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Form **990** 

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)

2012

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

Open to Public Inspection

OMB No 1545-0047

A	For the	2012 calendar year, or tax year beginning JUL 1, 2012 and endin	ıg J	UN 30, 2013	<del></del>			
	Check if	C Name of organization		D Employer identific	ation number			
- 1	applicable	THE BROOKLYN QUEENS CONSERVATORY OF	i					
Г	Addres	s   MIXCEC						
F	Name change			11-15	532426			
$\vdash$	Initial	Number and street (or P O box if mail is not delivered to street address)  Room	/eurte	E Telephone number				
F	retum Termin-		/Suite	718-	622-3300			
F	—ated □Amend			G Gross receipts \$	2,987,618.			
F	lreturn ∏Applica			H(a) Is this a group re				
_	Ition pendini			for affiliates?	Yes X No			
		same as C above		H(b) Are all affiliates inc				
_	T		527		list. (see instructions)			
		mpt status X 501(c)(3) 501(c) ( ) ( insert no ) 4947(a)(1) or c: ► WWW - BQCM - ORG	J 321	H(c) Group exemption				
			Vaar		State of legal domicile NY			
		organization X Corporation Trust Association Other ► L Summary	. Teal (	or to mation _ 1 0 5 7   14	State of legal dofficile 111			
		Briefly describe the organization's mission or most significant activities: See Sch	edii	10.0				
ö	1 1	Briefly describe the organization's mission or most significant activities	cuu	10 0				
Activities & Governance	<u>,                                   </u>	Check this box   If the organization discontinued its operations or disposed of	f more	than 25% of its net as	eete -			
Ver		Number of voting members of the governing body (Part VI, line 1a)	i illore	3	12			
င္ပ		Number of voting members of the governing body (rait vi, line ray)		4	12			
∞	1			5	201			
ij		Total number of individuals employed in calendar year 2012 (Part V, line 2a)		6	12			
:;:		Total number of volunteers (estimate if necessary)		7a	0.			
Ą		Total unrelated business revenue from Part VIII, column (C), line 12  Net unrelated business taxable income from Form 990·T, line 34		7b	0.			
_	1 61	Net unrelated business taxable income from Form 990-1, line 34		Prior Year	Current Year			
		Contributions and events (Part VIII June 1h)		640,924.	901,920.			
ī	1	Contributions and grants (Part VIII, line 1h)		1,890,767.	2,016,304.			
Revenue		Program service revenue (Part VIII, line 2g)		262.	19.			
æ	1	Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part <u>VIII, col</u> umn (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		60,677.	69,375.			
	1	Total revenue · add lines 8 through 11 must equal Part, VIII, column (A), line 12)	-	2,592,630.	2,987,618.			
		Grants and similar amounts paid (Part IX) column (A), lines 1-3)	+	0.	83,172.			
		Benefits paid to or formembers (Part IX, column (A) (Inje 4)		0.	0.			
	1	Science of the company of the first to the second of the s		2,206,774.	2,051,255.			
Expenses	15 3	Salaries, other compensation temployee benefits (Part IX, column (A), lines 5-10) Professional fundraising fees (Part IX, column (A), line il 1e)		0.	0.			
ben	100	Total fundraising expenses (Part IX, column (B), Inde25)   113,821.						
찣	17	Other expenses (Part IX, column-(A), lines 11a-11d, 11f-24e)	784,763. 798,41					
		Total expenses. Add lines 13-17 (must equal Part-IX,-column (A), line 25)		2,991,537.	2,932,846.			
		Revenue less expenses. Subtract line 18 from line 12		-398,907.	54,772.			
70	3	Nevertue less expenses. Oubtract line 10 from line 12	Be	ginning of Current Year	End of Year			
ets (	20	Total assets (Part X, line 16)	100	2,102,559.	2,210,875.			
ASS	21	Total liabilities (Part X, line 16)		1,120,800.	1,174,344.			
Net Assets or	22	Net assets or fund balances. Subtract line 21 from line 20		981,759.	1,036,531.			
P	art II	Signature Block						
		Ities of perjury, I declare that I have examined this return, including accompanying schedules and	statem	ents, and to the best of m	y knowledge and belief, it is			
		t, and complete Declaration of preparer (other than officer) is based on all information of which pi						
	,							
Sig	מנ	Signature of officer	_	Date	2) . 1,1			
He		KAREN GEER, EXECUTIVE DIRECTOR		V-1	0-14			
		Type or print name and title						
_		Print/Type preparer's name Preparer's signature / / / /		B 1 0 20 14	PTIN			
Pai	id	Kevin Sunkel	$\Gamma \Gamma$	B 1 0 20 14 self-employ	P00706145			
	parer	Firm's name ▶ Owen J Flanagan & Co	Fırm's EIN ▶	13-2060851				
	Only	Firm's address 60 East 42nd Street						
	_ •	New York, NY 10165		Phone no 2	12-682-2783			
Ma	y the IF	RS discuss this return with the preparer shown above? (see instructions)			X Yes No			
		0-12 I HA For Paperwork Reduction Act Notice, see the separate instructions.			Form <b>990</b> (2012)			

