



See a Social Security Number? Say Something!
Report Privacy Problems to <https://public.resource.org/privacy>
Or call the IRS Identity Theft Hotline at 1-800-908-4490



Short Form
Return of Organization Exempt From Income Tax

2010

Open to Public
Inspection

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, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions).

All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000
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 2010 calendar year, or tax year beginning		January 1	, 2010, and ending	December 31	, 2010
B Check if applicable:		C Name of organization		D Employer identification number	
<input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending		Performing Arts Academy		26-1914415	
		Number and street (or P.O. box, if mail is not delivered to street address)		Room/suite	E Telephone number 513-594-1537
		PO Box 44827			
		City or town, state or country, and ZIP + 4			F Group Exemption Number ►
		Middletown OH 45044			
G Accounting Method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) ►				H Check ► <input checked="" type="checkbox"/> if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)	
I Website: ► www.theperformingartsacademy.com					
J Tax-exempt status (check only one) – <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527					
K Check ► <input type="checkbox"/> if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return.					
L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ ► \$					
Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I.)					
Check if the organization used Schedule O to respond to any question in this Part I. <input checked="" type="checkbox"/>					
Revenue	1 Contributions, gifts, grants, and similar amounts received	1	2,537		
	2 Program service revenue including government fees and contracts	2	87,723		
	3 Membership dues and assessments	3	0		
	4 Investment income	4	5		
	5a Gross amount from sale of assets other than inventory	5a	0		
	b Less: cost or other basis and sales expenses	5b	0		
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	0		
	6 Gaming and fundraising events				
	a Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	0		
	b Gross income from fundraising events (not including \$ 0 of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b	6,598		
	c Less: direct expenses from gaming and fundraising events	6c	4,744		
	d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	1,854		
	7a Gross sales of inventory, less returns and allowances	7a	0		
	b Less: cost of goods sold	7b	0		
	c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	0		
	8 Other revenue (describe in Schedule O)	8	0		
	9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 ►	9	92,119		
	10 Grants and similar amounts paid (list in Schedule O)	10	0		
	11 Benefits paid to or for members	11	0		
	12 Salaries, other compensation, and employee benefits	12	8,985		
13 Professional fees and other payments to independent contractors	13	32,045			
14 Occupancy, rent, utilities, and maintenance	14	5,942			
15 Printing, publications, postage, and shipping	15	9,043			
16 Other expenses (describe in Schedule O)	16	32,296			
17 Total expenses. Add lines 10 through 16 ►	17	88,311			
18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	3,808			
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	9,430			
20 Other changes in net assets or fund balances (explain in Schedule O)	20	-105			
21 Net assets or fund balances at end of year. Combine lines 18 through 20 ►	21	13,133			

22

Part II Balance Sheets. (see the instructions for Part II.)Check if the organization used Schedule O to respond to any question in this Part II

		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments	9,430	22
23	Land and buildings	0	23
24	Other assets (describe in Schedule O)	0	24
25	Total assets	9,430	25
26	Total liabilities (describe in Schedule O)	0	26
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	9,430	27
			13,133

Part III Statement of Program Service Accomplishments (see the instructions for Part III.)Check if the organization used Schedule O to respond to any question in this Part III

What is the organization's primary exempt purpose? See attachment.

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, and other relevant information for each program title.

Expenses

(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts; optional for others.)

28			
(Grants \$) If this amount includes foreign grants, check here	►	<input type="checkbox"/> 28a
29			
(Grants \$) If this amount includes foreign grants, check here	►	<input type="checkbox"/> 29a
30			
(Grants \$) If this amount includes foreign grants, check here	►	<input type="checkbox"/> 30a
31	Other program services (describe in Schedule O)		
(Grants \$) If this amount includes foreign grants, check here	►	<input type="checkbox"/> 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 instructions for Part IV.)Check if the organization used Schedule O to respond to any question in this Part IV

