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Form **990-EZ**

3.

Department of the Treasury Internal Revenue Service

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

OMB No 1545-1150

2011

Open to Public Inspection

A	For the	2011 calenda	ar year, or tax year beginning November 1 , 2011, and ending	October	31 , 20 12
В	Check if ap	plicable	C Name of organization D	Employer ic	lentification number
	Address cl	hange	Groove, Inc.	4	16-0459062
	Name chai	nge	Number and street (or P O box, if mail is not delivered to street address) Room/suite E	Telephone r	number
님	Initial retur		PO Box 528	(60	05) 360-9468
H	Terminated Amended		City or town, state or country, and ZIP + 4	Group Exe	emption
ŏ	Application		Sioux Falls, SD 57101	Number	>
G	Account	ing Method	✓ Cash Accrual Other (specify) ► H Che	eck 🕨 🗹	if the organization is not
ı	Websit	e. ► www	.sfgroove.us req	uired to at	tach Schedule B
J,	Tax-exem	npt status (che	eck only one) — 501(c)(3)	rm 990, 99	0-EZ, or 990-PF)
K	Check ▶		e organization is not a section 509(a)(3) supporting organization or a section 527 organization a		
	not more	e than \$50,00	0 A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may b	e required	(see instructions). But if
	_		ses to file a return, be sure to file a complete return		
			b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Pa	art II,	
_	line 25, c		w) are \$500,000 or more, file Form 990 instead of Form 990-EZ	<u> </u>	<u> </u>
ŀ	Part I		e, Expenses, and Changes in Net Assets or Fund Balances (see the ins		
		Check if	the organization used Schedule O to respond to any question in this Part I		
	1		ons, gifts, grants, and similar amounts received		9,370.00
	2	•	ervice revenue including government fees and contracts	. 2	16,090.00
	3	Membersh	ip dues and assessments	3	65,256.00
	4	Investment	1 1	. 4	57.00
	5a		ount from sale of assets other than inventory		
	b		or other basis and sales expenses		
	С	•	ss) from sale of assets other than inventory (Subtract line 5b from line 5a)	. <u>5c</u>	
	6	_	d fundraising events		
ď	a		ome from gaming (attach Schedule G if greater than		
Revenue			6a		
ρΛά	} b		ome from fundraising events (not including \$of contributions raising events reported on line 1) (attach Schedule G if the		
ď	:		ch gross income and contributions exceeds \$15,000) 6b 22,09	5 00	
	1 _			1.00	
	d		ct expenses from gaming and fundraising events 6c 2.49 e or (loss) from gaming and fundraising events (add lines 6a and 6b and subtra		
	"			. 6d	19,604.00
	7a	•		5.00	10,004.00
	b		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	5.00	
	6		it or (loss) from sales of inventory (Subtract line 7b from line 7a)	. 7c	770.00
	8		nue (describe in Schedule O)	. 8	1,993.00
	9			▶ 9	113,140.00
_	10	Grants and	d similar amounts paid (list in Schedule 0)	. 10	<u> </u>
	11		aid to or for members	11	
Ų	l l	Salaries, o	ther compensation, and employed enemals R 1 8 2013 . O	. 12	
o's	13	Profession	al fees and other payments to independent contractors	. 13	41,495.00
Fynenses	14			. 14	15,112.00
Ä	15	Printing, p	y, rent, utilities, and maintenance OGDEN, UT.	. 15	2,713.00
	16		enses (describe in Schedule O)	. 16	47,940.00
	17		enses. Add lines 10 through 16		107,260.00
	10	Excess or	(deficit) for the year (Subtract line 17 from line 9)	. 18	5,880.00
ģ	19		s or fund balances at beginning of year (from line 27, column (A)) (must agree w	rith	,
Not Accote	é	end-of-yea	ar figure reported on prior year's return)	. 19	134,561.00
į	20	Other cha	nges in net assets or fund balances (explain in Schedule O)	. 20	
2	21		s or fund balances at end of year Combine lines 18 through 20		140,441.00

