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2011

Open to Public Inspection

Form 990-EZ

Short Form Return of Organization Exempt From Income Tax

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

Sponsoring organizations of donor advised funds, 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.

Department of the Treasury Internal Revenue Service

A For the 2011 calendar year, or tax year beginning August 1, 2011, and ending July 31, 2012

B Check if applicable:

- Address change, Name change, Initial return, Terminated, Amended return, Application pending

C Name of organization: The Alexandria Singers, PO Box 6151, Alexandria, VA 22306

D Employer identification number: 51-0188861, E Telephone number: 703-941-7464, F Group Exemption Number

G Accounting Method: [X] Cash [] Accrual Other (specify)

H Check [X] if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

I Website: www.alexandriasingers.com

J Tax-exempt status (check only one) - [X] 501(c)(3) [] 501(c) () (insert no.) [] 4947(a)(1) or [] 527

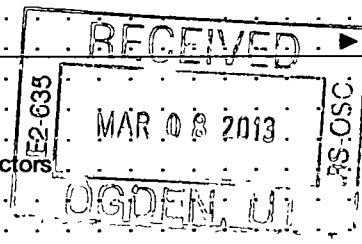
K Check [] if the organization is not a section 509(a)(3) supporting organization or a section 527 organization and its gross receipts are normally not more than \$50,000.

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 []

Table with 21 rows and 4 columns. Rows include Revenue (1-9), Expenses (10-17), and Net Assets (18-21). Total revenue is 53,205 and total expenses are 45,013, resulting in net assets of 41,449.



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

		Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O		✓
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)		✓
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?		✓
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O		✓
c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III		✓
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		✓
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a		
b	Did the organization file Form 1120-POL for this year?		✓
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?		✓
b	If "Yes," complete Schedule L, Part II and enter the total amount involved		
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 ▶ _____ ; section 4912 ▶ _____ ; section 4955 ▶ _____		
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 ▶ _____		
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization ▶ _____		
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. ▶ None		
42a	The organization's books are in care of ▶ James R. Miller Telephone no. ▶ 703-941-7464 Located at ▶ PO Box 6151, Alexandria, VA ZIP + 4 ▶ 22306		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country: ▶ _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	42b	✓
c	At any time during the calendar year, did the organization maintain an office outside the U.S.? If "Yes," enter the name of the foreign country: ▶ _____	42c	✓
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43		
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	✓
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	✓
45b	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)	45b	✓

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	Yes		No
				✓

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 or have a section 501(h) election in effect during the tax year? 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) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
None				

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

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 . . . ▶ _____

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>James R. Miller</i> Signature of officer	7/3/13 Date
	James R. Miller, 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

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2011

Open to Public Inspection

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.

Department of the Treasury
Internal Revenue Service

Name of the organization

Employer identification number

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?

	Yes	No
11g(i)		
 - (ii) A family member of a person described in (i) above?

	Yes	No
11g(ii)		
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11g(iii)		
 - h Provide the following information about the supported organization(s).

(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 US?		(vii) Amount of support
			Yes	No	Yes	No	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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	22,755	23,124	35,583	22,894	20,098	124,454
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	22,755	23,124	35,583	22,894	20,098	124,454
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)						21,865
6 Public support. Subtract line 5 from line 4.						102,589

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4	22,755	23,124	35,583	22,894	20,098	124,454
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	290	147	785	244	217	1,683
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						126,137
12 Gross receipts from related activities, etc. (see instructions)					12	98,926
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 type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f))	14	81 %
15 Public support percentage from 2010 Schedule A, Part II, line 14	15	84 %
16a 33 1/3% support test—2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input checked="" type="checkbox"/>		
b 33 1/3% support test—2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2011. 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—2010. 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"/>		

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2010 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests—2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Alexandria Singers 2011-2012
Special Events
Form 990-EZ, Part I, Line 6

Line 6	<u>Entertainment</u>			<u>House Party</u>		<u>Total</u>
	<u>Other</u>	<u>Books</u>	<u>Scrip</u>	<u>Amazon</u>	<u>Fundraiser</u>	
Gross Receipts	\$3,420	\$0	\$0	\$279	\$3,287	\$6,986
Less: Contributions	\$0			\$0	\$0	\$0
Sub total	\$3,420	\$0	\$0	\$279	\$3,287	\$6,986
Less: Direct Benefit Costs	(\$1,830)	\$0	\$0	\$0	(\$1,712)	(\$3,542)
Net Income	\$1,590	\$0	\$0	\$279	\$1,575	\$3,444

Line 7	<u>Music</u>	<u>CD's & DVD's</u>	<u>Uniforms</u>	<u>Misc Ops</u>	<u>Total</u>
Revenue	\$2,412	\$1,640	\$0	\$58	\$4,110
Costs	(\$2,684)	(\$3,173)	\$0	\$0	(\$5,857)
Net Income(Loss)	(\$272)	(\$1,533)	\$0	\$58	(\$1,748)

Schedule Part IV A	<u>2011</u>	<u>2010</u>	<u>2009</u>	<u>2008</u>	<u>2007</u>	total
Line 1 & 3 990ez	Line 1 \$ 20,098	\$22,894	\$35,583	\$23,124	\$22,755	\$124,454
	Line 5 \$0	\$0	\$15,000	\$3,420	\$3,445	\$21,865
	line 8 \$217	\$244	\$785	\$147	\$290	\$1,683
	line 6					\$102,589
	line 11					\$126,137
Line 2 990ez	line 12 27694	\$22,806	\$13,805	\$16,516	\$18,105	\$98,926
	line 14					81%