	<u></u>	 		
SIC			11-1532426	Page 2

	t III Statement of Program Service Accomplishments
1 41	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission.
•	THE BROOKLYN QUEENS CONSERVATORY OF MUSIC TRANSFORMS AND ENRICHES THE
	LIVES OF THOSE WHO ARE UNDERSERVED THROUGH MUSIC EDUCATION AND MUSIC
	THERAPY. WE ACCOMPLISH THIS BY PROVIDING MUSIC EDUCATION PROGRAMS IN
	SCHOOLS, COMMUNITY CENTERS, AND COLLABORATING WITH OTHER
2	Did 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?
	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 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 \$ 889,389. including grants of \$ 70,053. ) (Revenue \$ 1,038,830.)
	CONSERVATORY DIVISION: THE CONSERVATORY IS BROOKLYN'S HUB FOR PRIVATE
	INSTRUCTION IN VOICE AND INSTRUMENT, WITH CLASSES AND ENSEMBLES FOR
	STUDENTS OF EVERY AGE AND ABILITY LEVEL. WE SERVE MORE THAN 1,000
	STUDENTS, AGES EIGHT MONTHS THROUGH ADULT. OUR PASSIONATE AND HIGHLY
	TRAINED TEACHERS - SOME OF NEW YORK'S MOST SOUGHT-AFTER PERFORMING
	ARTISTS AND EDUCATORS - TAILOR THEIR INSTRUCTION TO ADDRESS THE
	LEARNING STYLE AND GOALS OF EACH STUDENT, FROM THE BEGINNER TO THE
	ADVANCED STUDENT ASPIRING TO A CAREER IN MUSIC. IN FEBRUARY 2014, THE
	CONSERVATORY LAUNCHES AN INNOVATIVE NEW MUSIC EDUCATION PROGRAM FOR
	CHILDREN AGES 8 MONTHS TO 4 YEARS WITH GRAMMY-WINNER DAN ZANES, WHOSE MUSIC IS A HIT WITH KIDS AND FAMILIES ACROSS THE WORLD.
	MOSIC 15 A HII WITH KIDS AND PARILIES ACROSS THE WORLD:
4b	(Code) (Expenses \$ 467,516. including grants of \$ 0.) (Revenue \$ 365,063.)
70	(Code) (Expenses \$ 467,516 · including grants of \$ 0 · ) (Revenue \$ 303,003 · )  MUSIC PARTNERS: RESPONDING TO A CRITICAL NEED TO RESTORE ARTS EDUCATION
	IN NEW YORK CITYS PUBLIC SCHOOLS, THE CONSERVATORY CREATED ITS MUSIC
	PARTNERS PROGRAM IN 1988 TO PROVIDE AND ENHANCE MUSIC EDUCATION
	PROGRAMS THROUGHOUT THE CITY. NOW WORKING WITH PUBLIC SCHOOLS, CHILD
	CARE CENTERS, YOUTH-BASED AGENCIES, AND ADULT AND SENIOR CENTERS, WE
	PROVIDE MORE THAN 4,500 CHILDREN AND ADULTS WITH LONG TERM, SEQUENTIAL
	AND INSPIRING MUSIC INSTRUCTION. MORE THAN 74% OF OUR STUDENTS LIVE AT
	OR BELOW THE POVERTY LEVEL. MUSIC PARTNERS PROGRAMMING INCLUDES BAND,
	STRINGS, CHORUS, WORLD DRUMMING AND PERCUSSION, GUITAR, UKULELE,
	RECORDER, AND EARLY CHILDHOOD MUSIC AND MOVEMENT. IN ADDITION TO
	LEARNING HOW TO PLAY AN INSTRUMENT OR SING IN A CHOIR, OUR STUDENTS
	ACQUIRE THE CONFIDENCE TO TACKLE DIFFICULT SUBJECTS, BUILD A STRONG
4c	(Code ) (Expenses 374,920. including grants of \$4,125.) (Revenue \$385,976.) SUZUKI PROGRAM: IN THE SUZUKI PROGRAM, CHILDREN LEARN TO PLAY THEIR
	INSTRUMENT AS THEY LEARN THEIR MOTHER TONGUE - FROM A YOUNG AGE,
	THROUGH IMMERSION IN A MUSICAL ENVIRONMENT, AND WITH THE ENCOURAGEMENT
	OF THEIR PARENTS. THROUGH PARENT PARTICIPATION, GROUP CLASSES, PRIVATE
	LESSONS, AND MUSIC LITERACY, WE CREATE A FUN, SUPPORTIVE & NURTURING
	ENVIRONMENT IN WHICH ALL CHILDREN ARE SUCCESSFUL. SUZUKI FAMILIES
	DEVELOP DEEP, JOYFUL BONDS, WHILE PARENTS LEARN POSITIVE CHILD-REARING
	SKILLS. CHILDREN NOT ONLY LEARN TO PLAY THEIR INSTRUMENT, BUT BUILD
	SELF-CONFIDENCE, DEVELOP GOOD LEARNING HABITS, GAIN CAMARADERIE WITH
	THEIR PEERS, AND NURTURE THEIR LOVE OF MUSIC AND THE WORLD AROUND THEM.
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ 657,248 · including grants of \$ 8,994 ·) (Revenue \$ 226,435 ·)
4e	Total program service expenses ► 2,389,073.
23200	Form <b>990</b> (2012) See Schedule O for Continuation(s)
	ace achequie V FOL COBLINGLIOUS

