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Form **990-EZ**

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)

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$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	For the 2009 calendar year, or tax year beginning 07/01/09, and ending 06/30/10								
		applicable	Employer identification number						
}	Address	change							
	Name cha	ange		54-1997043					
	Initial retu	um i	E	E Telephone number					
╛	Terminati	Fermination See 43100 HAY ROAD Specific							
_	Amended	J A	Instruc-	City or town, state or country, and ZIP + 4	F		up Exemption		
			tions.	ASHBURN VA 20147 ations and 4947(a)(1) nonexempt charitable trusts must attach G Accounts	<u> </u>	Number •			
	• Sect	ng met	thod	X Cash Accrual					
	a completed Schedule A (Form 990 or 990-EZ). Other (specify) ▶ Website: ▶ N/A H Check ▶ X if the organization is not								
		mpt status (che		required	to atta	ch Sch	edule B (Form 990,		
	Check]	-	anization is not a section 509(a)(3) supporting organization and its gross receipts are norm			ore than \$25,000. A		
				irn is not required, but if the organization chooses to file a return, be sure to file a complete					
L				o determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ		▶ \$	77,618		
	art I			penses, and Changes in Net Assets or Fund Balances (See the inst	ructi	ons			
	1	Contributions, g	gıfts, grar	s, and similar amounts received		1	26,467		
	2	Program serv	vice reve	nue including government fees and contracts	1	2	50,257		
	3	Membership	dues an	assessments	Ļ	3_			
	4	Investment in	ncome	1 1	Ļ	4	894		
	5a	Gross amour	nt from s	ale of assets other than inventory 5a					
	b			sis and sales expenses 5b					
_	C			f assets other than inventory (Subtract line 5b from line 5a)	, ŀ	<u>5c</u>			
Revenue	6			ties (complete applicable parts of Schedule G) If any amount is from gaming , check here cluding \$ of contributions	」				
9/9	a	Gross revenu							
œ	.	reported on li		other than fundraising expenses 6a 6b	\dashv				
	b	Net income of	6c						
(Ø, c	Gross sales	- 00						
•	7a b	Less cost of							
	E c		•	rom sales of inventory (Subtract line 7b from line 7a)		7c			
		Other revenu) [8					
	[] 9	Total revenu	ue. Add	nes 1, 2, 3, 4, 5c, 6c, 7c, and 8	•	9	77,618		
	Z 10	Grants and s	sımılar aı	nounts paid (attach schedule)		10	1,500		
	2 11	Benefits paid	to or fo	members		11			
ø	⊸ 12	Salaries, other	er comp	ensation, and employee benefits	ļ	12			
nse	13وري	Professional	fees an	other payments to independent contractors	13				
×	1214			ies, and maintenance	ŀ	14	10		
Ш	1 5	• • •		postage, and shipping	_ }	15	74 469		
	16	-		chbe SEE STATEMENT 1	-2	16	74,468		
—	17			lines 10 through 16		17	75,980 1,638		
ţ	18			the year (Subtract line 17 from line 9)		18	1,030		
Net Assets	19			lances at beginning of year (from line 27, column (A)) (must agree with		19	66,303		
ř.	20	•	•	orted on pnor year's return) assets or fund balances (attach explanation)		20	00,303		
ž	21	•		lances at end of year Combine lines 18 through 20	•	21	67,941		
F	art II			ets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead	of For				
				(See the instructions for Part II) (A) Beginning of years.			(B) End of year		
22	Cash, s	savings, and ir	nvestme			22	67,941		
		nd buildings				23			
		assets (descrit	be 🕨			24			
25	Total a	ssets		66,	303	25	67,941		
		i abilities (des)	0	26	0		
_				s (line 27 of column (B) must agree with line 21) 66,	303	27	67,941		
Fο	or Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. Form 990-EZ (2009)								