orm	990-EZ (2011)							Page 2
Pa	rt II Balance Sheets. (see the instructions f	for Part II.)					-	
	Check if the organization used Schedule	O to respond to an	y question in this				<u></u>	
	•		<u> </u>	(A) Beginnir	<u> </u>	_		(B) End of year
22	Cash, savings, and investments				54,27	70.00	\rightarrow	43,979.00
23	S .		[23	
24	Other assets (describe in Schedule O)		[_	1.00	\rightarrow	96,462.00
25	Total assets			1:	34,56	31.00	-	140,441.00
26	Total liabilities (describe in Schedule O)					0.00		0.00
27	Net assets or fund balances (line 27 of column				34,56	31.00	27	140,441.00
ar'	t III Statement of Program Service Accomp	•		-				Expenses
	Check if the organization used Schedule		· · · · · · · · · · · · · · · · · · ·	Part III	•	<u>. </u>		equired for section
۷ha	it is the organization's primary exempt purpose?	Music Education and	l Performance					1(c)(3) and 501(c)(4) ganizations and section
s n	cribe the organization's program service accomplis neasured by expenses. In a clear and concise ma ons benefited, and other relevant information for ea	anner, describe the					494	47(a)(1) trusts, optional others)
28	Percussion/music education for 100 students, giving		v to learn and perfo	rm music.				
	including innovative marching shows. Also provides							
	group that upholds and teaches high moral and ethic							
	- 	includes foreign gra	nts, check here .	· · · ·	▶		28	a 107,260.00
29			,					
	(Grants \$) If this amount i	ıncludes foreign gra	nts, check here .		>		29	a
30								-
		•••••						
	(Grants \$) If this amount i	includes foreign gra	nts, check here .		>		30	а
31	Other program services (describe in Schedule O)							
		ıncludes foreign gra			>		31	a
32	Total program service expenses (add lines 28a t					•	32	
Par	t IV List of Officers, Directors, Trustees, and Key	Employees. List eac	h one even if not cor	npensated	. (see	the i	nstr	uctions for Part IV.)
	Check if the organization used Schedule	O to respond to an						<u> 🗆</u>
		(b) Title and average	(c) Reportable compensation	(d) Hea			00 6	e) Estimated amount of
	(a) Name and address	hours per week devoted to position	(Forms W-2/1099-MISC) benefit	plans	, and	'	other compensation
		devoted to position	(if not paid, enter -0-	deferred o	ompe	ensatio	n	
	n Stoel	President - 15						
	8 Shenandoah Cir, Sioux Falls SD 57103	hours	-0	<u>-</u>				
Vick	ki Walz	Vice President - 4						
150	0 Vista Lane, Sioux Falls SD 57105	hours	-	-			_	
Vic	hele Novacek	Treasurer - 15		1				
7130	0 W Rosemont Ln, Sioux Falls SD 57106	hours	-0	·			┵	
Pau	l Dyke	Past President - 4						
465	72 257th St, Hartford SD 57033	hours	-() -			_	
	i Dyke	Member At-Large -						
	72 257th St, Hartford SD 57033	4 hours	-()-			+	
	Hubers	Member At-Large -						
	W 16th St, Sioux Falls SD 57104	2 hours	(-			\perp	
	a White	Member At-Large -						
	1 S Florence Ave, Sioux Falls SD 57103	2 hours	-(\bot	
	e Hansen	Executive Director -						
280	0 S Lyndale Ave, Sioux Falls SD 57105	15-20 hours	18,500.0	0			4	

Part				
_	instructions for Part V.) Check if the organization used Schedule O to respond to any question in this		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	33		
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		✓
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)?	35a		✓
b c	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O 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	35b 35c		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		✓
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a			<u> </u>
ь 38а	Did the organization file Form 1120-POL for this year?	37b		_
ooa	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		1
b	If "Yes," complete Schedule L, Part II and enter the total amount involved			
39	Section 501(c)(7) organizations. Enter:			i
a	Initiation fees and capital contributions included on line 9	-		[
b 40a	Gross receipts, included on line 9, for public use of club facilities			
700	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			l
	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		1
С	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			
е	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		1
41	List the states with which a copy of this return is filed. ▶	205) 2		
42a	The organization's books are in care of ► Michele Novacek Located at ► 7130 W Rosemont Ln, Sioux Falls SD ZIP + 4 ►	605) 36	50-946 106	38
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over		··-	No
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		1
	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.			
С	At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c		✓
43	If "Yes," enter the name of the foreign country: ► Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here			▶ 🗆
	and enter the amount of tax-exempt interest received or accrued during the tax year		Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be	<u> </u>	. 63	140
_	completed instead of Form 990-EZ	44a		1
Ь	completed instead of Form 990-EZ	44b		
С	Did the organization receive any payments for indoor tanning services during the year?	44c		1
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an			<u> </u>
	explanation in Schedule O	44d	<u> </u>	1
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		_

