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Form **990**

Return of Organization Exempt From Income Tax

2009

OMB No 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) Open to Public Department of the Treasury Internal Revenue Service The organization may have to use a copy of this return to satisfy state reporting requirements. Inspection 2009, and ending For the 2009 calendar year, or tax year beginning August 1 20 10 July 31 C Name of organization Midland High School Music Parents Association Employer identification number Please use IRS B Check if applicable Doing Business As Midland High School Music Parents Association 6076925 Address change Inhel of print or Number and street (or P.O box if mall is not delivered to street address) Telephone number ☐ Name change 1301 Eastlawn Drive (989) 832-5041 Initial return Spacific City or town, state or country, and ZIP + 4 ☐ Terminated Midland, MI 48642-5746 G Gross receipts \$ 65.626 Amended return F Name and address of principal officer Mr. Gregg Young, president H(a) is this a group return for affiliates? ☐ Yes No Application pending address: same as above H(b) Are all affiliates included? ☐Yes ☐ No Tax-exempt status 1 4947(a)(1) or □ 527 If "No," attach a list (see instructions) Website: ▶ www.mhsmusicparents.com H(c) Group exemption number Form of organization 🗹 Corporation 🔲 Trust 🔲 Association 🔲 Other 🕨 L Year of formation 2001 M State of legal domicile MI Part I Summary Briefly describe the organization's mission or most significant activities: MHSMPA supports fundraising activities that allow for purchase of instruments, funding large educational trips; organizing annual talent show, etc beyond what public funding would permit. Parents also volunteer in a wide variety of activities to support the music program throught this organization. As a result, over 350 students receive a higher quality music education. Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 18 Number of voting members of the governing body (Part VI, line 1a) 4 18 Number of independent voting members of the governing body (Part VI, line 1b) 5 Total number of employees (Part V, line 2a) Total number of volunteers (estimate if necessary) 6 300 7a Total gross unrelated business revenue from Part VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990-T, line 34, **Current Year** 5.391 2,575 Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g) qn 58 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 33,161 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 42,904 11 Total revenue-add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 38,642 45,537 20,429 51,578 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). Benefits paid to or for members (Part IX, column (A), line 4) 14 15 Calaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a b 3,666 1,230 17 18 24,095 52.808 enue less expenses. Subtract line 18 from line 12 19 14,547 -7,271 Beginning of Current Year End of Year 44,516 37,542 Total liabilities (Part X, line 26) Net assets or fund balances. Subtract line 21 from line 20 22 Signature Block Part II Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge rue, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sian Here ignature of office REASURER EUEN Type or print name and title Date Check if Preparer's identifying number Preparer's signature (see instructions) employed ▶ □ Paid Preparer's Firm's name (or yours FIN Use Only if self-employed), address, and ZIP + 4 Phone no ► (

Par	t III Statement of Program	Service Accomplishments	
1	promotes volunteerism so that	ne definition of IRS section 501(c)(3). Min 350 music students are able to experie	HSMPA supports fundraising activities and nce a higher quality education and
2	Did the organization undertake a the prior Form 990 or 990-EZ? If "Yes," describe these new ser	any significant program services during the	e year which were not listed on
3	Did the organization cease cond services?	ucting, or make significant changes in ho	w rt conducts, any program
4	Section 501(c)(3) and 501(c)(4) c	chievements for each of the organization's	s three largest program services by expenses. are required to report the amount of grants and ogram service reported.
4a	The association provided fund (\$10,163) and Orchestra trip to	s for major trips including the Meistersi Detroit (\$5,264).) (Revenue \$1,262) ngers (MHS Advanced Choir) trip to Chicago
		•••••••••••••••••••••••••••••••••••••••	
4b	The association purchased ins purchases included Bass and	truments or other related equipment for French Bow (\$1,338), mallets (\$562), Co) (Revenue \$ 187) use within the music program. Significant ncert tuba (\$5,328), Euphonium (\$4,095)
4b	The association purchased ins purchases included Bass and and 2 French Horns (\$5,238)	truments or other related equipment for French Bow (\$1,338), mallets (\$562), Co	use within the music program. Significant
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4c	The association purchased ins purchases included Bass and and 2 French Horns (\$5,238) (Code:	truments or other related equipment for French Bow (\$1,338), mallets (\$562), Co 5,312 including grants of \$ mental instruction due to a lack of scho support the positions of 2 people provi	use within the music program. Significant ncert tuba (\$5,328), Euphonium (\$4,095) Output
4c	The association purchased ins purchases included Bass and and 2 French Horns (\$5,238) (Code:) (Expenses \$ The association paid for instrust, \$4,162 to the school system to the	5,312 including grants of \$ mental instruction due to a lack of scho support the positions of 2 people provi	use within the music program. Significant ncert tuba (\$5,328), Euphonium (\$4,095) Output