(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 & deferred compensation	(e) Expense account and other allowances
William Brinkley 8441 Kingston Drive, Franklin OH 45005	V.P.- Officer - 1	0	0	0
Dawn Cooke 11 Shafor Street, Middletown OH 45042	Asst Dir/Employee - 40	15,373		
Peggy Davish 245 Raymond Drive, Monroe OH 45050	Treasurer/Officer - 6	0	0	0
Debbie Helton 6570 Crest Circle, Middletown OH 45042	Secretary/Officer - 1	0	0	0
Elizabeth Lolli 5017 Oakview Drive, Middletown OH 45042	President/Officer - 5	0	0	0
Nina Markle 4331 Pennswood Drive, Middletown OH 45042	Exec.Dir./Employee 40	7,078	0	0
Eric Sotzing 6 Alameda Circle, Middletown OH 45044	Director - 1	0	0	0
Helen Stevens-Gleason 5 Gardner Place, Middletown OH 45042	Director - 1	0	0	0
June Owens 1802 S Marshall Rd., Middletown OH 45044	Director - 1	0	0	0
Steve Minor 1810 Greentree Meadows Dr., Lebanon OH 45036	Director - 1	0	0	0
Linda Sanchez 2085 Apple Ridge Ct., Middletown OH 45044	Director - 1	0	0	0

Part V Other Information (Note the statement requirements in the instructions for Part V.)
 Check if the organization used Schedule O to respond to any question in this Part V.

33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O 33

34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions) 34

35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, explain in Schedule O why the organization did not report the income on Form 990-T. 35

a Did the organization have unrelated business gross income of \$1,000 or more or was it a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements? 35a

b If "Yes," has it filed a tax return on Form 990-T for this year (see instructions)? 35b

36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N 36

37a Enter amount of political expenditures, direct or indirect, as described in the instructions. ► 37a 37a

b Did the organization file Form 1120-POL for this year? 37b

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 tax year covered by this return? 38a

b If "Yes," complete Schedule L, Part II and enter the total amount involved 38b

39 Section 501(c)(7) organizations. Enter:

a Initiation fees and capital contributions included on line 9 39a

b Gross receipts, included on line 9, for public use of club facilities 39b

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 40a

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 did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I. 40b

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 40c

d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization. ► 0 40d

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

41 List the states with which a copy of this return is filed. ► Ohio

42a The organization's books are in care of ► Peggy Davish Telephone no. ► 513-539-9594
 Located at ► 245 Raymond Dr., Monroe OH ZIP + 4 ► 45050

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)? 42b

If "Yes," enter the name of the foreign country: ►

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

c At any time during the calendar year, did the organization maintain an office outside of the U.S.? 42c
 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 43 0

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

b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ 44b

c Did the organization receive any payments for indoor tanning services during the year? 44c

d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 44d

45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? **45** **Yes** **No**

a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions). **45a**

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I. **46**

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 47–49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI

47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II. **47** **Yes** **No**

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E. **48**

49a Did the organization make any transfers to an exempt non-charitable related organization? **49a**

b If "Yes," was the related organization a section 527 organization? **49b**

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 & deferred compensation	(e) Expense account and other allowances
None				

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 ► 0

52 Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A. ► Yes No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	<i>Peggy A. Davish</i>		<i>4/18/11</i>
	Signature of officer	Date	
Peggy Davish, Treasurer			
Type or print name and title			

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name ►	Firm's EIN ►			
	Firm's address ►	Phone no.			

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

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.

Name of the organization

Performing Arts Academy

Employer identification number

26-1914415

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.)

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 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).
- 4 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:
- 5 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.)
- 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 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.)
- 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9 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).
- 11 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 b Type II c Type III—Functionally integrated d Type III—Other
 - e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified 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).
 - f 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
 - g 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) and (iii) below, the governing body of the supported organization?
 - (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?
 - h Provide the following information about the supported organization(s).