## Form 990 (2012) MUSIC Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	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		X
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 98-19? 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, for escrow or custodial account liability; 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			
	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	
ь	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		<u>X</u>
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 and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Х	<del></del>
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X_
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			v
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	<b>-</b>	X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			v
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		<u>X</u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			v
	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,		ŀ	v
	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		1	<b>.</b> .
	1c and 8a? If "Yes," complete Schedule G, Part II	18	<u> </u>	<u>X</u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			v
_	complete Schedule G, Part III	19	-	X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a 20b	-	
<u>b</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		gan	(2012)
		OHI		رے رہے)

Form 990 (2012) MUSIC
Part IV Checklist of Required Schedules (continued)

			Yes	No
21	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	21		x
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		Х
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			
	Schedule K. If "No", go to line 25	24a		_X_
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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	25a		X
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			.,
	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified	••	:	v
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	27		х
00	of any of these persons? If "Yes," complete Schedule L, Part III	21		
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
•	Instructions for applicable filing thresholds, conditions, and exceptions):  A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	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		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	•		
	contributions? If "Yes," complete Schedule M	30		<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			<b>,,</b>
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u> X</u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			v
_	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	35b		
00	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	330		-
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  If "Yes," complete Schedule R, Part V, line 2	36		х
27	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			<u></u> -
37	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		İ	
<b>~</b>	Note. All Form 990 filers are required to complete Schedule O	38	Х	
		Form	990	(2012)

Form 9	990 (2012) MUSIC 11-153	2426	Р	age <b>5</b>
Part				
	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	7		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	<u>o</u>		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		ļ
2a	Enter the number of employees reported on Form W·3, Transmittal of Wage and Tax Statements,	_		
	filed for the calendar year ending with or within the year covered by this return	<u>1</u> ]		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	ļ
	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990·T for this year? If "No," provide an explanation in Schedule O	3b		—
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			.,
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		<u> </u>
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			X
	any contributions that were not tax deductible as charitable contributions?	<u>6a</u>		<u> </u>
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		<del> </del>
	Organizations that may receive deductible contributions under section 170(c).	2 70		Х
	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	<sup>7</sup> 7a 7b		A
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	76		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7c		Х
	to file Form 8282?  If "Yes," Indicate the number of Forms 8282 filed during the year 7d 7	1.0		<del>                                     </del>
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C7			
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting			
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	-	
	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a	]	L_
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b_		
	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	_		
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders	_		
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)	_		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	ļ	ļ
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	4		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			<del> </del>
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	ļ	<del> </del>
	Note. See the instructions for additional information the organization must report on Schedule O.			
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	4		
_	Enter the amount of reserves on hand	<del>-  </del>	····	<del> </del>
	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	10040
		rorr	เฮฮน	(2012)