Par	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," complete Schedule A	1	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		✓_
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	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		1
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		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		✓
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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," complete Schedule D, Part IV	9		1
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable	11		1
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI			
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		1	
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.	!		
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		1
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	142	\vdash	1
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		-
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II.	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, tines 1c and 8a? If "Yes," complete Schedule G, Part II	18		
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III.	19		/
<u>20</u>	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	L	▼

Checklist of Required Schedules (continued)			
		Yes	No
in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		✓
Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	1	
Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		✓_
Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		√
	24b		✓
to defease any tax-exempt bonds?	24c		√
	24d 25a		✓
Is the organization 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	25b		√
Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		✓
Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III.	27		√
Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		√
An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		✓
Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	29		√
Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			▼
Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			y
Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			√
Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,	34		1
Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete	35	·	✓
Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	36		✓
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,	37		√
Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O.	38		
	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II. Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III. Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization securent and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25 Did the organization inverted any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I is the organization ware that it engaged in an excess benefit transaction with a disqualified person outstanding as of the end of the organization and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 If "Yes," complete Schedule L, Part II is the organization provide a grant or other assistance to an officer, director, trustee, key employee, highly compensated amployee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II I is the organization provide a grant or other assistance to an officer, director, trustee, key employee, or disqualified person outstanding as of the end of the organization is tax year? If	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 17 if "Yes," complete Schedule I, Parts I and II. 21 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 21 if "Yes," complete Schedule I, Parts I and III. 22 Did the organization answer "Yes" to Part VIII, Section A, line 3, 4, or 5 about compensation of the organization scurrent and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J. 23 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 240 through 24d and complete Schedule K. If "No," go to line 25. 24 Did the organization maintain an escrew account other than a refunding escrow at any time during the year? 25 Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 26 Section 501(c)(3) and 501(c)(4) organizations of the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I II. 25 Is the organization aware that it engaged in an excess benefit transaction with a disqualified person outstanding as of the end of the organization engage in an excess benefit transaction with a disqualified person outstanding as of the end of the organization stay service on any of the organization prior Forms 900 or 930-122? If "Yes," complete Schedule L, Part II II. 27 Was a loan to the y a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization is tax year? If "Yes," complete Schedule L, Part IV II. 28 Is a complete Schedule L, Part III. 29 Is a current or former officer, director,	Did the organization report more than \$5,000 of grants and other assistance to governments and organization in the United States on Part IX, column (A), line 1? if "Yes," complete Schedule I, Parts I and II. Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2! if "Yes," complete Schedule I, Parts I and III. Did the organization answer "Yes" to Part VIII, Section A, line 3, 4, or 5 about compensation of the organization current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100.000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 240 through 24d and complete Schedule K. If "No," go to line 25. Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year of defease any tax-exempt bonds? Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24d brough 24d and complete Schedule I, Part II is the organization aware that the graped on an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I, Part II is the organization aware that it engaged in an excess benefit transaction with a disqualified person outstanding as of the end of the organization site and the transaction and the part of the organization aware that it engaged in an excess benefit transaction with a disqualified person outstanding as of the end of the organization aware that the graped and any of the organization species of the organization provide a grant or other assistance to an officer, director, trustee, or key employee? If "Yes," complete Schedule I, Part IV Was the organization exceed the provide

