

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



Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

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

Open to Public'

<u>A</u> !	or the	2011 calendar year, or tax year beginning MAR 1, 2011 and	ending	<u>FEB 29, 2012</u>				
B Check if Name of organization D Employer identification number								
ε	pplicable	NEBRASKA STATE BANDMASTERS ASSOCIATION	N					
	Addres							
	Name change		23-7	7083080				
一	Initial		Room/suit					
F	Termin			(402				
\vdash	Amend			G Gross receipts \$	100,802.			
\vdash	iretum ☐Applic tion			H(a) is this a group				
_	tion tion	F Name and address of principal officer: STEVE STEAGER		for affiliates?	Yes X No			
		540 JOHNSON RD, FREMONT, NE 68025		H(b) Are all affiliates in				
	-		or 52		a list. (see instructions)			
7			UI [32	H(c) Group exemption	•			
		ee: N/A organization: Corporation Trust X Association Other	I Voc		M State of legal domicile: NE			
			IL Yea	romation. 1962	M State of legal dofficile. IN E.			
: 5		Summary		c GUDDODE I	ZOTIMIT			
(0)		Briefly describe the organization's mission or most significant activities: ENCO	URAGE	& SUPPORT 1	COUTH			
Activities & Gövernance	1	INSTRUMENTAL MUSIC						
Ē		Check this box 🕨 🔲 if the organization discontinued its operations or dispos			1			
م				<u> 3</u>	11			
2	4	Number of independent voting members of the governing body (Part VI, line 1b)						
SS		Total number of individuals employed in calendar year 2011 (Part V, line 2a)		F				
₹	6	Total number of volunteers (estimate if necessary)		<u>6</u>				
ऍुइ	7 a	Total unrelated business revenue from Part VIII, column (C), line 12						
_	b	Net unrelated business taxable income from Form 990-T, line 34	<u></u>	7b	0.			
			<u> </u>	Prior Year	Current Year			
a	8	Contributions and grants (Part VIII, line 1h)	L	1,819.	918.			
Ž	1	Program service revenue (Part VIII, line 2g)		11,759	10,657.			
Revenue		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		550.	308.			
Œ	111	Other revenue (Part VIII, column (A), lines 5, 6d.,8c, 9c, 10e, and 11e)		4,850	1,544.			
	12	Total revenue · add lines 8 through 1 (must equal Part VIII, column (A), line 12)		18,978				
		Grants and similar amounts paid (Part IX, column (A), lines 13)		0.				
		Benefits paid to or for members (Part IX, Column (A)) line		0.				
10	1	Salaries, other compensation, employee benefits (Part IX conjumn (A), lines 5-10)	······ -	0.				
Expenses	162	Professional fundraising fees (Part IX, column, (A), lige 11 er		0.				
ĕ	IVA	Total fundraising expenses (Part IX, column (D), line 25)	A 150					
Ä	47	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	————— <u>—</u> —	11,667				
	1	• • • • • • • • • • • • • • • • • • • •		11,667				
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	⊢	7,311				
<u>_ ~~</u>	19	Revenue less expenses. Subtract line 18 from line 12						
ts o			<u> </u>	eginning of Current Year 75,261	End of Year			
SSE	20	Total assets (Part X, line 16)			77,631.			
Net Assets or Fund Balances	21	Total liabilities (Part X, line 26)	·····	<u> </u>	77 621			
꾪	22	Net assets or fund balances Subtract line 21 from line 20		75,261.	77,631.			
		Signature Block			t to the sale of the			
		lties of perjury, I declare that I have examined this return, including accompanying schedule			ny knowledge and belief, it is			
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of w	hich prepar		. /			
		Duran J. Streger		<u>9-28</u> Date	-12			
Sig	n	Signature of officer 0		Date				
Her	·e	STEVE STEAGER, PRESIDENT	_					
		Type or print name and title	_	Dete	TT DTIN			
		Print/Type preparer's name Preparer's signature (\)		Date Check	PTIN			
Paid GEORGE E. NELSON 2000 09/24/12 sett-employed P002928								
Pre	parer	47-0711139						
Use Only Firm's address 13310 "I" STREET								
		OMAHA, NE 68137		Phone no.	(402) 330-7099			
Ma	y the IF	as discuss this return with the preparer shown above? (see instructions)			X Yes No			
	01 01-2		ons.		Form 990 (2011)			

	NEBRASKA STATE BANDMASTERS ASSOCIATION
orm	990 (2011) C/O JOANN COUTON - NEUMANN HIGH SCHOOL 23-7083080 Page 2
	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission: NONE
•	,
	Did the organization undertake any significant program services during the year which were not listed on
2	the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
_	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to
	others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code) (Expenses \$ Including grants of \$) (Revenue \$)
	COORDINATE & SPONSOR BAND AND YOUTH MUSIC CONTESTS AND PERFORMANCES.
4b	(Code) (Expenses \$
40	(Code) (Expenses \$) (Including Grants of \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$
4e_	Total program service expenses ▶
	Form 990 (2011)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complète Schedule A	1		_X_
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
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		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which 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		X
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		x
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		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X	5,500	33.13	
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		,	
	Part VI	11a		X
b	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	11b		X
C	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	11c		Х
d	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	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	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 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	_	X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
_	Schedule D, Parts XI, XII, and XIII	12a		X
D	Was the organization included in consolidated, independent audited financial statements for the tax year?	405		x
42	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b 13		X
13 14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
14a b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
~	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
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, Parts II and IV	15		X
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, Parts III and IV	16		X
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		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from garning activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19	L	X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