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rai	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.	NO F	espon	se						
	Check if Schedule O contains a response to any question in this Part VI			X						
Seci	tion A. Governing Body and Management			رجعا						
	north development and management		Yes	No						
1a	Enter the number of voting members of the governing body at the end of the tax year 12									
	If there are material differences in voting rights among members of the governing body, or if the governing									
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O									
b	Enter the number of voting members included in line 1a, above, who are independent 1b 12									
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other									
	officer, director, trustee, or key employee?	2		X						
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision									
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X						
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X						
5										
6	Did the organization have members or stockholders?	6		X						
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or									
	more members of the governing body?	7a		X						
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or									
	persons other than the governing body?	7b		X						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following									
а	The governing body?	8a	X							
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 reached 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 Revenue Code.)									
			Yes	No						
	Did the organization have local chapters, branches, or affiliates?	10a		X						
ь	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	401								
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	X							
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11a	Λ.							
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	12a	Х							
	Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X							
b	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120								
С	in Schedule O how this was done	12c	Х							
13	Did the organization have a written whistleblower policy?	13	X							
14	Did the organization have a written document retention and destruction policy?	14	X							
15	Did the process for determining compensation of the following persons include a review and approval by independent	1 1								
-	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?									
а	The organization's CEO, Executive Director, or top management official	15a	Х							
	Other officers or key employees of the organization	15b	Х							
	if "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			,						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a									
	taxable entity during the year?	16a		X						
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation									
	In joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's									
	exempt status with respect to such arrangements?	16b								
Sec	tion C. Disclosure									
17	List the states with which a copy of this Form 990 is required to be filed ▶NY									
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) and 990-T (Section 501(c)(3)s only) are	avaılab	le							
	for public inspection. Indicate how you made these available. Check all that apply.									
	Own website X Another's website X Upon request Other (explain in Schedule O)									
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	d finar	ıcıal							
	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 and records of the organiza	tion: 🕨								
	The Organization - 718-622-3300	-								
232008	58 SEVENTH AVENUE, BROOKLYN, NY 11217-3608		000	/00 / 01						