Par	t V 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			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0]	٠.	
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	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 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	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)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by	3a		1
h	this return?	3b		•
	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)?	4a		✓
b	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?	5a		✓
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a	✓	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	✓	
С		7c		1
а	required to file Form 8282?			
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	Ì		
	benefit contract?	7e	ļ	✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	ļ	√
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? .	7g	<u> </u>	
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	7h		
8	required?	<u> </u>		
•	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	L		
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		ļ
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b_	\vdash	
10	Section 501(c)(7) organizations. Enter:			
	initiation loss and capital contributions included on late vin, line 12	1	1	
11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter:	1		
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against	1		
	amounts due or received from them.)	<u> </u>		ļ
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 12b	12a	<u> </u>	<u> </u>

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sec	don A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body			ŀ
b	Enter the number of voting members that are independent		-	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2	<u> </u>	/
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		V
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	<u> </u>	1
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5	 -	1
6	Does the organization have members or stockholders?	6	-	-
7a	Does the organization have members, stockholders, or other persons who may elect one or more members	_		,
	of the governing body?	7a		/
_	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	ļ	· •
8	Did the organization contemporaneously document the meetings held or written actions undertaken during		ŀ	
_	the year by the following:	8a	-	 -
	The governing body?	8b	\ <u> </u>	1
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached	UD	 	-
•	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9a		/
Sec	tion B. Policies (This Section B requests information about policies not required by the Inte-		1	
	enue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		1
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			
	form?	11		✓
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		✓
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	nse to conflicts?	12b		L
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		
13	Does the organization have a written whistleblower policy?	13		V
14	Does the organization have a written document retention and destruction policy?	14		✓
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 decision?			
	The organization's CEO, Executive Director, or top management official	15a		1
b	Other officers or key employees of the organization	15b		1
	If "Yes" to line 15a or 15b, 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		, ,
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			
	the organization's exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure	100		
17	List the states with which a copy of this Form 990 is required to be filed ▶ Michigan			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c	7(3)~	onka	
	available for public inspection. Indicate how you make these available. Check all that apply.	7(0)5	orny)	
	☐ Own website ☐ Another's website ☑ Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	of int	orpet	
.5	policy, and financial statements available to the public.	J. 1110	JI OG	
20	State the name, physical address, and telephone number of the person who possesses the books and reco	rds o	f the	
	organization: Steven P. Stanley 4201 Congress Dr. Midland. MI 48642 (989)832-5041	0		

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

☑ Check this box if the organization did not compensate any current officer, director, or trustee.

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. 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. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees. See instructions for definition of "key employee"
- 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

(A)	(B)	(c)				(D)	(E)	(F)		
Name and Title	Average	Positi	on (c	checl	k all	that ap	ply)	Reportable	Reportable	Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Greg Young, President c/o M.H.S. 1301 Eastlawn Drive, Midland, MI	12			1				0	0	0
Mark & Dorothy Marinan co Vice President c/o M.H.S. 1301 Eastlawn Drive, Midland, MI	10			1				0	0	0
Steve & Julie Stanley co Treasurer c/o M.H.S. 1301 Eastlawn Drive, Midland, MI	8			1				0	0	0
Kathy Brabaw Secretary c/o M.H.S. 1301 Eastlawn Drive, Midland, MI	3			1		ļ 1		0	0	0
Chris & Nancy Peeler band rep c/o M.H.S. 1301 Eastlawn Drive, Midland, MI	3	1	_					0	0	0
Patti LaChance band rep c/o M.H.S. 1301 Eastlawn Drive, Midland, MI	3	1						0	0	0
Dory Reed band rep c/o M.H.S. 1301 Eastlawn Drive, Midland, MI	3	1						0	0	0
Laurel Bucci band rep c/o M.H.S. 1301 Eastlawn Drive, Midland, MI	3	1						0	0	0
Chris Powell vocal rep c/o M.H.S. 1301 Eastlawn Drive, Midland, MI	3	<u>/</u>						0	0	0
Lisa Ranger vocal rep c/o M.H.S. 1301 Eastlawn Drive, Midland, MI	3	1						0	0	0
Carrie Gum orchestra rep c/o M.H.S. 1301 Eastlawn Drive, Midland, MI	3	1						0	0	0
Cathy Poulos orchestra rep c/o M.H.S. 1301 Eastlawn Drive, Midland, MI	3	1			_		_	0	0	0
There are also 3 MHS music directors, paid										
employees of Midland Public Schools, who receive no compensation from MHSMPA, but		1						0	0	0
are on the executive board per our by-laws.										
Total 18 executive board members										