23-7083080 C/O JOANN COUTON - NEUMANN HIGH SCHOOL Page 4 Part IV. Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II X 21 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, 22 X Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current 23 and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete X 23 24a 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 X Schedule K. If "No", go to line 25 b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a 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 b 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 25b Schedule L, Part I Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified 26 X 26 person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial 27 contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV 28 instructions for applicable filing thresholds, conditions, and exceptions): X a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c X X Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 30 X contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? X If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete X Schedule N, Part II 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations X sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? X X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of X 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 If "Yes," complete Schedule R, Part V, line 2 ______ 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, Part VI

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

X

23-7083080

Page 5

Form 990 (2011) C/O JOANN COUTON - NEUMANN HIGH SCHOOL Part V Statements Regarding Other IRS Filings and Tax Compliance

-,,	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		調	The second
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 1	15 30	流	
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	<u> </u>	"	語線
	(gambling) winnings to prize winners?	1c		
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
		C Cale	ر شدد	1.1.4
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	. या सस्य	2018 27.64
		1	鐵鐵	1
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	<u>3a</u>		<u> </u>
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	_3b_		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			v
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	515.3H	X XXX
b	If "Yes," enter the name of the foreign country:	强烈		
E-	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	REEE ST	AFRICK.	X
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<u>5a</u> 5b		X
b	Mark the first of the Market of the Francisco Control	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		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).	認為	器器	部的
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		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c	4-76447	জন্ম শ্ৰে
d		- 1	强制3年	新
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		 -
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7g		
g h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting		M.S.	TV V
_	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			孤家
а	Did the organization make any taxable distributions under section 4966?	9a_		<u> </u>
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			Silv.
11	Section 501(c)(12) organizations. Enter:	翻		
а	Gross income from members or shareholders		巡	
D	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
100	amounts due or received from them.)	12a	1450134	ti di Alia
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	123		MARK
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.		洲翼	
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans	300		
	Enter the amount of reserves on hand 13c	1988	200	SEA
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u> </u>
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	000	(0044)
		Form	33 0 ((2011)

Form 990 (2011)

C/O JOANN COUTON - NEUMANN HIGH SCHOOL

23-7083080 Page 6

Pai	★VI. Governance, Management, and Disclosure For each "Yes" response to lines 2 the to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule Communication.			"No" n	espon	se
		. 000				\mathbf{x}
	Check if Schedule O contains a response to any question in this Part VI		· · · · · · · · · · · · · · · · · · ·	• •	••	لما
sec	tion A. Governing Body and Management				Vaa	N.
		1 4-	1 11	- W	Yes	No
та	Enter the number of voting members of the governing body at the end of the tax year	1a		1	4	
	If there are material differences in voting rights among members of the governing body, or if the governing			18 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		主義
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	١	1 0	2 6- 1	૽ૼૺ૾૽ૢૹ૽	
b	Enter the number of voting members included in line 1a, above, who are independent	1b		100	14	12.3
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh			ALC: NO	E-22-14	10 100
	officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or under the					
	of officers, directors, or trustees, or key employees to a management company or other person?			3		X
4	Did the organization make any significant changes to its governing documents since the prior Form			4		X
5	Did the organization become aware during the year of a significant diversion of the organization's as			5		X
6	Did the organization have members or stockholders?			6	X	<u> </u>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	ıppoint	one or			
	more members of the governing body?			7a_	X	<u> </u>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	stockh	olders, or			
	persons other than the governing body?			7b	X	<u> </u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ear by th	ne following:	是到		瓣、
а	The governing body?			8a	X	<u> </u>
b	Each committee with authority to act on behalf of the governing body?			8b		X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re-	ached	at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal F	Revenu	e Code.)			
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such of					
_	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing boo			11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	•	Ū	-		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a		X
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris	e to cor	nflicts?	12b		
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "					
·	in Schedule O how this was done			12c		
13	Did the organization have a written whistleblower policy?			13		х
14	Did the organization have a written document retention and destruction policy?			14		x
	Did the process for determining compensation of the following persons include a review and approv			11223	STATE OF THE PARTY	7.5.4
15	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		паоропасти			
_				15a	LE-CE WAY AND	X
a	The organization's CEO, Executive Director, or top management official			15b		X
þ	Other officers or key employees of the organization	••• ••• ••		130	£80547	1 47 4 147
40	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
10a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange			REAL PROPERTY.	5.00.15	X
	taxable entity during the year?			16a	400	350.55
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate the control of the					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization of the control of			I '	100	F 12 1
	exempt status with respect to such arrangements?		.,	16b		L
sec	tion C. Disclosure		······································			
17	List the states with which a copy of this Form 990 is required to be filed NONE	T (0				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	ı (Sec	iion 5U1(c)(3)s only)	avallab	ιθ	
	for public inspection. Indicate how you made these available. Check all that apply.					
	Own website Another's website X Upon request					
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, c	onflict	of interest policy, an	d finar	icial	
	statements available to the public during the tax year.					
20	State the name, physical address, and telephone number of the person who possesses the books a			tion: 🕨		
	JOANN COUTON C/O NEUMANN HIGH SCHOOL - (402)-443-4	<u> 1151</u>				
	202 S LINDEN WAHOO NE 68066					