### 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

#### 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.

(list any hours for hours for related organizations organi	(F) stimated mount of	1	(E) Reportable compensation	(D) Reportable compensation	۱ ۱	(C) Position (do not check more than one box, unless person is both ar					(B) Average hours per	<b>(A)</b> Name and Title
Committee   Comm	other npensation rom the ganization d related anizations	o		the organization						or director	(list any hours for related organizations below	
C	0			0				,,		١.,	1.00	
X	0		<u> </u>	0.	+			X		X	F 00	
1	0		0	0		1		v		٠,	5.00	
TRUSTEE		•	0.	0.	+	+	$\dashv$	<del>^</del>		^	1 00	
(4) ANDREA KNUTSON       1.00       X       X       0.       0.         TREASURER       X       X       0.       0.         (5) STEVE E. GLASS       1.00       X       0.       0.         TRUSTEE       X       0.       0.       0.         (6) PHYLLIS WHITE THORNE       1.00       X       0.       0.         TRUSTEE       X       0.       0.       0.         (8) HON. BRIAN COGAN       1.00       X       0.       0.         TRUSTEE       X       0.       0.       0.         (9) JOEL KRESS       1.00       X       0.       0.         TRUSTEE       X       0.       0.       0.         (10) JASON TEPPER       1.00       X       0.       0.         TRUSTEE       X       0.       0.       0.         (11) MONTE BAILEY       1.00       X       0.       0.         TRUSTEE       X       0.       0.       0.         (12) JACOB H. YAHIAYAN       1.00       X       0.       0.         (13) KAREN GEER       40.00       0.       0.       0.	0		0 -	0 -						$ \mathbf{x} $	1.00	
X   X   D   D   D   D		+	J.	-	$\dagger$	+	$\dashv$	$\dashv$	<del> </del>	1	1.00	
STEVE E. GLASS	0		0.	0.				$\mathbf{x}$		X		
TRUSTEE				-, -, -, -,	T	T					1.00	
X   0   0   0   0   0   0   0   0   0	0		0.	0.						X		
(7) MATTHEW H. TYE											1.00	(6) PHYLLIS WHITE THORNE
X   X   0   0   0	0	•	0.	0.	$\perp$					X		TRUSTEE
(8) HON, BRIAN COGAN TRUSTEE  (9) JOEL KRESS TRUSTEE  (10) JASON TEPPER TRUSTEE  (11) MONTE BAILEY TRUSTEE  (12) JACOB H, YAHIAYAN TRUSTEE  (13) KAREN GEER  (10) JASON TEPPER  X  0.  0.  0.  0.  0.  0.  0.  0.  0.											2.00	(7) MATTHEW H. TYE
TRUSTEE	0	•	0.	0.	_	$\perp$		X				SECRETARY
(9) JOEL KRESS TRUSTEE  (10) JASON TEPPER TRUSTEE  (11) MONTE BAILEY TRUSTEE  (12) JACOB H. YAHIAYAN TRUSTEE  (13) KAREN GEER  1.00  X  0.  0.  0.  0.  0.  0.  0.  0.	_										1.00	(8) HON. BRIAN COGAN
X	0	•	0.	0.	$\downarrow$	4	_	_	_	_	1 00	TRUSTEE
(10) JASON TEPPER TRUSTEE  (11) MONTE BAILEY TRUSTEE  X  0.  0.  0.  1.00  TRUSTEE  X  0.  0.  0.  1.00  TRUSTEE  X  0.  0.  0.	^		_								1.00	
TRUSTEE	0	•	U •	0.	+	-	-				1 00	
(11) MONTE BAILEY TRUSTEE  X  0. 0. 0.  1.00  TRUSTEE  X  0. 0. 0.  0.  0.  0.  0.  0.  0.  0	0		0	0							1.00	
TRUSTEE X 0. 0. (12) JACOB H. YAHIAYAN 1.00 X 0. (13) KAREN GEER 40.00		•	· ·		+		+		-	_	1 00	
(12) JACOB H. YAHIAYAN	0		0.	0							1.00	
TRUSTEE X 0. 0. (13) KAREN GEER 40.00		•				+	+				1.00	
(13) KAREN GEER 40.00	0		0.	0.							1.00	
		1			$\dagger$	+	$\neg$	_			40.00	
	1,609		0.	93,300.	1			X	İ			
			-	· · · · · · · · · · · · · · · · · · ·	7	丁	T			<del> </del>		DADOUT DE DELL'ACTOR
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222007 12 10 12 Form	990 (20	En-							<u> </u>		<u> </u>	

232007 12-10-12

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Parl	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
- <del></del>	(A)  Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)  Dozument a director/trustee)  Dozument a director/trustee)				than is bot or/trus	one h an tee)	(D)  Reportable compensation from the organization (W-2/1099-MISC)	(E)  Reportable compensation from related organizations (W-2/1099-MISC)	com fr org and	of tion e ion ed	
		iirie)	트	말	₹	<u>\$</u>	를 <b>5</b>	Ē			-		
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		<u> </u>	1										
1 b	Sub-total			_	1		<b></b>		93,300.	0		1,6	
С	Total from continuation sheets to Part V	II, Section A					<b>&gt;</b>		0.	0		1 6	0.
	Total (add lines 1b and 1c)  Total number of individuals (including but r			linte	م ام	<b>.</b>	ابدره		93,300.	0	•	1,6	09.
2	compensation from the organization	iot iimited to tr	iose	ıısıe	eo a	DOV	e) wi	10 16	eceived more than \$100	,,000 of reportable			0
												Yes	No
3	Did the organization list any former officer			e, ke	ey er	mplo	yee	, or	highest compensated e	mployee on			х
4	line 1a? If "Yes," complete Schedule J for s For any individual listed on line 1a, is the si			amo	ensa	atior	n and	d otl	her compensation from	the organization	3	,	Λ
·	and related organizations greater than \$15									J	4		X
5	Did any person listed on line 1a receive or							elat	ed organization or indivi	idual for services	_		Х
Sec	rendered to the organization? If "Yes," contion B. Independent Contractors	<u>nplete Schedul</u>	e J	or s	uch	pers	son				5	i 1	Λ.
1	Complete this table for your five highest co	ompensated in	dep	ende	ent c	onti	racto	ors t	hat received more than	\$100,000 of comper	sation	rom	
	the organization Report compensation for	the calendar y	ear	endi	ng v	vith	or w	ıthır		year.		•	
	<b>(A)</b> Name and business	address	N	INC	E			ŀ	( <b>B)</b> Description of s	services	Compe	<b>))</b> nsatio	n
												<u>-</u> _	
		<del></del>									•		
		<del></del>						-					<del> </del>
		·											
		6. I.J.			٠. د.				J = 1 = 1 = 1 = 1 = 1 = 1 = 1				<del></del>
2	Total number of independent contractors \$100,000 of compensation from the organ		not l	ımıte	a to		se II O	stec	apove) who received n	nore than			
	TOO,000 OF COMPENSATION NOT THE ORGAN								<del> </del>		Form	990 (	2012)