_									
Form 990	0-EZ (20	111)							Page 4
		e organization engage, directly or in					l	Yes	No
		ndidates for public office? If "Yes," o					46		✓
Part \		Section 501(c)(3) organizations 501(c)(3) organizations and section and 52, and complete the tables	on 4947(a)(1) none: for lines 50 and 51	kempt charitable	trusts mu	st answer qu			ь
		Check if the organization used Sch	edule O to respond	to any question in	n this Part	<u>VI</u>	· · ·	Yes	
		ne organization engage in lobbying if "Yes," complete Schedule C, Part		section 501(h) elec	tion in effe	ect during the	tax . 47		No ✓
48	Is the	organization a school as described in	section 170(b)(1)(A)(i	i)? If "Yes," complet	te Scheduk	eE	. 48		1
49a	Did th	e organization make any transfers to	an exempt non-cha	ritable related orga	nization?		49	а	✓
b	If "Ye	s," was the related organization a se	ction 527 organizatio	on?			. 49	-	<u> </u>
		plete this table for the organization's							
	emplo	oyees) who each received more than	\$100,000 of compe	nsation from the org			e, enter '	None	
	(a) Na	ame 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-MIS	contribut	ealth benefits, lons to employee ans, and deferred mpensation	(e) Estima other co	ated amo	
									
					-				
f 51	Comp	number of other employees paid over olete this table for the organization's 000 of compensation from the orga	s five highest comp		ent contrac	tors who eacl	n receive	d mor	e than
(a) l	Name a	nd address of each independent contractor pai	d more than \$100,000	(b) Type of s	service	(c) Compens	ation	
				-					
				-					
				·					
d 52		number of other independent contra ne organization complete Schedule A			. ▶ ons and 49	47(a)(1)		,	
	none	xempt charitable trusts must attach a of perjury, I declare that I have examined this r	a completed Schedu	le A		<u> _.</u>	▶ ☐ Y		No
true, cor	rect, an	d complete Declaration of preparation other than	officer) is based on all info	ormation of which prepa	rer has any kr	lowledge 04 4 h	13	201	3
Sign		Signature of officer			<u>-</u>	Date		- ~ 1	
Here		Michele Novacek, Treasurer, Groo	ve, Inc.						
		Type or print name and title	10	 · -	D-4-	 	- DT'S		
Paid Prepa	arer	Print/Type preparer's name	Preparer's signature		Date	Check self-emplo	oyed PTIN	•	
Use (Firm's name ▶				Firm's EIN ▶			