Part VII

(A)	(B)	1_	_		G)			(D)	(E)	1	(F)	
Name and title	Average hours per week	Individual trustee or director	nstitutional trustee	Officer	a Key employee	Highest compensated amployee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	con f or ar	stimate mount other ipensati rom th ganizati id relati janizati	of tion ie tion ted
											٠	
								·				
		_										··-·
1b Total			_			<u> </u>	•					
Total number of individuals (including but in reportable compensation from the organization)		to the	ose	liste	ed a	bove) wi	no received mo	ore than \$100,0	00 in		
									· · · · · · · · · · · · · · · · · · ·		Yes	No
3 Did the organization list any former office	er director	or tn	isto	ام	ων.	empl	างอ	or bigheet c	ompensated			
employee on line 1a? If "Yes," complete S										3		1
4 For any individual listed on line 1a, is the s		_										
the organization and related organizations								•				
ındıvıdual	·									4		✓
5 Did any person listed on line 1a receive services rendered to the organization? If "	or accrue Yes," comp	comp plete :	oens S <i>ch</i>	satıd edu	on f le J	rom a	any uch	unrelated org	anization for	5		1
Section B. Independent Contractors												
 Complete this table for your five highest compensation from the organization. 	ompensate	d ind	epe	nde	nt c	ontra	cto	rs that receive	d more than \$1	00,00) of	
(A) Name and business add	tress							(B) Description of s	ervices	(Compe		n
None							ļ					
2 Total number of independent contractors (i	neluding b	rt not	lim	itod	to t	hose	lice	od abovo) urbo	raceived		,,,	
more than \$100,000 in compensation from							not	above, will	TOOGIVEU	,- , ,	ξ.	•

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Part	VII	Statement of Revenue				<u> </u>
		-	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
gifts, grants ar amounts	b b	Fundraising events 1c	0 0 0 0			
Contributions, gifts, grants and other similar amounts	e f g	Government grants (contributions). All other contributions, grifts, grants, and similar amounts not included above Noncash contributions included in lines 1a-1f \$				
	_ n	Total. Add lines 1a-1f Business Code	1,784			
Program Service Revenue	2a b c d			1		
Jram	e	All other program service revenue .				
Prog	g	Total. Add lines 2a–2f	0			
	3 4 5	Investment income (including dividends, interest, and other similar amounts)	58	0	0	58
	6a b c	Gross Rents			-	
		Ret rental income or (loss)	0	0	0	0
	С	Less: cost or other basis and sales expenses . Gain or (loss)		. 0	0	0
Revenue		Gross income from fundraising events (not including \$				
Other Re	b	See Part IV, line 18 a 63,87 Less: direct expenses b 20,09 Net income or (loss) from fundraising events •	0	43,784		
	l	Gross income from gaming activities See Part IV, line 19				
	С	Less: direct expenses b Net income or (loss) from gaming activities	0			
		Gross sales of inventory, less returns and allowances a Less: cost of goods sold b	-			
		Net income or (loss) from sales of inventory	0			
	11a b					
		All other revenue				
		Total. Add lines 11a–11d	45,626	43,784		

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must complete colu	umn (A) but are not	t required to comp	lete columns (B),	(C), and (D).
	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	51,578	51,578		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
6 7	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)			-	
8	Pension plan contributions (include section 401(k)				
U	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management				
	Legal	20		20	
C	Accounting				·
	Lobbying	-			
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
	Other				
	Advertising and promotion	85		85	
13	Office expenses	178		178	
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel ,				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	275	275		
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а	Flowers/Gifts	547		547	· - · · ·
b	Honorariums	125		125	
c					
d				1	
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	52,808	51,853	955	
26	Joint costs. Check here ▶ ☐ if 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				