11-1532426 Page 9 MUSIC Form 990 (2012) Part VIII Statement of Revenue Check if Schedule O contains a response to any question in this Part VIII (D) Revenue excluded from tax under Related or Unrelated Total revenue business exempt function sections 512, 513, or 514 revenue revenue Contributions, Gifts, Grants and Other Similar Amounts. 1 a Federated campaigns 1a 1b Membership dues 1¢ c Fundraising events 1<u>d</u> d Related organizations 162,575. e Government grants (contributions) 1e All other contributions, gifts, grants, and 739,345 similar amounts not included above g Noncash contributions included in lines 1a-1f \$ 901,920 h Total. Add lines 1a-1f **Business Code** 1,519,629.1,519,629 2 a TUITION INCOME 611600 Program Service Revenue 365,063. 365,063 b MUSIC PARTNERS FEES 611710 118,719. 118,719. c MUSIC THERAPY FEES 611710  $71\overline{1130}$ 12,893. 12,893. CONCERT REVENUE f All other program service revenue 2,016,304 Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) Income from investment of tax-exempt bond proceeds 4 5 Royalties (ı) Real (II) Personal 20,746.6 a Gross rents 0. b Less rental expenses 20,746 c Rental income or (loss) 20,746. 20,746 d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances **b** Less cost of goods sold Net income or (loss) from sales of inventory **Business Code** Miscellaneous Revenue 900099 48,629. 48,629. 11 a OTHER All other revenue 48,629. Total, Add lines 11a-11d 0. 69,394. 2,987,618.2,016,304. Total revenue. See instructions

Form 990 (2012)

## Form 990 (2012) MUSIC Part IX Statement of Functional Expenses

	Check if Schedule O contains a respons	(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22	83,172.	83,172.		
3	Grants and other assistance to governments,			•	
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16	· -	<del></del>		
4	Benefits paid to or for members				.,
5	Compensation of current officers, directors,	97,484.		97,484.	
	trustees, and key employees	31,404.		71,404.	<del> </del>
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,750,991.	1,521,128.	145,283.	84,580
8	Pension plan accruals and contributions (include				
Ū	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	62,330.	54,147.	5,172.	3,011 6,784
10	Payroll taxes	140,450.	122,012.	11,654.	6,784
11	Fees for services (non-employees).				
а	Management				
b	Legal	1,200. 99,042.		1,200.	
C	Accounting	99,042.	75,245.	23,797.	
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O )	77,921.	60,440.	16,625.	856
12	Advertising and promotion	110,941.	103,511.	7,430.	1.001
13	Office expenses	45,704.	31,798.	11,985.	1,921
14	Information technology	36,203.	8,266.	27,937.	
15	Royalties	110 655	01 560	14 004	F 001
16	Occupancy	110,655.	91,560.	14,004.	5,091
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	8,889.	3,656.	3,450.	1,783
19	Conferences, conventions, and meetings	0,009.	3,030.	3,430.	1,703
20	Interest _				
21	Payments to affiliates	91,912.	76,051.	11,632.	4,229
22	Depreciation, depletion, and amortization	7117120	,0,031.	11,002.	
23	Insurance Other expenses Itemize expenses not covered				
24	above (List miscellaneous expenses in line 24e If line		1		
	24e amount exceeds 10% of line 25, column (A)				
а	amount, list line 24e expenses on Schedule 0) MAINTENANCE AND REPAIRS	106,486.	88,111.	13,476.	4,899
b	MISCELLANEOUS	60,298.	27,445.	32,197.	656
c	CREDIT CARD AND COLLECT	49,168.	42,531.	6,626.	11
d		<del>.</del>			
e					
25	Total functional expenses. Add lines 1 through 24e	2,932,846.	2,389,073.	429,952.	113,821
26	Joint costs Complete this line only if the organization				- <del></del>
-	reported in column (B) joint costs from a combined		1		
	educational campaign and fundraising solicitation				
	Check here If following SOP 98-2 (ASC 958-720)				Form <b>990</b> (2012