Firm's address

May the IRS discuss this return with the preparer shown above? See instructions

► ☐ Yes ☐ No

Phone no

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047
2011
Open to Public

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

ove, inc.											
rt I Reason f	or Public Char	ity Status (All organ	nizations	must c	omplete	this par	t.) See ir	nstructio	ns		
organization is not	a private founda	tion because it is: (For	r lines 1 tl	hrough 1	1, check	only one	box.)				
A church, con	vention of church	nes, or association of	churches	describe	ed in sec t	tion 170(b)(1)(A)(i)).			
A school desc	ribed in section	170(b)(1)(A)(ii). (Attac	h Schedu	ıle E.)							
A hospital or a	cooperative hos	pital service organiza	tion desc	ribed in s	section 1	70(b)(1)(A)(iii).				
	_		tion with	a hospita	al descrit	oed in se	ction 170)(b)(1)(A)(i	ii). Ente	r the	
An organization	n operated for t	he benefit of a collec	ge or univ	ersity ov	vned or	operated	by a gov	vernmenta	al unit d	escrit	ed in
✓ An organization	n that normally	receives a substantia	l part of ı					ut or from	the ger	neral (oublic
☐ A community	rust described in	section 170(b)(1)(A)	(vi). (Com	nplete Pa	rt II.)						
An organization receipts from support from	n that normally activities related gross investme	receives. (1) more tha I to its exempt functi nt income and unreli	ın 33¹/₃% ons−sub ated bus	of its su oject to c iness tax	ipport fro certain ex kable inc	ceptions come (les	, and (2) s sectioi	no more	than 33	31/3%	of its
An organization	n organized and	operated exclusively	to test fo	r public s	safety. Se	e sectio	n 509(a)(4).			
	-			-	-				or to ca	rry o	ut the
509(a)(3). Che	ck the box that o	describes the type of s	supportin	g organiz	ation and	d comple	te lines 1	1e throug	h 11h.		
a 🗌 Type I	ь 🗆 :	Type II c	☐ Type	III–Functi	ionally int	tegrated		d□	Type II	I–Oth	er
• • •		• •			-	-	y by one	or more o	lisqualifi	ed pe	rsons
or section 509	(a)(2).										
f If the organiz	ation received a	written determination	n from t	he IRS t	hat it is	a Type	I, Type I	II, or Typ	e III sup	porti	ng
organization, o	check this box .										. 🗆
		ne organization accep	oted any	gift or co	ontributio	n from a	ny of the)			
• •		ndirectly controls, eith	ner alone								
				or toget	her with	persons	described	d in (ii) an	d	Yes	No
• •	-						described	d ın (ıı) an		+	No
• • •		ody of the supported of	organızatı	on?			described	d in (ii) an	11g(i)		No
	•	ody of the supported on described in (i) abo	organızatı ve?	on?			described	d in (ii) an 	11g(i)		No
	ntrolled entity of	ody of the supported o on described in (i) abo a person described in	organızatı ve? (ı) or (ıı) a	on? above? .			described	d in (ii) an	11g(i)		No
h Provide the fo	ntrolled entity of	ody of the supported on on described in (i) abo a person described in on about the supporte	organizati ve? (i) or (ii) a ed organi	on? above? . zation(s).					11g(i) 11g(ii 11g(iii)	
	ntrolled entity of	ody of the supported of on described in (i) about a person described in on about the supported (iii) Type of organization (described on lines 1-9 above or IRC section	organızatı ve? (ı) or (ıı) a	on?	(v) Did y the organ		(vi) l organizat (i) organi	d in (ii) an	11g(ii 11g(ii 11g(iii		
h Provide the fo	ntrolled entity of	ody of the supported of on described in (i) about a person described in on about the supporter (iii) Type of organization (described on lines 1-9	organizatiove? (i) or (ii) a ed organia (iv) is the organicol (i) is	on?	(v) Did y the organ	ou notify	(vi) l organizat (i) organi	s the tion in col	11g(ii 11g(ii 11g(iii)) mount	
h Provide the fo	ntrolled entity of	ody of the supported of on described in (i) about a person described in on about the supported (iii) Type of organization (described on lines 1-9 above or IRC section	organizati ve? (i) or (ii) a ed organi (iv) is the o in col (i) lis governing o	on?	(v) Did y the organ col (i) sup	ou notify nization in of your port?	(vi) I organizat (i) organi	is the tion in col zed in the S ?	11g(ii 11g(ii 11g(iii)) mount	
h Provide the fo	ntrolled entity of	ody of the supported of on described in (i) about a person described in on about the supported (iii) Type of organization (described on lines 1-9 above or IRC section	organizati ve? (i) or (ii) a ed organi (iv) is the o in col (i) lis governing o	on?	(v) Did y the organ col (i) sup	ou notify nization in of your port?	(vi) I organizat (i) organi	is the tion in col zed in the S ?	11g(ii 11g(ii 11g(iii)) mount	
h Provide the fo	ntrolled entity of	ody of the supported of on described in (i) about a person described in on about the supported (iii) Type of organization (described on lines 1-9 above or IRC section	organizati ve? (i) or (ii) a ed organi (iv) is the o in col (i) lis governing o	on?	(v) Did y the organ col (i) sup	ou notify nization in of your port?	(vi) I organizat (i) organi	is the tion in col zed in the S ?	11g(ii 11g(ii 11g(iii)) mount	
h Provide the fo	ntrolled entity of	ody of the supported of on described in (i) about a person described in on about the supported (iii) Type of organization (described on lines 1-9 above or IRC section	organizati ve? (i) or (ii) a ed organi (iv) is the o in col (i) lis governing o	on?	(v) Did y the organ col (i) sup	ou notify nization in of your port?	(vi) I organizat (i) organi	is the tion in col zed in the S ?	11g(ii 11g(ii 11g(iii)) mount	
h Provide the fo	ntrolled entity of	ody of the supported of on described in (i) about a person described in on about the supported (iii) Type of organization (described on lines 1-9 above or IRC section	organizati ve? (i) or (ii) a ed organi (iv) is the o in col (i) lis governing o	on?	(v) Did y the organ col (i) sup	ou notify nization in of your port?	(vi) I organizat (i) organi	is the tion in col zed in the S ?	11g(ii 11g(ii 11g(iii)) mount	
	organization is not A church, conv A school description of a medical reservation 170(b) A federal, state of an arganization of a community in a community	organization is not a private foundar A church, convention of church A school described in section A hospital or a cooperative hose A medical research organization hospital's name, city, and state An organization operated for the section 170(b)(1)(A)(iv). (Composition 170(b)(1)(A)(iv). A federal, state, or local governous An organization that normally indescribed in section 170(b)(1)(A)(A)(A)(A)(A)(A)(A)(A)(A)(A)(A)(A)(A)	organization is not a private foundation because it is: (Foi A church, convention of churches, or association of A school described in section 170(b)(1)(A)(ii). (Attact A hospital or a cooperative hospital service organiza A medical research organization operated in conjunct hospital's name, city, and state: An organization operated for the benefit of a colleg section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A) An organization that normally receives a substantial described in section 170(b)(1)(A)(vi). (Complete Part III.) An organization that normally receives. (1) more that receipts from activities related to its exempt function support from gross investment income and unrelest acquired by the organization after June 30, 1975. See An organization organized and operated exclusively An organization organized and operated exclusively purposes of one or more publicly supported organication of the section 509(a)(3). Check the box that describes the type of section 509(a)(3). Check the box that describes the type of section 509(a)(2). By checking this box, I certify that the organization other than foundation managers and other than one or section 509(a)(2). If the organization received a written determination organization, check this box	organization is not a private foundation because it is: (For lines 1 ti A church, convention of churches, or association of churches A school described in section 170(b)(1)(A)(ii). (Attach Schedul A hospital or a cooperative hospital service organization described in search organization operated in conjunction with hospital's name, city, and state: An organization operated for the benefit of a college or universection 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives. (1) more than 331/3/9/0 receipts from activities related to its exempt functions—subsupport from gross investment income and unrelated bus acquired by the organization after June 30, 1975. See section An organization organized and operated exclusively to test fo An organization organized and operated exclusively for the purposes of one or more publicly supported organizations of 509(a)(3). Check the box that describes the type of supportin a Type I b Type II c Type By checking this box, I certify that the organization is not corditer than foundation managers and other than one or more or section 509(a)(2). If the organization received a written determination from torganization, check this box. Since August 17, 2006, has the organization accepted any	organization is not a private foundation because it is: (For lines 1 through 1 A church, convention of churches, or association of churches described A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in a medical research organization operated in conjunction with a hospital hospital's name, city, and state: An organization operated for the benefit of a college or university over section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in an organization that normally receives a substantial part of its support described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part III.