	E BRIDGE HIGH SCHOOL MUS f Program Service Accomplishments			.)		Ext	Page 2 Denses
What is the organization's primary		,			(Re	•	or section
FOSTER MUSIC EDUCATION							nd 501(c)(4)
	arrying out the organization's exempt purposes. In				org	janızatio	ns and section
manner, describe the services pro	ovided, the number of persons benefited, or other	relevant information for			49	47(a)(1)	trusts, optional
each program title					for	others)	
•	STUDENTS WITH MUSIC INSTRUCTION AND		TO				
	LIC AND COMPETE IN LOCAL, REGIONAL,	AND					
NATIONAL COMPETITIO		1 1 1 1	_	\leftarrow	ا ؞؞ ا		60 111
(Grants \$ 1	, 500) If this amount includes foreign grants,	check here			28a	-	68,441
(Grants \$) If this amount includes foreign grants,	check here	•	\Box	29a		
30	, name and a second or						
• •							
	·						
(Grants \$) If this amount includes foreign grants,	check here			30a		
31 Other program services (atta	ch schedule) .			_			
(Grants \$) If this amount includes foreign grants,	check here		LL.	31a		
244 . 74.3	enses (add lines 28a through 31a)			<u> </u>	32		68,441
Part IV List of Officers	, Directors, Trustees, and Key Employees. List	(b) Title and average	mpensated. (See t (c) Compensation		Struction Contrib		art IV) (e) Expense
	(a) Name and address	hours per week	(If not paid,	empk	oyee beni	efit plans &	account and
COMPRISATE DIVON	Z GWDUDAY	devoted to position	enter -0)	dere	rrea com	pensation	other allowances
STEPHANIE RUST 43100 HAY ROAD	ASHBURN VA 20147	PRESIDENT 1.00	,			٥	o
LYNN SALLEY	ASHBURN	SECRETARY	· · ·	 			
43100 HAY ROAD	VA 20147	1.00	٥			o	o
TONY GLASS	ASHBURN	TREASURER					
43100 HAY ROAD	VA 20147	1.00	l			0	0
MARY STAFFORD	ASHBURN	VP BAND					
43100 HAY ROAD	VA 20147	0.20				0	0
THERESA LANGEBACH	ASHBURN	VP BAND FUND	RAISING				
43100 HAY ROAD	VA 20147	0.20		<u> </u>		0	0
ROBBIE BARDENETTE	ASHBURN	VP CHORUS					
43100 HAY ROAD	VA 20147	0.20	c	1		0	0
LINDA BROTHERS	ASHBURN	VP CHORUS FU	ı				
43100 HAY ROAD	VA 20147	0.20		Ϋ—		0	0
ROSEMARIE SUMMERS	ASHBURN	VP GUITAR				•	
43100 HAY ROAD MARY MCNAMEE	VA 20147 ASHBURN	0.20 VP GUITAR FU	NDBATSTN	╬		0	0
43100 HAY ROAD	VA 20147	0.20	DRAISIN			0	o
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	990-EZ (2009) STONE BRIDGE HIGH SCHOOL MUSIC BOOS 54-1997043		P	age 3
Pe	other Information (Note the statement requirements in the instructions for Part V.)		\ <u></u>	
,, ,	Did the executation access to any order to access the control of the IDOO IS NOT BUILDING		Yes	<u>No</u>
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	22		х
34	Were any changes made to the organizing or governing documents? If "Yes," attached a conformed copy of	33		
,- -	the changes	34		х
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported	34		-
	on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.			
а			1	
u	6033(e) notice, reporting, and proxy tax requirements?	35a		х
h	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		х
37a	Enter amount of political expenditures, direct or indirect, as described in the instr.			
b	Did the organization file Form 1120-POL for this year?	37b	•	х
38a		1 2 2		
	any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a	<u> </u>	x
ь	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b			
39	Section 501(c)(7) organizations. Enter	7		
	Initiation fees and capital contributions included on line 9			
	Gross receipts, included on line 9, for public use of club facilities	7		
40a		7		
	section 4911 ▶			I
ь				l
	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		ĺ	
	Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b	1	X
С				
	organization managers or disqualified persons during the year under sections 4912,			Ī
	4955, and 4958			I
d	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c			l
	reimbursed by the organization	_		Ī
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		X
41	List the states with which a copy of this return is filed NONE			
42a	The organization's books are in care of ▶ Telephone no ▶			
	70.4			
	Located at ZIP + 4 At any time during the calendary year did the arganization have an interest up or a signature or other outborby.			
Þ			V	T No.
	over a financial account in a foreign country (such as a bank account, securities account, or other financial	42h	Yes	No X
	account)? If "Yes," enter the name of the foreign country	42b	 	^ -
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank	- [1
	and Financial Accounts.			
С		42c		x
·	if "Yes," enter the name of the foreign country	720	1	
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here	-		▶□
	and enter the amount of tax-exempt interest received or accrued during the tax year 43			- L
	40 Total and amount of the occurrence of according to the your			
			Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of			
	Form 990-EZ	44		X
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If			1

"Yes," Form 990 must be completed instead of Form 990-EZ

STO	NEBRIDGE	09/30/2011 8 11 AM									
	990-EZ (; rt VI	Section 501(c)(3) organizations and section 4947(a)(1) 501(c)(3) organizations and section 4947(a)(1) nonext and complete the tables for lines 50 and 51.	(1) nonexe	mpt char	itable tru			Page 4			
46	Did the o	organization engage in direct or indirect political campaign activities on be	ehalf of or in o	nnosition to			Yes	No			
		es for public office? If "Yes," complete Schedule C, Part I	stiall of of life	pposition to			46	X			
47		organization engage in lobbying activities? If "Yes," complete Schedule C	Part II		•		47	X			
48		the organization engage in lobbying activities? it is test complete Schedule C, Part II the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E					48	X			
49a		organization make any transfers to an exempt non-charitable related organization	•		_		49a	X			
b		was the related organization a section 527 organization?		•			49b	+-			
50		omplete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key									
	-	es) who each received more than \$100,000 of compensation from the oil				-					
		(a) Name and address of each employee paid more than \$100,000	(b) Title and aw hours per we devoted to pos	erage (c) Co ek	ompensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expe account other allow	and			
NON	3										
	••										
		•									
f	Total nu	mber of other employees paid over \$100,000	<u> </u>	<u> </u>							
	\$100,000	e this table for the organization's five highest compensated independent 0 of compensation from the organization. If there is none, enter "None." Name and address of each independent contractor paid more than \$100,000.		(b) Type o			compensation	1			
		·		<u> </u>			<u>.</u>				
	٠										
d 	Total nu	mber of other independent contractors each receiving over \$100,000	<u> </u>								
Sig	n	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									
Her	e	Signature of office Date TONY CLASS TREASURER									
		Type or print name and title			T Object of	D	Africa North	/C '			
Pai	d	Preparer's signature DAVID G. UPDEGROVE	Date 09	: /30/11	Check if self- employed		entifying Number (See instr.)				
Pre	parer's	Firm's name (or yours UPDEGROVE, COMBS & MC			- Simple Jour		4-139	1150			
	Only	f self-employed), 5 LOUDOUN STREET, SW,				Phone					