Alexandria Singers
Other Expenses
Form 990-EZ, 2011, Part I, Line 16

Equipment Rental	\$ 400
Other Performance Costs	1,197
Insurance	1,767
Telephone	504
Bank Charges	808
ASCAP fees	749
Website	266
In-Kind	3,500
Miscellaneous	955
	<hr/>
Total Other Expenses	\$ 10,146

Statement 3
51-0188861

Alexandria Singers
Other Changes in Net Assets
Form 990-EZ, Part I, Line 20- 2011

Unrealized gain (loss) on Investment	\$ 538
	<hr/>
Total Other Changes in Net Assets	\$ 538

Statement 3

Alexandria Singers
Statement of Program Service Accomplishments
Form 990-EZ, Part III -2011

The Mission of the Alexandria Singers is to perform American popular and patriotic music; to inspire new generations of singers; to broaden our reach to include all ages within the American culture; and to celebrate this music by presenting it locally, nationally and abroad.

We believe music is essential to the human spirit and that singing promotes joy, fellowship, and understanding which transcends racial, ethnic, social, religious, and cultural barriers.

The Alexandria Singers is a non-profit, mixed voice choral group that performs predominately American popular music, including pop tunes, show tunes, golden oldies, country and jazz – the only one of its kind in the Washington DC area. Founded in 1975 by 16 people, the group has grown to more than 50 members. Singers range in age from 20 to 70 and hold a variety of jobs and interests. What they all have in common is their love of singing. The Alexandria Singers are sponsored by the City of Alexandria, Virginia.

Over the last twenty years the Singers have performed in many places including the Kennedy Center, DAR Constitution Hall, the Alexandria Lyceum, the Mormon Visitor's Center and the George Washington Masonic Memorial. They also performed at various events including the Alexandria Red Cross Waterfront Festival, the WKYS Radio's Capitol City Music Festival, Christmas in Washington program for Ronald Regan, the Inaugural Songfest at the Kennedy Center for President-Elect Jimmy Carter, and the annual Christmas Eve benefit for the Salvation Army hosted by WMAL-FM. The Alexandria Singers have also joined other area musical groups in various concerts including the Alexandria Harmonizers, the Air Force Band, the Washington Symphonic Brass and Percussion Ensemble, the Arlington Symphony, the Mormon Choir of Washington and the Capitol Steps.

Bringing music to the community has always been an important part of the Singers' service. Each year the schedule includes concerts at area hospitals and nursing homes to reach those individuals that cannot attend our normal performances. They also perform free concerts at Market Square and Fort Ward Park every year. On occasion, you may even see the Singers performing in one of the metropolitan area malls.

Alexandria Singers
List of Officers, Directors, Trustees, and Key Employees
Form 990-EZ, Part IV - 2011

<u>Name and Address</u>	<u>Avg. Hours Per Week</u>		<u>Benefit Plans and Def Comp</u>	<u>Expense Account</u>
Marla Howell P.O. Box 6151 Alexandria, VA 22306	President 10 hours	\$ -	\$ -	\$ -
April Carter P.O. Box 6151 Alexandria, VA 22306	Vice President 10 hours	\$ -	\$ -	\$ -
Jane Stewart P.O. Box 6151 Alexandria, VA 22306	Vice President Development 10 hours	\$ -	\$ -	\$ -
Catherine Colosimo P.O. Box 6151 Alexandria, VA 22306	Vice President Marketing 10 hours	\$ -	\$ -	\$ -
Nicole Erbar P.O. Box 6151 Alexandria, VA 22306	Vice President Performance 10 hours	\$ -	\$ -	\$ -
Danielle McVey P.O. Box 6151 Alexandria, VA 22306	Vice President Membership 10 hours	\$ -	\$ -	\$ -
Kadira Coley P.O. Box 6151 Alexandria, VA 22306	Secretary 5 hours	\$ -	\$ -	\$ -
James Miller P.O. Box 6151 Alexandria, VA 22306	Treasurer 5 hours	\$ -	\$ -	\$ -

Art Brill Jr. P.O. Box 6151 Alexandria, VA 22306	Past President 5 hours	\$ -	\$ -	\$ -
Linda Hemphill P.O. Box 6151 Alexandria, VA 22306	Accompanyist (non-voting) 5 hours	\$ -	\$ -	\$ -
Karen Reedy P.O. Box 6151 Alexandria, VA 22306	Choreographer (non-voting) 10 hours	\$ -	\$ -	\$ -
William Colosimo P.O. Box 6151 Alexandria, VA 22306	Music Director 10 hours	\$ -	\$ -	\$ -
Evan Dosik P.O. Box 6151 Alexandria, VA 22306	At-Large 5 hours	\$ -	\$ -	\$ -
Brittany Rouin P.O. Box 6151 Alexandria, VA 22306	At-Large 5 hours	\$ -	\$ -	\$ -
Carrie Helfin P.O. Box 6151 Alexandria, VA 22306	At-Large 5 hours	\$ -	\$ -	\$ -

\$ -