Pa	rt X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	44,516	1	37,542
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key		- 1	
		employees, and highest compensated employees. Complete Part II of			
		Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section		1	į
	_	4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete			
		Part II of Schedule L		6	
ţ	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
ä	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or 10a			
		other basis. Complete Part VI of Schedule D			
	ь	Less: accumulated depreciation		10c	
	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	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	44,516	16	37,542
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
98	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key			
ap		employees, highest compensated employees, and disqualified			
		persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities. Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25		26	
Balances		Organizations that follow SFAS 117, check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.			
lan	27	Unrestricted net assets		27	
Ba	28	Temporarily restricted net assets		28	·
힏	29	Permanently restricted net assets		29	
Net Assets or Fund		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.			
ţ	30	Capital stock or trust principal, or current funds		30	
Se	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
¥	32	Retained earnings, endowment, accumulated income, or other funds	44,516	32	37,542
ě	33	Total net assets or fund balances	44,516	33	37,542
_	34	Total liabilities and net assets/fund balances	44,516	34	37,542

Pa	rt XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990:			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		<u> </u>
þ	Were the organization's financial statements audited by an independent accountant?	2b		<u> </u>
	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of	1		
-	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			1
	issued on a consolidated basis, separate basis, or both:	l		
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			!
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	3a		1
þ	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		

Form **990** (2009)

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.

OMB No 1545-0047
2009
Open to Public

Department of the Treasury ▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions. Inspection Internal Revenue Service Employer identification number Midland High School Music Parents Association 6076925 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). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) ☐ A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 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 5 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). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 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.) 8 An organization that normally receives: (1) more than 331/3 % of its support from contributions, membership fees, and gross 9 receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 331/2 % 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. a 🗌 Type I c Type III-Functionally integrated **b** Type II **d** Type III-Other e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disgualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type II, Type III, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) 11g(i) and (iii) below, the governing body of the supported organization? 11g(ii) (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s) (iv) is the organization (i) Name of supported (ii) EIN (iii) Type of organization (v) Did you notify (vii) Amount of in col. (i) listed in your organization (described on lines 1-9 the organization in organization in col above or IRC section. governing document? col. (i) of your (i) organized in the U.S ? (see instructions)) support? Yes Nο No Yes N/A

Total

Pai	(Complete only if you chec					and 1	70(b)(1	I)(A)(vi)
	tion A. Public Support							
Ca	lendar 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.")							
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4	Total. Add lines 1 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.			_		T		N/A
	tion B. Total Support							
Ca	lendar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e)	2009	(f) Total
7	Amounts from line 4			<u>-</u>		ļ <u> </u>		
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 carned 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 .	l	<u> </u>		<u> </u>	ļ		N/A
12	Gross receipts from related activities, etc.					12		N/A
13	First five years. If the Form 990 is for organization, check this box and stop he	re	<u> </u>	id, third, fourth	, or fifth tax y	ear as	a sectio	on 501(c)(3)
	tion C. Computation of Public Su							
14	Public support percentage for 2009 (line		•			14		<u>%</u>
15	Public support percentage from 2008 Scl					15		<u>%</u>
16a	33% % support test—2009. If the organization qualifies	as a publicly	supported organ	nization , ,				▶ [
b	33% % support test—2008. If the organization quality box and stop here. The organization quality				and line 15 is	33%%	or more,	check this
17a	10%-facts-and-circumstances test—20 more, and if the organization meets the "facts-and-circum organization meets the "facts-and-circum	acts-and-circur	mstances" test,	check this box	and stop here.	Explair	ın Part	IV how the
b 18	10%-facts-and-circumstances test—2008 more, and if the organization meets the "facts-and-circumstator meets the "facts-and-circumstator" private foundation. If the organization did	acts-and-circum inces" test The	nstances" test, c organization qua	theck this box a diffes as a public	and stop here . By supported or	Explain ganizati	in Part I	N how the