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part III.) An organization that normally receives. (1) more than 331/3% of its sureceipts from activities related to its exempt functions—subject to a support from gross investment income and unrelated business tax acquired by the organization after June 30, 1975. See section 509(a)(a) An organization organized and operated exclusively to test for public supported by the organization after June 30, 1975. See section 509(a)(a) An organization organized and operated exclusively for the benefit purposes of one or more publicly supported organizations described 509(a)(3). Check the box that describes the type of supporting organization and provided than foundation managers and other than one or more publicly or section 509(a)(2). If the organization received a written determination from the IRS to organization, check this box. Since August 17, 2006, has the organization accepted any gift or controlled and other than one or more publicly organization, check this box.	organization is not a private foundation because it is: (For lines 1 through 11, check A church, convention of churches, or association of churches described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 1 A medical research organization operated in conjunction with a hospital describ hospital's name, city, and state: An organization operated for the benefit of a college or university owned or section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 2 An organization that normally receives a substantial part of its support from a described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part III.) An organization that normally receives. (1) more than 331/3% of its support from receipts from activities related to its exempt functions—subject to certain essupport from gross investment income and unrelated business taxable incacquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See An organization organized and operated exclusively for the benefit of, to purposes of one or more publicly supported organizations described in sect 509(a)(3). Check the box that describes the type of supporting organization and a Type II b Type II c Type III—Functionally in the By checking this box, I certify that the organization is not controlled directly or other than foundation managers and other than one or more publicly supported or section 509(a)(2). If the organization received a written determination from the IRS that it is organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution following persons?	organization is not a private foundation because it is: (For lines 1 through 11, check only one A church, convention of churches, or association of churches described in section 170(b) A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(c) A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(a)(iii). (A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iv). (Complete Part II.) A organization operated for the benefit of a college or university owned or operated section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1) An organization that normally receives a substantial part of its support from a government described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part III.) An organization that normally receives. (1) more than 331/3% of its support from contring receipts from activities related to its exempt functions—subject to certain exceptions support from gross investment income and unrelated business taxable income (less acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section An organization organized and operated exclusively for the benefit of, to perform the purposes of one or more publicly supported organizations described in section 509(a) 509(a)(3). Check the box that describes the type of supporting organization and completed and prefer by that the organization is not controlled directly or indirectly other than foundation managers and other than one or more publicly supported organization foundation managers and other than one or more publicly supported organization, check this box	organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(ii). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170 hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a gosection 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental undescribed in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives. (1) more than 331/3% of its support from contributions, receipts from activities related to its exempt functions—subject to certain exceptions, and (2) support from gross investment income and unrelated business taxable income (less section acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively for the benefit of, to perform the funct purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 1 a	organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). An organization operated for the benefit of a college or university owned or operated by a governmenta section 170(b)(1)(A)(iii). (Complete Part III.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from described in section 170(b)(1)(A)(vi). (Complete Part III.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part III.) An organization that normally receives. (1) more than 331/39% of its support from contributions, membersl receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more support from gross investment income and unrelated business taxable income (less section 511 tax acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e throug a Type I b Type II c Type III—Functionally integrated d Described or section 509(a)(2). By checking this box, I certify that the organization is not controlled directly or indirectly by one or more of the organization received a written determination f	organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Ente hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit of section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the ger described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part III.) An organization that normally receives. (1) more than 331/3% of its support from contributions, membership fees receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 support from gross investment income and unrelated business taxable income (less section 511 tax) from acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to ca purposes of one or more publicly supported organizations described in section 509(a)(1). Section 509(a)(2). (Somplete Part III.) Byochecking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualify other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(2). If t	organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit describes section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general gescribed in section 170(b)(1)(A)(iv). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives. (1) more than 331/3% of its support from contributions, membership fees, and receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% support from gross investment income and unrelated business taxable income (less section 511 tax) from busin acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry or 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. By checking this box, I certify that the organization is not controlled directly or indirectly by one or mor