Form 990 (2011) C/O JOANN COUTON - NEUMANN HIGH SCHOOL 23-7083080 Page 7
Part VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

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

- 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.
- 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, if any. 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) Name and Title	(B) Average hours per	(do	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				one	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	week (describe hours for related organizations in Schedule O)	tee or director	Institutional trustee	Officer -		Highest compensated employee		the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) MICHELLE BLUFORD										
PRESIDENT ELECT	0.00	L						0.	0.	0.
(2) STEVE STEAGER		ļ								
PRESIDENT	0.00							0.	0.	0.
(3) RANDY NEUHARTH		l	İ							
PAST PRESIDENT	0.00	L				ļ		0.	0.	0.
(4) JOANN COUTON										
TREASURER	0.00		_				<u> </u>	0.	0.	0.
(5) WHITNEY JONES								0.	0.	_
SECRETARY	0.00									0.
										· · · · · · · · · · · · · · · · · · ·
							_			
						-				

	(A)		(B)	(C)
	Name and business address	NONE	Description of services	Compensation
				,
			<u></u>	
2	Total number of independent contractors (including bu	it not limited to those lis	sted above) who received more than	
	\$100,000 of compensation from the organization	0		ALC: THE COLOR

C/O JOANN COUTON - NEUMANN HIGH SCHOOL

		Statement of Revenue			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
इइ	1 a	Federated campaigns	1a		, , ,	F 12 - 12 - 12 - 12 - 12 - 12 - 12 - 12		1 4 t
iz 5	b	Membership dues	1b		, ,	, , ,		۱۰ ۱۲ ما د ۲۰ ما
E'S	С	Fundraising events	1c	918.	, , ,			
# la		Related organizations	1d] " <i>,</i>	• • •		
Contributions, Gifts, Grants and Other Similar Amounts	е) 1e		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		Section 1	
	f	All other contributions, gifts, grants, as			17 mg - 1		建筑的	के , होत-सर्वे देखें हैं
		similar amounts not included above	1 1		35.75		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	والسباراء والمستنسب
EQ.	a	Noncash contributions included in lines 1a-1	· · · · · · · · · · · · · · · · · · ·				marie a series	
S El	_	Total, Add lines 1a-1f			918.	= 3,70° (1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	A. 新國 (1950)	1
				Business Code		مِنْ فَعَلَمْ اللَّهُ عِنْدُ مِنْ اللَّهِ عِنْدُ مِنْ اللَّهِ عِنْدُ اللَّهِ عِنْدُ اللَّهِ عِنْدُ اللَّهِ	经发生企业	Simulation of
ا يو	2 a	MEMBERSHIP DUES		900099	10,657.			10,657.
Program Service Revenue	ь							
8 5	c							
e a	d							
Par l	е							
4	f	All other program service revenue						
	g	Total. Add lines 2a-2f		. •	10,657.	强烈,是是是这种	还成为政党	
	3	Investment income (including divi	dends, intere	est, and				
		other similar amounts)		▶	308.			308.
	4	Income from investment of tax-ex-	empt bond p	roceeds				
j	5	Royalties	· <u>·</u>	<u> </u>	A A STATE OF THE S	MARKET 11 0 7 00 7 00 11	Lampagness Temperature State	5 1 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
			(i) Real	(ii) Personal				
	6 a	Gross rents			高。		阿勒勒	2000年1000年100日
ļ	b	Less: rental expenses						
İ	c	Rental income or (loss)			ESTABLISHED	The Court of the C	L-ALLEZZANCE.	SAN SAN AND AND A
į	d	Net rental income or (loss)		<u> </u>	Si come com accomen	THE READ SERVICE TO STRUCTULE TO	1 COL 40 CORDER & WY 18679-	CONTRACTOR A SER
	7 a	Gross amount from sales of [1]	Securities	(ii) Other		77.53	10 m	1647.754
		assets other than inventory					5 1 3 1 3 1 3 SV	A STATE OF THE STA
	b	Less: cost or other basis					然是想到	
		and sales expenses				学校 的分类的		
	С	Gain or (loss)		L	ATTEMPT OF THE	STANDED STANDS	SEE SEE SEE SEE	HARLES HERE
	d	• , ,		. <u> </u>	A COMETY TO THE CALL	differents than their united	1 3 99000 SSS (100 SSA)	おおおんしょうかん
9	8 a							
Eg			<u>} </u>	1		75 77 20 70		
<u>ا ۾</u>		contributions reported on line 1c)	. See		A STATE OF THE STA	是一种主义		
Other Revenu		Part IV, line 18			La faire das			
튉		Less: direct expenses		87,375.			FACTED TO	海州进行进行设计
		Net income or (loss) from fundrais		· · · · · · · · · · · · · · · · · · ·	1,544.	WANTED TO THE MOST	R 1085 96082218E	1,044.
ŀ	9 a	Gross income from gaming activit			THE PARTY OF THE P	位""""""""	10000000000000000000000000000000000000	
1		Part IV, line 19						
		Less: direct expenses		L	isinite Baritana da a	35 8 7 2 5 5 6 6 5 6 6 5 6 5 6 6 6 6 6 6 6 6 6	一般の形式は他には	START MERILING
		Net income or (loss) from gaming		<u> </u>	व्यवस्थात्र स्टब्स्	one or stockers	WATER STATE	87 YARSO 38870
ł	10 a	Gross sales of inventory, less retu			學是學學學		351 5	
		and allowances			· 这种是一个			
		Less: cost of goods sold			The State of the same	الماحة المستكث المستداء	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Merring Constitution
ł	<u>c</u>	Net income or (loss) from sales of	inventory	Dusiness Code	37 46 1	2.0	10 10 10 10 10 10 10 10 10 10 10 10 10 1	55 - 5
}		Miscellaneous Revenue		Business Code	Len Les to Timber 1	- with the total	1 2 4 mar 2 William .	1: -18884 16-25-25-25
	11 a					 		
	b					 		
	C	All other revenue		<u> </u>		-		<u> </u>
	ď	All other revenue		<u> </u>		一个是一个的原理	· 通识不是	から 神経の
		Total. Add lines 11a-11d Total revenue. See instructions.			13,427.	 	0.	121111
13200 01-23	12 19 -12	Total levelue. See monucuons.	·	· · · · · · · · · · · · · · · · · · ·		.,	<u></u>	Form 990 (2011)