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

	(Complete only if you checks	d the box of	I IIIe 9 OI Fa	11.)							
	tion A. Public Support	4 > 0005	#1 000C	4-3 000-7	4 B 0000	410000	(D. T. t.)				
Ca	llendar 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")	1,616	1,776	2,799	5,391	2,575	14,157				
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	62,878	57,273	59,046	53,066	63,051	295,314				
3	Gross receipts from activities that are not an unrelated trade or business under section 513	0	0	0	0	0	0				
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0				
5	The value of services or facilities furnished by a governmental unit to the	0	0	0	0	0	n				
_	organization without charge	64,494	59,049	61,845	58,457	65,626	295,314				
6	Total. Add lines 1 through 5	54,454	50,040	01,040	50,401_	55,525					
7a	Amounts included on lines 1, 2, and 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 \$5,000 or 1% of the		 	,							
	amount on line 13 for the year	0	0	0	0	0	0				
с 8	Add lines 7a and 7b	0	0	0	0	0	0				
	line 6.)										
	Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total										
		(a) 2005 64,494	59,049	61,845	58,457	(e) 2009 65,626	(f) Total 295,314				
9	Amounts from line 6	64,454	55,045	01,045	30,437	03,020	293,314				
iua	payments received on securities loans, rents, royalties and income from similar sources	73	93	93	90	58	407				
b	Unrelated business taxable income (less										
	section 511 taxes) from businesses acquired after June 30, 1975	o	0	o	0	o					
С	Add lines 10a and 10b	73	93	93	90	58	407				
11	Net income from unrelated business										
•	activities not included in line 10b, whether or not the business is regularly carried on	0	0	0	0	0	0				
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	0	0	0	. 0	0	0				
13	Total support. (Add lines 9, 10c, 11,						295,721				
14	First five years. If the Form 990 is for organization, check this box and stop				-		n 501(c)(3)				
organization, check this box and stop here											
15	Public support percentage for 2009 (lin	• •		ne 13 column	(fl)	15	99.9 %				
16	Public support percentage from 2008 \$					16	99.9 %				
Sec	tion D. Computation of Investmen										
17	Investment income percentage for 200	9 (line 10c, col	umn (f) divided	d by line 13, c	olumn (f)) ,	17	.1 %				
18	Investment income percentage from 20	•	.,	•		18	.1 %				
19a	33% % support tests – 2009. If the organism not more than 33% %, check this b	anization did n	ot check the b	ox on line 14, a	and line 15 is n						
Ь	33% % support tests-2008. If the organ	nization did not	check a box or	n line 14 or line	19a, and line 1	6 is more than	331/3 %, and				
20	line 18 is not more than 33½ %, check this box and stop here. The organization qualifies as a publicly supported organization ▶ ☐ Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐										

ichedule A (H	om 990 or 990-EZ) 2009 Page 4
Part IV	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.
Nothing fu	rther to report or explain. Part III line 12 is 0
	

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

OMB No 1545-0047

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

|--|

Name of the organization						Employer identification number	floation number
Middle right music Farents Association Part General Information on Grants and Assistance	n Grants and	Assistance				8	6769 /00
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	records to subs ward the grants o	tantiate the amou	nt of the grants or as	ssistance, the grantees	s' eligibility for the gre	ants or assistance, an	Id Yes 🛛 No
ΩL	ation's procedure	s for monitoring t	he use of grant funds	in the United States.	2		
Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	istance to Gov 21, for any reci 1 (Form 990) if	vernments and ipient that received additional spaces	Organizations in tl red more than \$5,00 e is needed	he United States. C 00. Check this box i	Somplete if the orga if no one recipient r	inization answered eceived more than	"Yes" to \$5,000. Use
1 (a) Name and address of organization or government	(a)	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
						٠	
i	1(c)(3) and govern	ment organizations				•	None
3 Enter total number of other organizations	anizations	the leading for Form OOO			A No concept	•	None
FOF PRIVACY ACT AND PROBRAGIA DECINCA	TION ACT NOTICE, S.		וסר דמום עצני	2	at No pubblic	5	CHBOOK - ILCULA BOOK COM

Page 2	{							ts	į			:		•			2009
Pa	uals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. if additional space is needed.	(f) Description of non-cash assistance					and any other additional information.	All expenses were incurred for the collective use by the students									Schedule I (Form 980) 2009
	ization answered "Yes	(e) Method of valuation (book, FMV, appraisal, other)					line 2,	penses were incurred fo						111111111111111111111111111111111111111			
	omplete if the organ	(d) Amount of non-cash assistance					is part to provide the information required in Part I,						0				
	uals in the United States. Co if additional space is needed.	(c) Amount of cash grant					rovide the informa	idual student this pa	for trips, etc.					1	b		
	Individuals in the n 990) if additions	(b) Number of recipients					lete this part to p	in to any one indiv	uniforms, support				1			1	
Schedule I (Form 990) 2009	Grants and Other Assistance to Individ Use Part IV and Schedule I-1 (Form 990)	(a) Type of grant or assistance	** None were given to specific individuals				Supplemental Information. Complete th	No grants, scholarships, or assistance was given to any one individual student this past fiscal year.	in the music program. Examples, instruments, uniforms, support for trips, etc.								
Schedule I (Fc	Part III		None we				Part IV	No grants	in the mu	1 1 1 1 1 1 1 1				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	t t t t t t		