Total

Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (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	on A. Public Support						
Calen	dar 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.")	62,542.00	54,257.00	86,304.00	72,831.00	74,626.00	350,560.00
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	62,542.00	54,257.00	86,304.00	72,831.00	74,626.00	350,560.00
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4.						350,560.00
	on B. Total Support					•	
	dar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4	62,542.00	54,257.00	86,304.00	72,831.00	74,626.00	350,560.00
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	104.00	19.00	40.00	63.00	57.00	283.00
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	(40	350,843.00
12 13	Gross receipts from related activities, etc First five years. If the Form 990 is for the					ar as a section	153,351.00 n 501(c)(3)
	organization, check this box and stop he						
Secti	on C. Computation of Public Suppor						
14	Public support percentage for 2011 (line			1, column (f))		14	99.9 %
15	Public support percentage from 2010 Scl		-			15	99.9 %
16a	331/3% support test-2011. If the organi	zation did not d	check the box	on line 13, and	l line 14 is 33 ¹	3% or more, cl	neck this
	box and stop here. The organization qua			_			. ▶ ☑
b	331/3% support test—2010. If the organ check this box and stop here. The organ					15 is 33 ¹ / ₃ % (or more, . ► □
17a	10%-facts-and-circumstances test—2 10% or more, and if the organization me Part IV how the organization meets the "lorganization	ets the "facts-a	and-circumsta imstances" tes	nces" test, che	eck this box an	nd stop here. E	xplain in
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organiza Explain in Part IV how the organization in supported organization	tion meets the neets the "facts	facts-and-c	rcumstances" tances" test. T	test, check th	ns box and ste	op here.
18	Private foundation. If the organization d instructions						see . ▶ □
		· · · ·		· · · ·			

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.)