Form 990 (2012)
Part X Balance Sheet

MUSIC

. 13	n A	Check if Schedule O contains a response to any	v question i	in this Part X			
	,	Officer if Schedule O contains a response to any	question	III tilis i dit X	(A)		(B)
					Beginning of year		End of year
	1	Cash - non-interest-bearing			2,840.	1	105,983.
	2	Savings and temporary cash investments		Ī	108,822.	2	3,782.
	3	Pledges and grants receivable, net			81,191.	3	198,605.
	4	Accounts receivable, net			214,020.	4	340,043.
	5	Loans and other receivables from current and for	ormer office	ers, directors.			
		trustees, key employees, and highest compensation		i			
		Part II of Schedule L	•			5	
	6	Loans and other receivables from other disquali	fied persor	ns (as defined under			
		section 4958(f)(1)), persons described in section					
Assets		employers and sponsoring organizations of sec		i i			
		employees' beneficiary organizations (see instr).				6	
	7	Notes and loans receivable, net	•			7	
	8	Inventories for sale or use			8		
	9	Prepaid expenses and deferred charges	Ī	48,460.	9	11,980.	
	10a	Land, buildings, and equipment: cost or other	1		17 11 11 11 11 11 11 11 11 11 11 11 11 1		
		basis. Complete Part VI of Schedule D	10a	3,168,350.			
	ь	Less. accumulated depreciation	10b	3,168,350. 1,621,368.	1,639,226.	10c	1,546,982.
	11	Investments · publicly traded securities				11	
	12	Investments - other securities. See Part IV, line		12			
	13	Investments - program-related. See Part IV, line	-	13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11			8,000.	15	3,500.
	16	Total assets. Add lines 1 through 15 (must equ	al line 34)		2,102,559.	16	2,210,875.
	17	Accounts payable and accrued expenses			130,447.	17	188,731.
	18	Grants payable		18			
	19	Deferred revenue		_	540,353.	19	705,356.
	20	Tax-exempt bond liabilities				20	
S	21	Escrow or custodial account liability. Complete	Part IV of S	Schedule D		21	
Ĕ	22	Loans and other payables to current and forme	r officers, c	lirectors, trustees,			
Liabilities		key employees, highest compensated employed	es, and dis	qualified persons.			_
<b>=</b>	1	Complete Part II of Schedule L			200,000.	22	0.
	23	Secured mortgages and notes payable to unrel	ated third p	parties	250,000.	23	250,000.
	24	Unsecured notes and loans payable to unrelate	d third part	ties		24_	
	25	Other liabilities (including federal income tax, pa	ayables to r	elated third			
		parties, and other liabilities not included on line	s 17-24). C	omplete Part X of			22.25
		Schedule D			0.		30,257.
	26	Total liabilities. Add lines 17 through 25		<u> </u>	1,120,800.	26	1,174,344.
		Organizations that follow SFAS 117 (ASC 956	B), check h	ere ▶ X and			
es		complete lines 27 through 29, and lines 33 ar	nd 34.		001 140	1	760 400
anc	27	Unrestricted net assets			831,148.		769,420.
3al	28	Temporarily restricted net assets	]	42,000.	28	158,500.	
ā	29	Permanently restricted net assets		. —	108,611.	29	108,611.
Ē		Organizations that do not follow SFAS 117 (A	ASC 958), c	check here 🕨 📖	,		
ō	Ì	and complete lines 30 through 34.					
ets	30	Capital stock or trust principal, or current funds				30	
Ass	31	Paid-in or capital surplus, or land, building, or e			<del></del>	31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in	ncome, or o	other funds	001 750	32	1 026 521
Z	33	Total net assets or fund balances		981,759.	33	1,036,531.	
	34	Total liabilities and net assets/fund balances			2,102,559.	34	2,210,875. Form <b>990</b> (2012)

Form **990** (2012)

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

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

Form **990** (2012)

### **SCHEDULE A**

Department of the Treasury Internal Revenue Service

(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.