Form 990 (2011)

complete columns (B), (C), and (D).

C/O JOANN COUTON - NEUMANN HIGH SCHOOL

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to

Check if Schedule O contains a response to any question in this Part IX (B) Program service (D) Fundraising (C) (A) Do not include amounts reported on lines 6b. Total expenses Management and 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses ACH CARRY Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 Grants and other assistance to individuals in 2 the United States. See Part IV, line 22 Grants and other assistance to governments, 3 organizations, and individuals outside the United States. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions) . . Other employee benefits 10 Payroll taxes Fees for services (non-employees): 250. Legal 225 Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other g Advertising and promotion 12 542. Office expenses 13 Information technology 14 Royalties 15 16 Occupancy 781 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 1,116. Conferences, conventions, and meetings 19 Interest 20 Payments to affiliates 21 Depreciation, depletion, and amortization 22 23 Insurance Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 2,959 INSURANCE 2,500. COMMISSIONS 2,417 PRINTING AND PUBLICATIO d WEBSITE SOFTWARE 267 All other expenses 11,057 Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here If following SOP 98-2 (ASC 958-720)

23-7083080 Page 10

Form`990 (2011)

Part X Balance Sheet (A) (B) Beginning of year End of year 75,261. 77,631. Cash · non-interest-bearing 1 Savings and temporary cash investments 2 2 3 3 4 Accounts receivable, net 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary 6 7 Notes and loans receivable, net 8 Inventories for sale or use 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a10b Less: accumulated depreciation Investments - publicly traded securities 11 11 Investments - other securities. See Part IV, line 11 12 Investments - program-related. See Part IV, line 11 13 13 Intangible assets 14 14 15 15 77,631 75,261 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 17 Accounts payable and accrued expenses 18 18 19 19 Tax-exempt bond liabilities 20 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 23 23 Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here
and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances Unrestricted net assets 27 28 28 Permanently restricted net assets Organizations that do not follow SFAS 117, check here

X and complete lines 30 through 34. 0. Capital stock or trust principal, or current funds 30 30 Paid-in or capital surplus, or land, building, or equipment fund 0. 31 31 75,261. 32 77,631. Retained earnings, endowment, accumulated income, or other funds 32 75,261. 77,631. 33 33 77,631. 75,261. Total liabilities and net assets/fund balances .

Form 990 (2011)

NEBRASKA STATE BANDMASTERS ASSOCIATION 23-7083080 Page 12 Form 990 (2011) C/O JOANN COUTON - NEUMANN HIGH SCHOOL Part XI Reconciliation of Net Assets Check if Schedule O contains a response to any question in this Part XI 13,427. Total revenue (must equal Part VIII, column (A), line 12) 1 11,057. Total expenses (must equal Part IX, column (A), line 25) 2 2 2,370. 3 Revenue less expenses Subtract line 2 from line 1 3 75,2<u>61.</u> 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4 0. Other changes in net assets or fund balances (explain in Schedule O) 5 77,631. Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) Part XIII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII Yes Nο Accounting method used to prepare the Form 990: X Cash Accrual If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. \$ 2.4 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a X b Were the organization's financial statements audited by an independent accountant? 2b c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? 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 issued on a separate basis, consolidated basis, or both: Consolidated basis Both consolidated and separate basis 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