Sooti.	on A Public Support	under the te	sts listed beit	Jvv, piease ce	inpicte rait		
	on A. Public Support	(a) 0007	(F) 0000	(=) 0000	(4) 0040	(a) 2011	(f) Total
	dar year (or fiscal year beginning in) Gifts, grants, contributions, and membership fees	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise				<u>.</u>		
_	sold or services performed, or facilities						
	furnished in any activity that is related to the						
3	organization's tax-exempt purpose					. –	
3	unrelated trade or business under section 513				!		
4							
4	Tax revenues levied for the organization's benefit and either paid				l		
	to or expended on its behalf						
5	The value of services or facilities		+	<u> </u>			
3	furnished by a governmental unit to the				1		
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						L
. u	received from disqualified persons .						
h	Amounts included on lines 2 and 3						
b	received from other than disqualified						
	persons that exceed the greater of \$5,000				1		
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b		<u>†</u>	 			
8	Public support (Subtract line 7c from		<u> </u>				
	line 6.)					1	
Secti	on B. Total Support	I		1			
	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6		13,232	,,====	1	.,,	
10a		-			1		
	payments received on securities loans, rents,						
	royalties and income from similar sources .						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses				1		
	acquired after June 30, 1975		<u> </u>				
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether			1		1	1
	or not the business is regularly carried on						
12	Other income. Do not include gain or		1				
	loss from the sale of capital assets						
	(Explain in Part IV.)		1	<u> </u>			
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	L					L
14	First five years. If the Form 990 is for the		n's first, secor	nd, third, fourth	n, or fifth tax y	ear as a section	on 501(c)(3)
	organization, check this box and stop he					·	<u> </u>
Secti	on C. Computation of Public Suppo						
15	Public support percentage for 2011 (line		-			15	<u>%</u>
16	Public support percentage from 2010 Sc			<u> </u>		16	<u> </u>
Secti	on D. Computation of Investment In						
17	Investment income percentage for 2011						<u>%</u>
18	Investment income percentage from 201					18	<u>%</u>
19a	331/3% support tests - 2011. If the organ						
	17 is not more than 331/3%, check this box						
b	331/3% support tests - 2010. If the organi						
	line 18 is not more than 331/3%, check this						
20	Private foundation. If the organization d	id not check a	a box on line 14	1, 19a, or 19b,	check this box	and see instru	uctions 🕨 🔲

	orm 990 or 990-EZ) 2011
IV .	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).
	

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, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ. ► See separate instructions. Name of the organization **Employer identification number** 46-0459062 Groove, Inc. Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. e Solicitation of non-government grants ■ Mail solicitations ☐ Solicitation of government grants Internet and email solicitations Phone solicitations Special fundraising events d In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (or retained by) fundraiser listed in col (i) (iii) Did fundraiser have (vi) Amount paid to (iv) Gross receipts (i) Name and address of individual (ii) Activity custody or control of contributions? (or retained by) organization from activity or entity (fundraiser) عم۷ Nο 1 2 3 10 Total 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.

