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Short Form
Return of Organization Exempt From Income Tax

OMB No 1545-1150

2009**Open to Public Inspection**Department of the Treasury
Internal Revenue Service

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.

A For the 2009 calendar year, or tax year beginning 7/01, 2009, and ending 6/30, 2010**B** Check if applicable:

- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Termination
- ☐ Amended return
- ☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C **PENINSULA YOUTH ORCHESTRA**
1345 MARTIN AVE
PALO ALTO, CA 94301-3050

D Employer identification number

94-3372998

E Telephone number

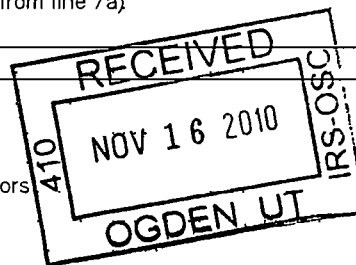
(650) 327-5983

F Group Exemption Number

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting method ☒ Cash ☐ Accrual
Other (specify) ▶**I** Website: ▶ www.peninsulayouthorchestra.org**J** Tax-exempt status (check only one) — ☒ 501(c) (3) (insert no.) ☐ 4947(a)(1) or ☐ 527**H** Check ☐ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).**K** Check ☐ if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.**L** Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ 399,392.**Part I** **Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See the instructions for Part I.)

REVENUE	1	Contributions, gifts, grants, and similar amounts received	1	74,480.
	2	Program service revenue including government fees and contracts	2	70,053.
	3	Membership dues and assessments	3	232,867.
	4	Investment income	4	815.
	5a	Gross amount from sale of assets other than inventory	5a	
	5b	Less: cost or other basis and sales expenses	5b	
	5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6	Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here ☐	6	
	6a	Gross revenue (not including \$ _____ of contributions reported on line 1)	6a	
6b	Less: direct expenses other than fundraising expenses	6b		
6c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c		
7a	Gross sales of inventory, less returns and allowances	7a		
7b	Less: cost of goods sold	7b		
7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c		
8	Other revenue (describe ▶ <u>See Statement 1</u>)	8	21,177.	
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	399,392.	
EXPENSES	10	Grants and similar amounts paid (attach schedule)	10	
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	224,489.
	13	Professional fees and other payments to independent contractors	13	1,700.
	14	Occupancy, rent, utilities, and maintenance	14	41,024.
	15	Printing, publications, postage, and shipping	15	4,314.
	16	Other expenses (describe ▶ <u>See Statement 2</u>)	16	105,007.
	17	Total expenses. Add lines 10 through 16	17	376,534.
18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	22,858.	
NET ASSETS	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	175,800.
	20	Other changes in net assets or fund balances (attach explanation)	20	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	198,658.

**Part II** **Balance Sheets.** If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ.

(See the instructions for Part II.)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	261,940.	295,537.
23 Land and buildings		
24 Other assets (describe ▶ <u>See Statement 3</u>)	12,545.	13,976.
25 Total assets	274,485.	309,513.
26 Total liabilities (describe ▶ <u>See Statement 4</u>)	98,685.	110,855.
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	175,800.	198,658.

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

Form 990-EZ (2009)

b-8 p

Part III Statement of Program Service Accomplishments (See the instructions.)What is the organization's primary exempt purpose? See Statement 5

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title.

Expenses
(Required for section 501(c)(3) and (4) organizations and section 4947(a)(1) trusts, optional for others.)28 See Statement 6(Grants \$) If this amount includes foreign grants, check here ☐

28a

29

(Grants \$) If this amount includes foreign grants, check here ☐

29a

30

(Grants \$) If this amount includes foreign grants, check here ☐

30a

31 Other program services (attach schedule)

(Grants \$) If this amount includes foreign grants, check here ☐

31a

32 Total program service expenses (add lines 28a through 31a)

32

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated (See the instrs.)