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

Act and OMB Circular A-133?

or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

За

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions. 2011
Open to Public Inspection

Name of the organization

NEBRASKA STATE BANDMASTERS ASSOCIATION C/O JOANN COUTON - NEUMANN HIGH SCHOOL

Employer identification number

23-7083080 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate contributions to (during year) 2 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II [설문] Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ______ Yes Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Partills Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

		NN COUTON) Page 2
	Constitution Constitution									
3										
	(check all that apply):		<u> </u>		_					
а	Public exhibition	d			hange prog					
b	Soholarly research	е	ه لــا د	ther		 -				
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explain	n how the	ey further t	the organizat	tion's exer	npt purpo	se in Par	t XIV.	
5	During the year, did the organization solicit or	r receive donations (of art, his	torical trea	sures, or otl	ner simılar	assets	,	_	_
	to be sold to raise funds rather than to be ma							<u>. </u>	Yes	No_
Par	t IV Escrow and Custodial Arrang		ete if the	organizatio	on answered	"Yes" to	Form 990,	Part IV,	line 9, or	
	reported an amount on Form 990, Par									
1a	Is the organization an agent, trustee, custodi	ian or other intermed	ilary for c	ontribution	ns or other a	ss e ls not	included	_	_	
	on Form 990, Part X?							∟	Yes	└─ No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing ta	able:						
									Amount	
С	Beginning balance						. 1c			
d	Additions during the year						. 1d			
е	Distributions during the year						. 1e			
f	Ending balance						. 1f			
2 a	Did the organization include an amount on Fo							🗀	Yes	☐ No
	If "Yes," explain the arrangement in Part XIV.									
Par	TEVEN Endowment Funds. Complete it	f the organization an	swered "	Yes" to Fo	orm 990, Par	t IV, line 1	0.			
		(a) Current year	(b) Pr	or year	(c) Two ye	ars back	(d) Three y	ears back	(e) Four	years back
1a	Beginning of year balance									- Father.
b	Contributions								the water of	Est 7 M.
С	Net investment earnings, gains, and losses								的经验的	部層
d	Grants or scholarships								4667	湖梁()。
е	Other expenditures for facilities								深深	THE STATE OF THE PERSON OF THE
	and programs				İ					Fix and
f	Administrative expenses								设部 区	THE STATE OF
g	End of year balance								家門發展	型為,為,
2	Provide the estimated percentage of the curr		e (line 1g	, column (a)) held as:					
a	Board designated or quasi-endowment		%	•						
	Permanent endowment	%								
	Temporarily restricted endowment ▶	 %								
_	The percentages in lines 2a, 2b, and 2c should	uld equal 100%.								
3a	Are there endowment funds not in the posse		ation that	t are held a	and administ	ered for th	ne organiz	ation		
	by:	· ·					_		ſ	Yes No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations	•••••								
4	Describe in Part XIV the intended uses of the	•			• • • • • • • • • • • • • • • • • • • •		••••••		• •	
Raf	ি/্যুড়া Land, Buildings, and Equipm				•					
2.46.24	Description of property	(a) Cost or o	T		t or other	(c) A	cumulate	d	(d) Book	value
	boompation of property	basis (investr			(other)	1 '	reciation		(-/	
12	Land	· ·			<u> </u>		W. Christian			
b	Buildings					2	4-04-04-04-04-04-04-04-04-04-04-04-04-04			
	Leasehold improvements	1	- 							
			- 1			1			<u> </u>	
	Equipment					1	-			
	Other		Y colum	n (R) line	10(c))	1				٥.

C/O JOANN COUTON - NEUMANN HIGH SCHOOL 23-7083080 Page 3 Schedule D (Form 990) 2011 Part VII Investments - Other Securities. See Form 990, Part X, line 12. (c) Method of valuation: (a) Description of security or category (b) Book value (including name of security) Cost or end-of-year market value (1) Financial derivatives Closely-held equity interests ... (3) Other (A)(B) (C) (D) (E) (F) (G) (H) Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) Part VIII Investments - Program Related. See Form 990, Part X, line 13 (c) Method of valuation: (a) Description of investment type (b) Book value Cost or end-of-year market value (1) (2)(3) (4) (5) (6)(7) (8)(9)(10)Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) Part X Other Assets. See Form 990, Part X, line 15. (b) Book value (a) Description (1) (2) (3)(4) (5) (6) (7) (8) (9) (10)Total. (Column (b) must equal Form 990, Part X, col (B) line 15.) Part X: Other Liabilities. See Form 990, Part X, line 25. (a) Description of liability (b) Book value (1) Federal income taxes (2)(3)(4) (5) (6) (7)(8) (9) (10)(11)Total. (Column (b) must equal Form 990, Part X, col (B) line 25.)

FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under 2. FIN 48 (ASC 740)

NEBRASKA STATE BANDMASTERS ASSOCIATION C/O JOANN COUTON - NEUMANN HIGH SCHOOL 23-7083080 Page 4 Schedule D (Form 990) 2011 Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements 13,427. Total revenue (Form 990, Part VIII, column (A), line 12) 1 11,057. Total expenses (Form 990, Part IX, column (A), line 25) 2 2 2,370. 3 Excess or (deficit) for the year. Subtract line 2 from line 1 3 4 Net unrealized gains (losses) on investments 5 Donated services and use of facilities 5 6 6 Investment expenses ... 7 7 Prior period adjustments Other (Describe in Part XIV.) R 8 Total adjustments (net). Add lines 4 through 8 9 2,370 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 10 Part XIII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Total revenue, gains, and other support per audited financial statements 1 Amounts included on line 1 but not on Form 990, Part VIII, line 12: 2 地 Net unrealized gains on investments а Donated services and use of facilities 2b d Other (Describe in Part XIV.) 2d Add lines 2a through 2d 3 Amounts included on Form 990. Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b **b** Other (Describe in Part XIV.) **4**c c Add lines 4a and 4b Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: 2b Prior year adjustments c Other losses 2d Other (Describe in Part XIV.) 2e Add lines 2a through 2d 3 Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b **b** Other (Describe in Part XIV.) 4c c Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) PärtiXIV Supplemental Information Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, Department of the Treasury or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Internal Revenue Service ► Attach to Form 990 or Form 990-EZ. ► See separate instructions

OMB No 1545-0047

Inspection

Name of the organization

NEBRASKA STATE BANDMASTERS ASSOCIATION

Employer identification number

23-7083080 C/O JOANN COUTON - NEUMANN HIGH SCHOOL Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not Part required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations Solicitation of non-government grants Solicitation of government grants b Internet and email solicitations Special fundraising events C Phone solicitations d In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or ☐ No Yes key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? 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. (iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) Yes No 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Schedule G (Form 990 or 990-EZ) 2011 C/O JOANN COUTON - NEUMANN HIGH SCHOOL 23-7083080 Page 2
Part III Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000

		of fundraising event contributions and gr	oss income on Form 990	J-E-Z, lines 1 and 6b. List e	vents with gross receip	ots greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		•	MARCH	CONCERT BAND		• •
			CONVENTION	FESTIVAL	3	(add col. (a) through
		•		 	(total number)	col. (c))
9			(event type)	(event type)	(total number)	
Revenue						
ۿ	1	Gross receipts	17,996.	2,425.	69,416.	89,837.
	9	Less: Charitable contributions	700.	1	218.	918.
	-					
	3	Gross income (line 1 minus line 2)	17,296.	2,425.	69,198.	88,919.
	3	Gross income (inte i minus inte z)	11,200.	2,423.	05,150.	00,515.
	١.					
	4	Cash prizes		 	·-··	
Š	5	Noncash prizes				
S						
8	6	Rent/facility costs				
ũ	-	•				
Direct Expenses	7	Food and beverages				
ă	'	1 ood and beverages		·		
	_					
	8	Entertainment				
	9	Other direct expenses		I		
	10					
	11		n (d), and line 10	<u> </u>	<u></u>	88,919.
ĮŖε	irt.	Gaming. Complete if the organization	answered "Yes" to Form	990, Part IV, line 19, or re	eported more than	
		\$15,000 on Form 990-EZ, line 6a.				
_			4) 5'	(b) Pull tabs/instant	() Other manner	(d) Total gaming (add
٦			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
Revenue						
æ	١.			İ		
	1	Gross revenue				
e S	2	Cash prizes				
Direct Expenses						
Ř	3	Noncash prizes				
Ą						
ည	4	Rent/facility costs		1		
₫	'					
	_	Other direct eveness				
	5	Other direct expenses				APERING PARTY OF CO.
			Yes %	Yes%	Yes %	
	6	Volunteer labor	No No	L No	No	A PORT OF THE PROPERTY OF THE PARTY OF THE P
]
	7	Direct expense summary. Add lines 2 through	h 5 in column (d)			(
	8	Net gaming income summary. Combine line 1	I, column d, and line 7		>	İ
9	Ent	ter the state(s) in which the organization opera	tes gamino activities:			
-		he organization licensed to operate gaming ac	_	atatan?		Yes No
		_		States :		L res No
b	it "	No," explain:	···············		 	
					 	
		ere any of the organization's gaming licenses re		erminated during the tax y	ear?	Yes No
		ere any of the organization's gaming licenses re		erminated during the tax y	ear?	Yes No
				erminated during the tax y	ear?	Yes No
				erminated during the tax y	ear?	Yes No

	NEBRASKA STATE BANDMASTERS ASSOCIATION
	edule G (Form 990 or 990-EZ) 2011 C/O JOANN COUTON - NEUMANN HIGH SCHOOL 23-7083080 Page 3
	Does the organization operate gaming activities with nonmembers? Yes No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed
	to administer chantable gaming? Yes L. No
13	Indicate the percentage of gaming activity operated in:
а	The organization's facility
	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? Yes No
.	If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount
	of gaming revenue retained by the third party > \$
c	If "Yes," enter name and address of the third party:
Ů	Too, onto hand address of the time party.
	Name
	Address >
16	Gaming manager information:
	Name
	Gaming manager compensation > \$
	Description of services provided
	Director/officer Employee Independent contractor
17	Mandaton, distributions
	Mandatory distributions: Is the organization required under state law to make charitable distributions from the gaming proceeds to
а	
h	retain the state gaming license? Yes No Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the
Ü	organization's own exempt activities during the tax year > \$
Pa	Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III,
	lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).
	illios o, ob, 100, 100, 10, and 110, as applicable 1100 complete this part to provide any assessment the interest of the second
	•
_	

