation	àc	count a	nd
None	than \$100,000	devoted to posit	ion		delerred compensation	other	allowa	nces
None								
					ŀ			
	Complete this table for the organization's five I \$100,000 of compensation from the organization (a) Name and address of each independent contractor	n. If there is none,	enter "None."				npensa	
None								
						<u> </u>		
d ·	Total number of other independent contractors e	ach receiving over	\$100,000	-				
_	Total Hamber of Other Independent contractors o	acti receiving over	Ψ100,000 .					
	Under penalties of perjury, I declare that I have examine and belief, it is true, correct, and complete. Declaration							
Sign	Sharan Lawen 11/12/1					10		• •
Here	Signature of officer Sharon Lawler, Treasurer	··-··-			Date			
	Type or print name and title		•					
Paid	Preparer's signature		l s	Check if self-	Preparer's identifying nurr	ber (Sec	 e instruct	tions)
repare	I Firm's name (or L			EIN	<u> </u>		-	
Jse Onl	ly yours if self-employed), address, and ZIP + 4 Phone no. ▶							
May the	e IRS discuss this return with the preparer shown	above? See instru	uctions			Yes		10

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No. 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

Fr	ienc	ls of Lexingt	on Music, Art a	nd Drama Students,	inc.				04	;	3254051
Pa	rt I	Reason	for Public Ch	narity Status (All or	ganizatio	ons mus	t compl	ete this	part.) S	ee instru	ctions.
The	orga	anization is n	ot a private four	dation because it is:	(For lines	1 throug	gh 11, ch	eck only	one box	i.)	
1				rches, or association			ribed in s	section 1	70(b)(1)(A)(ī).	
2	Н			on 170(b)(1)(A)(ii). (At		•					
3		-	•	nospital service organ				• •			
4	_	hospital's na	ame, city, and st	ition operated in conj ate:	·			· 			·
5			tion operated for (b)(1)(A)(iv). (Co	the benefit of a colle mplete Part II.)	ge or uni	versity ov	wned or o	operated	by a gov	emmenta	ıl unit described ın
6		A federal, st	ate, or local gov	emment or governme	ental unit	describe	d in sect	ion 170(l	b)(1)(A)(v	·).	
7				/ receives a substantia (1)(A)(vi). (Complete F		its suppo	ort from a	governn	nental un	it or from	the general public
8				d in section 170(b)(1)		Complete	Part II.)				
9		receipts from	n activities relate n gross investm	receives: (1) more the ed to its exempt func- ent income and unre a after June 30, 1975.	tions-su lated bus	bject to o	certain ex xable inc	ceptions	s, and (2) s section	no more	than 331/3 % of its
10		•	•	nd operated exclusive				•	•	(a)(A)	
11	H	_	-	and operated exclusive	-	-	-				r to carry out the
••	_	purposes of	one or more pul	blicly supported organited describes the type	nizations	describe	d in secti	on 509(a)(1) or se	ction 509	(a)(2). See section
		a 🗌 Type				e III–Fun				_	Type III-Other
е		persons other		tify that the organization managers and othe						y one or	more disqualified
f			, , , ,	a written determinati	ion from	the IRS	that it is	a Type	l, Type I	l, or Type	e III supporting
g		organization	, check this box								
J		following pe		3	,,,,,,	J			,	-	
		(i) A persor	who directly oi	indirectly controls, e	ether alo	ne or tog	ether wit	th persor	s descri	bed in (ii)	Yes No
		and (iii) b	elow, the govern	ning body of the sup	ported or	ganizatio	n? .				11g(i)
				rson described in (i) a							11g(ii)
L			•	of a person described	• • •						11g(iii)
h	Mama			ation about the suppo					6.5	1- 4	4.53.4
(1)		ne of supported (ii) EIN rganization		(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	in col (i) listed in your the organization in governing document? col. (i) of your		nization in of your	organiza (i) organ	is the tion in col. ized in the S?	(vii) Amount of support	
				(See Hishacaons))	Yes	No	Yes	No	Yes	No	
											_
					<u></u>						
		 .									