Part II

-		, ,	n \$5,000. (a) Event #1 Groovy Evening (event type)	(b) Event #2 Pancake Breakfast (event type)	(c) Other events Drums n' Dogs (total number)	(d) Total events (add col (a) through col (c))
Revenue	1 2	Gross receipts Less: Charitable contributions	7,214.00	7,988.00	5,862.00	21,064.00
	3	Gross income (line 1 minus line 2)	7,214.00	7,988.00	5,862.00	21,064.00
	4	Cash prizes				
	5	Noncash prizes				
nses	6	Rent/facility costs			550.00	550.00
Expe	7	Food and beverages		1,549.00	393.00	1,942.00
Direct Expenses	8	Entertainment				
	9	Other direct expenses .				
Do	10 11	Direct expense summary. Ad Net income summary. Comb Gaming. Complete if the	ine line 3, column (d), ar	nd line 10	▶ [(2,492.00) 18,572.00
	rt III		organization answer	ed tes lo ronn 990,	, Part IV, line 19, or re	eported more
		than \$15,000 on Form 9	90-EZ, line 6a.			·
_		than \$15,000 on Form 9	90-EZ, line 6a. (a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1	than \$15,000 on Form 9		• •	(c) Other gaming	(d) Total gaming (add
Revenue	1 2			• •	(c) Other gaming	(d) Total gaming (add
Revenue		Gross revenue		• •	(c) Other gaming	(d) Total gaming (add
	2	Gross revenue		• •	(c) Other gaming	(d) Total gaming (add
Revenue	2	Gross revenue Cash prizes Noncash prizes	(a) Bingo	bingo/progressive bingo		(d) Total gaming (add
Revenue	3	Gross revenue Cash prizes Noncash prizes Rent/facility costs		• •	(c) Other gaming Yes% No	(d) Total gaming (add
Revenue	2 3 4 5	Gross revenue Cash prizes Noncash prizes Rent/facility costs Other direct expenses .	(a) Bingo Yes% No	bingo/progressive bingo Yes% No	□ Yes%	(d) Total gaming (add
Revenue	2 3 4 5	Gross revenue Cash prizes Noncash prizes Rent/facility costs Other direct expenses . Volunteer labor	(a) Bingo Yes % No	□ Yes % □ No	□ Yes% □ No	(d) Total gaming (add
Revenue	2 3 4 5 6 7 8 Era Is	Gross revenue Cash prizes Noncash prizes Rent/facility costs Other direct expenses . Volunteer labor Direct expense summary Active gaming income summare the state(s) in which the orest the organization licensed to out	(a) Bingo Yes % No Id lines 2 through 5 in co	☐ Yes% ☐ No Dlumn (d)	☐ Yes % ☐ No	(d) Total gaming (add col (a) through col (c))

Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more

schedu	le G (Form 990 or 990-EZ) 2011	Page 3
11 12	Does the organization operate gaming activities with nonmembers?	entity
13	Indicate the percentage of gaming activity operated in:	
a	The organization's facility	13a %
b	An outside facility	
14	Enter the name and address of the person who prepares the organization's gaming/special events book records:	s and
	Name ▶	
	Address ▶	
15a	Does the organization have a contract with a third party from whom the organization receives grevenue?	
	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and t amount of gaming revenue retained by the third party ▶ \$	he
С	If "Yes," enter name and address of the third party: Name ▶	
	Name ► Address ►	
16	Gaming manager information:	
	Name ►	
	Gaming manager compensation ▶ \$	
	Description of services provided ▶	
	☐ Director/officer ☐ Employee ☐ Independent contractor	
17 a	Mandatory distributions: Is the organization required under state law to make charitable distributions from the gaming procedure retain the state gaming license?	
b	Enter the amount of distributions required under state law to be distributed to other exempt organizate spent in the organization's own exempt activities during the tax year > \$	ions or
Part	Supplemental Information. Complete this part to provide the explanations required by columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. A part to provide any additional information (see instructions).	Part I, line 2b, Also complete this
		•••••••••••

SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Employer identification number

46-0459062[']

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization 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.

Groove, Inc.	46-0459062				
The amount in Other Revenue line 8 on the 990-EZ form is for Performance Uniforms for \$411.00, Perc	sussion Equipment Rentals for				
\$1,540.00 and Sale of Scrap Metal for \$42.00.					
31,340.00 and Sale of Scrap Metal for \$42.00.					
The amount in Expenses line 16 on the 990-EZ form is for ACH/Bank Fees for \$274.00, Music Equipme	nt Capital and Supplies for \$4,191.00,				
Competition Uniforms for \$5,068.00, Performance Uniforms for \$411.00 and Travel/Competition Show	expenses for \$37,996.00.				
The amount in Other Assets line 24 on the 990-EZ form is for 2 enclosed trailers, 1 blue school bus an	d percussion equipment.				
	•••••				
					
	·····				

Schedule O (Form 990 or 990-EZ) (2011)	Page 2
Name of the organization	Employer identification number
•	
	••••
	······