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
CINDY GALISATUS 518 HILLSIDE ROAD REDWOOD CITY, CA 94062	Vice President 2.00	0.	0.	0.
SARA SALSBURY 1345 MARTIN AVE PALO ALTO, CA 94301	President 40.00	121,920.	0.	0.
MATT BUCHWITZ 247 BILLINGSGATE LANE FOSTER CITY, CA 94404	Director 2.00	0.	0.	0.
KRITHIKA BHAT 2001 GOSSAMER AVENUE REDWOOD SHORES, CA 94065	Director 2.00	0.	0.	0.
PHIL SALSBURY 1345 MARTIN AVE PALO ALTO, CA 94301	Treasurer 10.00	0.	0.	0.
JOHN DABALDO 2000 ARROYO AVENUE SAN CARLOS, CA 94070	Director 2.00	0.	0.	0.
STEVE COOPER 3239 LA MESA DRIVE SAN CARLOS, CA 94070	Director 2.00	0.	0.	0.
MARTIN BITTNER 957 WILMINGTON WAY REDWOOD CITY, CA 94062	Chairman 2.00	0.	0.	0.
WENDY NISHIZAKI 1474 PARROTT DRIVE SAN MATEO, CA 94402	Director 2.00	0.	0.	0.

Part V Other Information (Note the statement requirements in the instrs for Part V.)

See Statement 7

	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		X
34 Were any changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the changes		X
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		
a 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?		X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?		
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		X
37a Enter amount of political expenditures, direct or indirect, as described in the instructions 37a 0.		
b Did the organization file Form 1120-POL for this year?		X
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?		X
b If 'Yes,' complete Schedule L, Part II and enter the total amount involved 38b N/A		
39 Section 501(c)(7) organizations Enter		
a Initiation fees and capital contributions included on line 9 39a N/A		
b Gross receipts, included on line 9, for public use of club facilities. 39b N/A		
40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under: section 4911 0. , section 4912 0. , section 4955 0.		
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		X
c 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 0.		
d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization 0.		
e 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 **PHIL SALSBU** Telephone no **(650) 327-5983**
 Located at **1345 MARTIN AVE PALO ALTO, CA** ZIP + 4 **94301-3050**

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 account)?
 If 'Yes,' enter the name of the foreign country

	Yes	No
42b		X
42c		X

See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of a Foreign Bank and Financial Accounts.

c At any time during the calendar year, did the organization maintain an office outside of the U.S.?
 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 and enter the amount of tax-exempt interest received or accrued during the tax year

43 ☐ N/A
N/A

44 Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ

	Yes	No
44		X
45		X

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

Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

	Yes	No
46 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		X
47 Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II		X
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E		X
49a Did the organization make any transfers to an exempt non-charitable related organization?		X
49b If 'Yes,' was the related organization a section 527 organization?		

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None.'

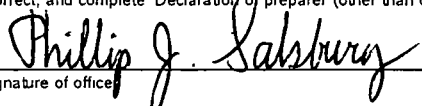
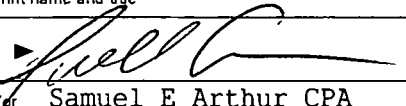
(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
Mitchell S Klein 4472 Reinhardt Dr Oakland, CA 94619	Music Director 30	58,160.	0.	0.

f Total number of other employees paid over \$100,000 0

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None.'

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
None		

d Total number of other independent contractors each receiving over \$100,000

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.			
	 Signature of officer		11/12/10 Date	
Paid Preparer's Use Only	PHIL SALSBUURY Type or print name and title		Treasurer	
	Preparer's signature 	Date 1/11/10	Check if self-employed ☒	Preparer's Identifying Number (See instructions) N/A 800234652
	Firm's name (or yours if self-employed), address, and ZIP + 4 Samuel E Arthur CPA 1602 The Alameda, Suite 104 San Jose, CA 95126		EIN N/A 942434791	Phone no (408) 971-2323

May the IRS discuss this return with the preparer shown above? See instructions ☒ Yes ☐ No

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants'.)						
2 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						
3 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.						
4 Total. Add lines 1-through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. ▶ ☐						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	%
16a 33-1/3 support test— 2009. If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization. ▶ ☐		
b 33-1/3 support test— 2008. 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— 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. ▶ ☐		
b 10%-facts-and-circumstances test— 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. ▶ ☐		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions. ▶ ☐		

BAA

Schedule A (Form 990 or 990-EZ) 2009

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal yr 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 'unusual grants'.)	282,972.	307,555.	325,506.	315,112.		1,231,145.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose	7,828.	1,288.				9,116.
3 Gross receipts from activities that are not an unrelated trade or business under section 513						0.
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
5 The value of services or facilities furnished by a governmental unit to the organization without charge						0.
6 Total. Add lines 1 through 5	290,800.	308,843.	325,506.	315,112.	0.	1,240,261.
7a Amounts included on lines 1, 2, 3 received from disqualified persons	0.	0.	0.	0.	0.	0.
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the year	0.	0.	0.	0.	0.	0.
c Add lines 7a and 7b	0.	0.	0.	0.	0.	0.
8 Public support (Subtract line 7c from line 6.)						1,240,261.