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?	(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?	(vii) Amount of support
				Yes	No		
(A)							
(B)							
(C)							
(D)							
(E)							
Total							

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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")			24,726	24,158	2,537	51,421
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			24,726	24,158	2,537	51,421
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) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4			24,726	24,158	2,537	51,421
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources					5	5
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						51,426
12 Gross receipts from related activities, etc. (see instructions)					12	190,038
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 ► <input checked="" type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2009 Schedule A, Part II, line 14	15	%
16a 33½% support test—2010. If the organization did not check the box on line 13, and line 14 is 33½% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
b 33½% support test—2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33½% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2010. 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 ► <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2009. 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 ► <input type="checkbox"/>		
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 ► <input type="checkbox"/>		

SCHEDULE O
SUPPLEMENTAL INFORMATION TO FORM 990 OR 990-EZ

Performing Arts Academy – Employer ID 26-1914415

Part I, Line 16 – Other Expenses – Total \$32,296

Advertising	\$ 9,734
Construction & Set Expenses	\$ 7,385
Costumes & Props	\$ 8,064
Food Purchases for Productions	\$ 972
Performance Miscellaneous	\$ 3,923
Equipment Purchases	\$ 119
Hospitality	\$ 860
Memberships	\$ 366
Travel & Meetings	\$ 180
Operations Miscellaneous	\$ 693
	\$32,296

Part I, Line 20 – Changes In Net Assets or Fund Balances

The reason for this difference of \$105 is unknown.

Part III – Organization's Primary Exempt Purpose

The faith-based Performing Arts Academy will provide opportunities that will enhance character, promote well-being, and inspire greatness by developing people through the arts. The Academy desires to change lives by offering affordable, quality music education, positive theatre experiences, and an appreciation for the arts.

The community and students will be encouraged to participate in small and large ensembles and theatrical opportunities. All teachers and staff at the Academy are to aspire to a level of excellence in teaching and performance.

The Academy will serve primarily Butler and Warren Counties and surrounding communities. No participant will be denied study at the Academy due to socio-economic conditions. Financial aid or Scholarships will be made available to those in need regardless of ethnic origin.

Part III – Statement of Program Service Accomplishments

Parents from 13 communities have heard of the work being done at the Academy within the classroom and on the stage and have availed themselves and their children in our services. Enrollment is typically 280 students per calendar year. High school students may receive a Fine Arts Credit from their schools. In 2010 twelve children's musical theatre productions were accomplished, including two summer music camps. Each production involves working with youth for 3 to 14 weeks. Objectives accomplished are

the education of children in performance through theatre arts, including music and dance, offering the opportunity to gain self-confidence, self-discipline and enrichment within their lives, experience the value of working with others toward a common goal, and provide to the community productions which display "excellence" in all aspects. Success has been measured by tracking the attendance in music and theatre classes, tracking the count of returning students each term and the low drop-out rate. Another measure is the superior and excellent ratings the PAA students receive at the Ohio Music Education Association solo and ensemble contests.

Music Lessons: During the year 2010 a total of 279 students received either private or group music lessons of voice, piano, guitar, clarinet, trumpet and percussion with degreed instructors.

Performance Opportunities: In the performance side of the PAA, the following activities were successfully undertaken. Rehearsals included voice and performance instruction. Each season performances included children who were of pre-school age, grades 1-3 and grades 4-7.

In the spring of 2010 three productions occurred: "Lost Mitten" rehearsed once a week for 8 weeks and had 11 participants; "Froggy Day In Lindentown" also rehearsed once a week for 8 weeks and had 31 participants; and "Wizard of Oz" which had two rehearsals a week for 13 weeks and had 39 participants. Attendance for the three productions was approximately 920 people.

In the summer of 2010, four productions took place: "The Caterpillar's Voice" rehearsed for two weeks, three hours per day for a total of 10 rehearsals. There were 9 participants; "E-I-E-I-Oops" had 11 participants and rehearsed three hours a day for two weeks; "101 Dalmations, Kids" had two weeks of rehearsals for six hours per day and had 30 participants; and "Annie, Jr." featuring 35 students who rehearsed for three weeks, six hours per day. Approximately 1000 people attended the productions.

In the winter of 2010 there were three children's performances and one adult performance. "Pooh's Pumpkin Adventure" had 14 participants and they rehearsed twice a week for 8 weeks; "Nuts!" held two rehearsals a week for 8 weeks and had 35 participants; and "Alice in Wonderland," who held three rehearsals a week for 11 weeks with 30 participants. Approximately 810 people attended. "Amahl and the Night Visitors" was an adult offering featuring 17 participants. They rehearsed twice a week for six weeks. Approximately 300 people attended.