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

2011

Open to Rublic Address of the Rublic Addr

Name of the organization

NEBRASKA STATE BANDMASTERS ASSOCIATION

Employer identification number 23-7083080

C/O JOANN COUTON - NEUMANN HIGH SCHOOL FORM 990, PART VI, SECTION A, LINE 6: THE ORGANIZATION IS A NOT-FOR-PROFIT ASSOCIATION WITH MEMBERS. THE MEMBERS ELECT THE MEMBERS OF THE GOVERNING BODY AS WELL AS APPROVE SIGNIFICANT DECISIONS OF THE GOVERNING BODY. HOWEVER, THEY DO NOT RECEIVE A SHARE OF THE ORGANIZATION'S PROFITS OR EXCESS DUES, NOR WILL THEY RECEIVE A SHARE OF THE ORGANIZATION'S NET ASSETS UPON THE ORGANIZATION'S DISSOLUTION. FORM 990, PART VI, SECTION A, LINE 7A: APPROVAL OF THE APPOINTMENT OF EXECUTIVE BOARD MEMBERS REQUIRES A MAJORITY VOTE BY GENERAL MEMBERS IN ATTENDANCE AT THE GENERAL MEMBERSHIP MEETINGS. FORM 990, PART VI, SECTION A, LINE 7B: THE EXCUTIVE BOARD MAKES RECOMMENDATIONS TO THE GENERAL MEMBERS AT GENERAL MEMBERSHIP MEETINGS FOR CHANGES TO THE BYLAWS AND MEMBERSHIP DUES RATES. THESE CHANGES ARE VOTED ON BY THE GENERAL MEMBERS IN ATTENDANCE AND REQUIRE A MAJORITY VOTE TO BE APPROVED. FORM 990, PART VI, SECTION A, LINE 8B: THERE ARE NO COMMITTEES WITH AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY. ANY DECISIONS MADE ARE APPROVED AT A FORMAL BOARD MEETING AND DOCUMENTED IN THE BOARD MINUTES. FORM 990, PART VI, SECTION B, LINE 11: A DRAFT COPY OF FORM 990 IS PRESENTED TO THE DIRECTOR OF THE ORGANIZATION FOR APPROVAL. UPON APPROVAL, THE FINAL FORM 990 IS FILED WITH THE INTERNAL REVENUE SERVICE.

Schedule O (Form 990 or 9	990-EZ) (2011)	Page 2
	NEBRASKA STATE BANDMASTERS ASSOCIATION C/O JOANN COUTON - NEUMANN HIGH SCHOOL	Employer identification number 23-7083080
		25 7005000
ANNUAL GENERA	L MEMBERSHIP MEETING.	
FORM 990, PAR	T VII CONTACT ADDRESSES FOR OFFICERS, DIRECT	ORS, ETC:
MICHELLE BLUF	ORD - 20303 BLUE SAGE PARKWAY, ELKHORN, NE 6	8022
STEVE STEAGER	- 540 JOHNSON RD, NORFOLK, NE 68702	
RANDY NEUHART	H - 801 E BENJAMIN, WAYNE, NE 68787	<u> </u>
JOANN COUTON	- 500 CITY VIEW DR, WAHOO, NE 68066	
WHITNEY JONES	- 605 S 6TH ST, ALBION, NE 68620	
-		
		<u>-</u>
		······································



(Rev January 2012)