May the IRS discuss this return with the preparer shown above? See instructions

LEESBURG, VA

5 LOUDOUN STREET, SW, SUITE B

20175

► X Yes No Form **990-EZ** (2009)

703-771-1818

no 🕨

address, and ZIP + 4

ıf self-employed),

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

Employer identification number Name of the organization STONE BRIDGE HIGH SCHOOL MUSIC BOOS 54-1997043 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h c X Type III-Functionally integrated b Type II By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) No X 11g(i) and (iii) below, the governing body of the supported organization? X 11g(ii) (ii) A family member of a person described in (i) above? 11g(iii (iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization(s) (i) Name of supported (ii) EIN (iii) Type of organization (IV) Is the organization (v) Did you notify (vi) Is the (vii) Amount of (described on lines 1-9 rganization in col support in col (i) listed in your organization col (i) of your (i) organized in the above or IRC section governing document? US? (see instructions)) support? Yes No Yes Yes No STONE BRIDGE HIGH SCHOOL 77,618 54-6001395 2 X X X

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

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

10%-facts-and-circumstances test—2008. 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

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Schedule A (Form 990 or 990-EZ) 2009

18

Section A. Public Support

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.)

Calendar year (or fiscal year beginning in) ▶		(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 200	}	(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			7-1/1-					
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		. <u>-</u>						
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	:					Ì		
	amount on line 13 for the year						\longrightarrow		
C	Add lines 7a and 7b		<u> </u>			-			
8	Public support (Subtract line 7c from line 6)								
Sac	tion B. Total Support	<u> </u>	<u> </u>	<u>L</u>	1	l	<u>i</u>		—
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 200	9	(f) Total	—
9	Amounts from line 6	(4) 2000	(5) 2000	(6, 200.	(4) 2000	(0, 200	(., .		
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								
С	Add lines 10a and 10b								
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on								
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)								
13	Total support. (Add lines 9, 10c, 11, and 12)								
14	First five years. If the Form 990 is for the	organization's first,	second, third, four	th, or fifth tax year	as a section 501(c)	(3)			
_	organization, check this box and stop here								· 🔟
Sec	tion C. Computation of Public Su								
15	Public support percentage for 2009 (line 8,	• •	-	(f))		•	15		<u>%</u>
16	Public support percentage from 2008 Sche						16		<u>%</u>
	tion D. Computation of Investme						T		<u></u>
17	Investment income percentage for 2009 (In			column (f))			17		<u>%</u>
18	Investment income percentage from 2008			14 and line 45 := =	noro than 22 4/2 9/	and line	18		<u>%</u>
19a	33 1/3 % support tests—2009. If the orga 17 is not more than 33 1/3 %, check this bo								, \sqcap
b	33 1/3 % support tests—2008. If the orga		-				٠٠. اط		Ш
U	line 18 is not more than 33 1/3 %, check th						_	•	• 🗍
20	Private foundation. If the organization did	· ·	_				<u></u> .	<u></u>	• _

Schedule A (Form 990 or 990-EZ) 2009 STONE BRIDGE HIGH SCHOOL MUSIC BOOS 54-1997043

Page 4

Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

STONEBRIDGE Stone Bridge High School Music Boos 54-1997043 Federal Statements

FYE: 6/30/2010

Statement 1 - Form 990-EZ, Part I, Line 16 - Other Expenses

Description	Amount
EXPENSES	\$
BANK FEES	17
STATE CORP COMM FEE	25
OFFICE SUPPLIES	151
CHARGEBACK FEES	171
MISCELLANEOUS	616
	1,441
FUNDRAISING	7,248
COMPETIRIONS, FESTIVALS	12,305
BAND EXPENSE	11,406
CHORAL EXPENSE	7,748
GUITAR EXPENSE	482
AWARDS	3,811
INSTRUMENTS	1,619
SUPPLIES AND EQUIPMENT	4,819
VMEA	1,000
UNIFORMS, DRY CLEANING	16,159
INSTRUCTION AND STAFF	5,450
TOTAL	\$ 74,468