Total

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) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	21,050	16,061	33,461	25,290	24,278	120,140
	sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	5,297	0	2,334	1,095	6,948	15,674
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 through 5	26,347	16,061	35,795	26,385	31,226	135,814
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 \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)						135,814
	tion B. Total Support						
Cá	alendar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6	26,347	16,061	35,795	26,385	31,226	135,814
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar	244	862	772	224	2,048	4,150
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b	244	862	772	224	2,048	4,150
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.)	0	0	0	0	103	103
13	Total support. (Add lines 9, 10c, 11, and 12.)	26,591	16,923	36,567	26,609	33,377	140,067
14	First five years. If the Form 990 is for to organization, check this box and stop I	nere	<u>.</u>		•	ear as a sectio	````
Sec	tion C. Computation of Public Sup	port Percer	ntage				
15	Public support percentage for 2009 (line					15	97.0 %_
<u>16</u>	Public support percentage from 2008 S				<u> </u>	16	98.3 %
	tion D. Computation of Investmen					45	20
17	Investment income percentage for 2009	•	* *	-	olumn (f)) .	17	3.0 % 1.7 %
18 19a	Investment income percentage from 20 331/3 % support tests—2009. If the organization					18	
139	17 is not more than 331/4 %, check this be	ox and stop he	e re. The organiz	zation qualifies	as a publicly s	supported orga	nization 🕨 🗹
b	331/3 % support tests - 2008. If the organine 18 is not more than 331/3 %, check this	box and stop	here. The orgar	nization qualifies	s as a publicly s	supported organ	nization 🕨 🗹
<u>20</u>	Private foundation. If the organization	did not check	a box on line 1	4, 19a, or 19b,	check this bo	x and see inst	ructions 🕨 🗌

	orm 990 or 990-EZ) 2009	Page	4
Part IV	Supplemental Information. Complete this pa Part II, line 17a or 17b; and Part III, line 12. Pr	rt to provide the explanations required by Part II, line 10; rovide any other additional information. See instructions.	;
, Part III, line	e 12 Other income – bank errors		
			· - -
•••			
	·	······	
			· - -
			. .
			
·		·	
	•••••		
		•••••••••••••••••••••••••••••••••••••••	

Friends of Lexington Music, Art and Drama Students, Inc. ID # 04-3254051

Form 990-EZ for 2009 Part I, Line 10

Kiln Unsung Hero Award (music)	4,552 100
LHS Film Festival film projector rental	25
National Honors Orchestra student expensesNew England Brass concerts	2,000 2,700
Jazz guest artist	1,000
Lexington High School Lease-to-purchase band instruments	7,768
Diamond Middle School Carpet for music room	378
Harrington Elementary School Flip video camera (music)	159
Tambourines shipping refundArt display panelsDjembes (drums)	(43) 400 1,415
Fiske Elementary School	
Bowman Elementary School Digital camera (art)	195
All Elementary Schools Dance and percussion workshop open to all elementary music teachers Transportation to Lexington Symphony program for all 3rd graders DVD/video library of world music and dance	\$1,500 1,080 2,767

Friends of Lexington Music, Art and Drama Students, Inc. ID # 04-3254051

Form 990-EZ – 2009
Part III Organization's primary exempt purpose

Friends of Lexington Music, Art and Drama Students, Inc. ("FOLMADS") awards grants to support the music, visual art and drama programs of the Lexington Public Schools. Members of the Board of Directors review grant proposals from members of the faculty and make their decisions based on the advice of the coordinator of the Fine and Performing Arts Department. FOLMADS also grants scholarships to college-bound seniors from Lexington High School who intend to study music in college. This scholarship is administered by the Trustees of Public Trust, Lexington, MA.

Friends of Lexington Music, Art and Drama Students, Inc. ID # 04-3254051

Form 990-EZ for 2009 Part IV List of Officers and Directors

Name and Address	Title & Hours per week	Compensation	<u>Benefits</u>	Expense Accounts
Alice DelDonno 495 Waltham Street Lexington, MA 02421	President 5 hours	0	none	none
Elana Markovitz 20 Diana Lane Lexington, MA 02421	Vice President, Secretary 4 hours	0	none	none
Sharon Lawler 14 Childs Road Lexington, MA 02421	Treasurer 5 hours	0	none	none
Jayne Adelman 97 Cedar Street Lexington, MA 02421	Director 2 hours	0	none	none
Jean Cole 23 Whipple Road Lexington, MA 02420	Director 15 hours	0	none	none
Andy Evans 10 Scotland Road Lexington, MA 02420	Director 1 hour	0	none	none
Maggy Gorrill 11 Diana Lane Lexington, MA 02421	Director 2 hours	0	none	none
Sean Hagan 251 Waltham Street Lexington, MA 02421	Director 5 hours	0	none	none
Jeffrey Leonard 251 Waltham Street Lexington, MA 02421	Director 10 hours	0	none	none
Anne Maasland 5 McKeever Drive Lexington, MA 02420	Director 2 hours	0	none	none
Janet Tiampo 1 Oakland Street Lexington, MA 02420	Director 2 hours	0	none	none
Ruth Van Mierlo 16 Outlook Drive Lexington, MA 02421	Director 1 hour	0	none	none
Deborah Zilberman 16 Parker Street Lexington, MA 02421	Director 3 hours	0	none	none