Application for Extension of Time To File an **Exempt Organization Return**

OMB No 1545-1709

Internal Revenue	, , , , , , , , , , ,	arate applic	cation for each return.	ļ						
• If you are f	iling for an Automatic 3-Month Extension.	complete c	only Part I and check th	is box	>	<u>▼ </u>				
• If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box										
Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.										
Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see										
instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.										
Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete an extension of time to file income tax returns.										
Enter filer's identifying number, see instructions										
Type or	Name of exempt organization or other filer, see Ir	structions.		Employer Identification number (EIN) or						
print	NEBRASKA STATE BANDMASTER A	TION	□ 23-7083080 □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □							
•	Number, street, and room or suite no. If a P.O. be	Social security number (SSN)								
File by the due date for	C/O 13310 "I" STREET		- ,	□. ,,	.•	٠				
filing your	City, town or post office, state, and ZIP code. Fo	r a foreign a	ddress, see Instructions.		,,, t					
return. See instructions.	OMAHA, NE 68137				•					
Enter the Return code for the return that this application is for (file a separate application for each return)										
Application		Return	Application	· · · · · · · · · · · · · · · · · · ·	Ret	turn				
Is For	_	Code :	. 7.73 1	, ,	· Co	de				
Form 990 ·		01	Form 990-T (corporation	on)	0	7				
Form 990-E	BL .	-02	Form 1041-A		0	8				
Form 990-E		01	Form 4720	•	0:	9				
Form 990-F		04	Form 5227		10	0				
	(sec. 401(a) or 408(a) trust)	05	Form 6069		1 Y	1				
	(trust other than above)	Form 8870		, 1	2					
• The books are in the care of ► GEORGE NELSON										
Telephone	No. ► 402-330-7099	F	AX No. ► 402-3	30-0809 ·		•				
• if the organ	nization does not have an office or place of b	usiness in 1	the United States, check	this box		▶ □				
• If this is for	a Group Return, enter the organization's for	ır digit Gro	up Exemption Number (GEN)	If this is					
for the whole group, check this box ▶ □ . If it is for part of the group, check this box ▶ □ and attach										
	names and EINs of all members the extensi			· · · · · · · · · · · · · · · · · · ·	<u>:.</u>					
1 I requ	est an automatic 3-month (6 months for a co	orporation r	required to file Form 990	-T) extension of time						
until OCTOBER 15, 20 12, to file the exempt organization return for the organization named above. The extension is										
for the	for the organization's return for:									
>	calendar year 20 or : · ·		•	·	•	•				
▶.₩	tax year beginning MARCH 1	. ,20	11 , and ending	FEBRUARY 29	- ,20 12					
	1. · · · · · · · · · · · · · · · · · · ·									
Ch	ange in accounting period		<u> </u>		·					
	f this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any conrefundable credits. See instructions.									
	nated tax payments made. Include any prior year overpayment allowed as a credit, 3b									
EFTPS	S (Electronic Federal Tax Payment System).	See instruc	tions.	3c	\$ \(\sqrt{\chi} \))				
Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.										



Form 88	68 (R <i>e</i> v	. 1-2012)								Page 2
• If you	u are f	iling for an	Additi	onal (Not	Automatic) 3-Mo	onth Exter	sion, complete o	only Part II and c	heck this box	▶ 🗆
							omatic 3-month e			
							only Part I (on page		•	•
Part		Additiona	al (Not	Automa	tic) 3-Month E	xtension	of Time. Only fi	le the original (r	no copies ne	eded).
										er, see instructions
Туре		Name of ex	cempt o	rganization	or other filer, see in	structions.		Employ	er identification	number (EIN) or
print)I	ŀ								
•		Number, street, and room or suite no. If a P.O. box, see instructions.					Social s	ecurity number	(SSN)	
File by the due date for									•	
filing you	ır ·	City, town or post office, state, and ZIP code. For a foreign address, see instructions.								
return. S Instruction			• 1	- "	•	_				•
		<u> </u>		<u>-</u>	•					,
Enter t	he Re	turn code f	or the	return that	this application i	s for (file a	separate applicat	lion for each retu	m)	[]
Appli	cation			}		Return	Application		•	Réturn
Is For				•	,	Code	Is For			Code
Form		<u>-: </u>				01				
	990-E	RI				02	Form 1041-A	<u> 1 </u>		. 08
	990-E					01	Form 4720			09
	990-P					04	Form 5227			10
		(sec. 401(a) or 40)B(a) truet)		05	Form 6069		· · · · · · · · · · · · · · · · · · ·	11
		(trust othe				06	Form 8870			12
					 ,	·	• 			
STOP!	Do no	t complete	Part II	l if you wer	e not already gra	ented an a	tomatic 3-month	extension on a p	reviously filed	Form 8868.
If theIf thisfor the	is for whole	ization doe a Group R	eturn, eck this	enter the o	rganization's fou ▶ 🔲 . If i	r digit:Groot t is for par	No. ► the United States, up Exemption Nuit tof the group, che	mber (GEN)		
list with	the n	names and	ElNs o	f all memb	ers the extension	is for.	•	· · · · · · · · · · · · · · · · · · ·	 	, gre
4	l room	oot oo add	itional ^s	g`month o	dancian of time :	entil			20	.•
5	For or	londar voa	ilionar .	or other	tax year beginnin	Aritii 1		, and ending	20	. 20
						onthe ch	, 20 ock reason:	Initial return	Final return	, 20
		ange in acc			011000 111011 12 11	ionaio, on	ok reason.	minia rotom i		-
		in detail wh			viension		•		•	
•	Otato				S INCOMPLE	re				
. :	· ·									
-				·						
8a	If this	application	ls for	Form 990-	BL. 990-PF. 990	-T. 4720. (or 6069, enter the	tentative tax, les	s anv	
		application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any undable credits. See instructions.								
-		application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and								
		ted tax payments made. Include any prior year overpayment allowed as a credit and any								
		it paid previously with Form 8868.								
_				<u> </u>		ur payment	with this form, if re	egulred, by using E		
		ce due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS onic Federal Tax Payment System). See Instructions.								
<u>`</u>				<u> </u>						
				Signatur	e and Verificat	ion must	be completed	for Part II only	•	
							Iding accompanyin ed to prepare this fo		statements, and	to the best of my
		M.								
Signature	<u> </u>	-X14				Title ►	CPA		Date ►	7-11-12
	7)		•			Form	n 8868 (Rev. 1-2012)