Section B. Total Support

Calendar year (or fiscal yr beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6	290,800.	308,843.	325,506.	315,112.	0.	1,240,261.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	3,225.	6,573.	5,885.	2,605.		18,288.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0.
c Add lines 10a and 10b	3,225.	6,573.	5,885.	2,605.	0.	18,288.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0.
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) See Part IV	26,572.	61,373.	46,087.	34,831.		168,863.
13 Total support. (add lns 9, 10c, 11, and 12)						1,427,412.

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here▶ ☒**Section C. Computation of Public Support Percentage**

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	%

19a 33-1/3 support tests— 2009. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶ ☐**b 33-1/3 support tests— 2008.** If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶ ☐**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

2009

Schedule A, Part IV - Supplemental Information

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PENINSULA YOUTH ORCHESTRA

94-3372998

11/01/10

09 22AM

Part III, Line 12 - Other Income

Nature and Source	2009	2008	2007	2006	2005
Gain (loss) on sale of stock		-2,394.	-103.	-866.	
Miscellaneous		37,225.	46,190.	62,239.	26,572.
Total	\$ 0.	\$ 34,831.	\$ 46,087.	\$ 61,373.	\$ 26,572.

2009

Federal Statements

Page 1

Client 004

PENINSULA YOUTH ORCHESTRA

94-3372998

11/01/10

09:22AM

Statement 1
Form 990-EZ, Part I, Line 8
Other Revenue

Tour & camp income (net)		\$	21,177.
Total		\$	<u>21,177.</u>

Statement 2
Form 990-EZ, Part I, Line 16
Other Expenses

Bank charges	\$	356.
Conferences, Conventions, and Meetings		378.
Depreciation		5,157.
Dues		300.
Equipment lease		2,908.
Equipment repairs/maint		2,193.
Equipment supplies		1,410.
Hospitality		341.
Insurance		9,052.
Music supplies		9,763.
Office Expenses		682.
Office supplies		4,257.
Outside music professionals		64,776.
Photo & recording		1,200.
Publicity		700.
Telephone		1,534.
Total	\$	<u>105,007.</u>

Statement 3
Form 990-EZ, Part II, Line 24
Other Assets

	<u>Beginning</u>	<u>Ending</u>
Furniture and Fixtures	\$ 0.	\$ 1,389.
Machinery and Equipment	12,545.	12,587.
Total	<u>\$ 12,545.</u>	<u>\$ 13,976.</u>

Statement 4
Form 990-EZ, Part II, Line 26
Total Liabilities

	<u>Beginning</u>	<u>Ending</u>
Deferred Revenue	\$ 98,685.	\$ 110,855.
Total	<u>\$ 98,685.</u>	<u>\$ 110,855.</u>

Client 004

PENINSULA YOUTH ORCHESTRA

94-3372998

11/01/10

09 22AM

Statement 5
Form 990-EZ, Part III
Organization's Primary Exempt Purpose

The primary purpose of the organization is to provide musical and orchestral education for youths age 18 and under, to bring student instrumentalists together to learn, rehearse, and perform symphonic music in an educational setting.

Statement 6
Form 990-EZ, Part III, Line 28
Statement of Program Service Accomplishments

During the current 2010 fiscal year the organization maintained its membership at over 430 young musicians from a variety of Bay Area communities and cultural backgrounds. Organized into six different orchestras, arranged according to age, interest, and musical ability, the members rehearsed weekly and performed for the community in a variety of concerts. They gave 8 major concerts and 2 chamber music concerts during the regular season, conducted a summer music camp, and conducted a one week concert tour of Southern California (performing in the Walt Disney Concert Hall in downtown Los Angeles).