SCHEDULE O (Form 990)

Supplemental Information to Form 990

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

Open to Public Inspection

OMB No 1545-0047

Midland High School Music Parents Association	38	<u>i </u>	6076925					
Part IV Line 8b: Committees are not required to keep meeting minutes since they have preset limits on expenditures								
and any significant activities are discussed in the board meetings.								
Pat VI Line 19: All documents (charter, financials, etc) are available upon request.								
,								
			•					

Schedule O (Form 990) 2009	Page 2
Name of the organization	Employer identification number
	i
	-5

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

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

OMB No 1545-0047

Open To Public Inspection

Name of the organization Employer identification number Midland High School Music Parents Association 38 6076925 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. a Mail solicitations e Solicitation of non-government grants f Solicitation of government grants b Internet and email solicitations Phone solicitations g Special fundraising events d In-person solicitations 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (or retained by) fundraiser listed in col (i) (i) Name of individual (ii) Activity (iii) Did fundraiser have custody or control of (iv) Gross receipts (vi) Amount paid to (or retained by) or entity (fundraiser) from activity contributions? organization Yes No 3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

Pa	irt II	Fundraising Events. Co more than \$15,000 on F	omplete if the organiza orm 990-EZ, line 6a. L	tion answered "Yes" to ist events with gross re	o Form 990, Part IV, lir eceipts greater than \$	ne 18, or 5,000.	reported	d		
			(a) Event #1 ChemicMusicCard (event type)	(b) Event #2 Rhapsody Rend. (event type)	(c) Other events	(add col	al events (a) through	h		
Revenue	1 2	Gross receipts	30,939	12,105			43	3,044		
	3	contributions	30,939	12,105			4:	3,044		
	4	Cash prizes				 				
	5	Noncash prizes	1,510				1	1,510		
Sesu	6	Rent/facility costs								
Direct Expenses	7	Food and beverages				-				
Direc	8	Entertainment	2,639	4,212				 6,851		
	9 10	Other direct expenses	1,	8,361)						
	11 11	Net income summary. Comb	ine line 3, column (d), a	nd line 10		or repo	34	4,683		
		than \$15,000 on Form	990-EZ, line 6a.							
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming		al gaming (through col			
Rev	1	Gross revenue					** No	ne **		
nses	2	Cash prizes				 				
Direct Expenses	3	Noncash prizes								
Direct	4	Rent/facility costs				-		,		
	5	Other direct expenses .						· · · · · · · · · · · · · · · · · · ·		
	6 Volunteer labor									
	7	Direct expense summary. Ac	id lines 2 through 5 in c	olumn (d)		()		
	8	Net gaming income summar	y. Combine line 1, colur	nn d, and line 7	<u> </u>	<u> </u>	** No	ne **		
						۲	Yes	No		
9 a	ls '	ter the state(s) in which the o the organization licensed to o					9a	-		
b) If "	'No," explain: 								
	a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?									
0		'Yes," explain:								
11 12		es the organization operate of the organization a grantor, be			a partnership or other	–	11			
		med to administer charitable				- 1	12			

Sche	dule G (Form 990 or 990-EZ) 2009		F	age 3
			Yes	No
13	Indicate the percentage of gaming activity operated in:			
а	The organization's facility			
b	An outside facility			
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name ▶	,		
	Address >			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a		
Ь	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$			
С	If "Yes," enter name and address of the third party:			
	Name ▶	:	:	
	Address ▶			
16	Gaming manager information:			
	Name ▶			
	Gaming manager compensation ▶ \$			
	Description of services provided ▶			
	☐ Director/officer ☐ Employee ☐ Independent contractor			
17	Mandatory distributions:		:	
a	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?	17a		
_b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$		-	

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Schedule G (Form 990 or 990-EZ) 2009