Statement 7
Form 990-EZ, Part V
Regarding Transfers Associated with Personal Benefit Contracts

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

No

6/30/10

2009 Federal Book Depreciation Schedule

Page 1

Client 004

PENINSULA YOUTH ORCHESTRA

94-3372998

11/01/10

09 22AM

No.	Description	Date Acquired	Date Sold	Cost/ Basis	Bus Pct.	Cur 179 Bonus	Special Depr Allow.	Prior 179/ Bonus/ Sp. Depr.	Prior Dec Bal Depr.	Salvage /Basis Reductn.	Depr Basis	Prior Depr.	Method	Life	Rate	Current Depr.
Form 990/990-PF																
Furniture and Fixtures																
31	Desk and bookcase	10/25/09		761							761		200DB HY	5	20000	152
34	Kiang cello podium	6/25/10		975							975		200DB HY	5	20000	195
Total Furniture and Fixtures																347
Machinery and Equipment																
17	HP printer	8/05/05		541							541	447	200DB HY	5	11520	62
18	Apple Mini Mac	8/06/05		1,515							1,515	1,254	200DB HY	5	11520	175
20	Cao Viola	7/01/06		520							520	321	200DB MQ	7	10930	57
21	Viola and bow	4/09/07		3,366							3,366	1,709	200DB MQ	7	14060	473
22	Pro Tools editing equip	11/16/07		757							757	313	200DB MQ	7	16760	127
23	Xerox color printer	2/07/08		2,380							2,380	862	200DB MQ	7	18220	434
24	Scott Cao viola	4/04/08		473							473	147	200DB MQ	7	19680	93
25	Conn French horn	5/06/08		3,303							3,303	1,028	200DB MQ	7	19680	650
26	Scott Cao viola	6/28/08		459							459	142	200DB MQ	7	19680	90
27	String Bass	7/19/08		598							598	85	200DB HY	7	24490	146
28	Alto flute	8/25/08		1,700							1,700	243	200DB HY	7	24490	416
29	Tympani covers	5/21/09		702							702	100	200DB HY	7	24490	172
30	String Bass	9/12/09		883							883		200DB HY	7	14290	126
32	Minolta 551 copier	12/23/09		3,496							3,496		200DB HY	7	14290	500
33	15" viola	6/03/10		473							473		200DB HY	7	14290	68
Total Machinery and Equipment																3,589

6/30/10

2009 Federal Book Depreciation Schedule

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Client 004

PENINSULA YOUTH ORCHESTRA

94-3372998

11/01/10

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No.	Description	Date Acquired	Date Sold	Cost/ Basis	Bus Pct	Cur 179 Bonus	Special Depr Allow	Prior 179/ Bonus/ Sp. Depr	Prior Dec Bal Depr	Salvage /Basis Reductn	Depr Basis	Prior Depr	Method	Life	Rate	Current Depr
Music equipment																
1	Music stands	7/01/00		697				237			460		460	200DB HY	7	0
2	Musician chairs	7/01/00		727				248			479		479	200DB HY	7	0
3	English horn	7/01/00		3,500				1,143			2,357		2,357	200DB HY	7	0
4	Violin	7/01/00		555				119			436		436	200DB HY	7	0
5	Viola	7/01/00		1,624				232			1,392		1,392	S/L HY	5	0
6	Percussion cabinet	7/01/00		1,980				212			1,768		1,768	200DB HY	7	0
7	Violin	7/01/00		1,689				153			1,536		1,536	200DB HY	7	0
8	Contrabassoon	7/01/00		13,500				241			13,259		13,259	200DB HY	7	0
10	Tympani & Cabinets	6/30/02		12,000							12,000		12,000	200DB MQ	7	0
11	Bass trombone	1/16/02		1,200							1,200		1,200	200DB MQ	7	0
12	String bass	12/04/03		2,500							2,500		2,500	200DB HY	7	223
13	String bass (2)	9/09/04		1,870							1,870		1,453	200DB HY	7	167
14	Xylophone	11/07/04		1,794							1,794		1,393	200DB HY	7	160
15	Bass clarinet	12/29/04		6,443							6,443		5,006	200DB HY	7	575
16	Viola	3/23/05		503							503		391	200DB HY	7	45
19	Cao Viola	9/15/05		569							569		391	200DB HY	7	51
Total Music equipment				51,151		0	0	2,585	0	48,566	45,685					1,221
Organization costs																
9	Organization costs	7/01/00		3,528							3,528		3,528	S/L	5	0
Total Organization costs				3,528		0	0	0	0	0	3,528		3,528			0
Total Depreciation				77,581		0	0	2,585	0	74,996	55,964					5,157

2009.

Federal Supplemental Information

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OTHER REVENUE: TOUR AND CAMP INCOME

TOTAL COLLECTED FOR 2009, 2010 TOURS PLUS 2009 SUMMER CAMP \$93,945

TOTAL EXPENSES PAID OUT 72,368

EXCESS OF RECEIPTS OVER EXPENSES \$21,177