2012

Open to Publi Inspection

Name of the organization

THE BROOKLYN QUEENS CONSERVATORY OF MUSIC

Employer identification number 11-1532426

Part I	Reason	for Public Char	ity Status (All organız	ations mu	st complet	e this part	.) See inst	ructions.				
The organi	zation is not a	private foundation	because it is: (For lines 1	through	11, check	only one b	ox.)					
1 🔲	A church, cor	nvention of churches	s, or association of churc	ches desc	ribed in <b>se</b>	ction 170	(b)(1)(A)(i)					
2 X			'0(b)(1)(A)(ii). (Attach Sc									
з 🗀			tal service organization of			170(b)(1)(	(A)(iii).					
4	·-	•	operated in conjunction					(b)(1)(A)(ii	ii). Enter	the hospita	al's nam	ıe,
	city, and state	e:			•					•		
5 🔲	An organization	on operated for the	benefit of a college or ur	niversity o	wned or op	erated by	a governr	nental uni	t describ	ed in		
	=	(b)(1)(A)(iv). (Comple		•	·	·						
6 🗀			ent or governmental unit	t describe	d ın <b>sectio</b>	n 170(b)(1	)(A)(v).					
7 🗔	•		eives a substantial part					r from the	general	public des	cribed i	n
	-	b)(1)(A)(vi). (Comple							_	•		
8 🔲			ection 170(b)(1)(A)(vi). (	(Complete	Part II.)							
9 🔲	An organizati	on that normally rec	eives: (1) more than 33 1	1/3% of its	support fi	rom contri	butions, m	nembershi	p fees, a	ind gross re	eceipts	from
	-	•	nctions - subject to certa									
		•	axable income (less sect									
	See section	<b>509(a)(2).</b> (Complete	e Part III.)									
10	An organizati	on organized and or	perated exclusively to te	st for publ	ıc safety. S	See <b>sectio</b>	n 509(a)(4	l).				
11 🔲	An organizati	on organized and or	perated exclusively for th	ne benefit	of, to perfo	rm the fur	nctions of,	or to carr	y out the	purposes	of one	or
	more publicly	supported organiza	ations described in section	on 509(a)(	1) or section	on 509(a)(2	2). See <b>se</b> c	tion 509(	<b>a)(3).</b> Ch	eck the bo	x that	
	describes the	type of supporting	organization and comple	ete lines 1	1e through	11h.						
	a Type I	ь <u> </u>	ype II c T	ype III • Fu	nctionally i	ntegrated	d	I 🔛 Тур	e III - No	n-functiona	ılly ınteç	grated
e	By checking	this box, I certify tha	at the organization is not	controlled	directly o	r indirectly	by one o	more dis	qualified	persons of	her tha	'n
	foundation m	anagers and other t	han one or more publicly	y supporte	ed organiza	itions desc	cribed in s	ection 50	9(a)(1) or	section 50	9(a)(2).	
f	If the organiz	ation received a writ	ten determination from t	the IRS th	at it is a Ty	pe I, Type	II, or Type	e III				
	supporting or	rganization, check th	nis box									Ш
9	•		organization accepted ar			=						
	(i) A persor	n who directly or ind	lirectly controls, either al	one or tog	ether with	persons o	iescribed i	n (II) and (	(III) below		Yes	No
	the gove	erning body of the s	upported organization?							11g(i)		ļ. —
	(ii) A family	member of a persor	n described in (i) above?							11g(ii)		<del>                                     </del>
	(iii) A 35% d	controlled entity of a	ı person described in (i) o	or (II) abov	e?					11g(iii	<u>)                                    </u>	l
h	Provide the fo	ollowing information	about the supported or	ganızatıon	(s).							
		<del></del>	·-			·		T 7 10 11				
(i) Name	of supported	(II) EIN	(ili) Type of organization	p /	organization		u notify the	(vi) is organizati		(vii) Amour	nt of mor	netary
orga	ınızatıon		(described on lines 1-9 above or IRC section		sted in your document?			(I) organiz U S	ed in the	Su	pport	
			(see instructions))	Yes	No	(i) of your support?		Yes	No	1		
				res	NO	Yes	No	162	140	<del> </del>		
						:			-	1		
									<del> </del>	-		
			· · · · · · · · · · · · · · · · · · ·			<b></b>		<del> </del>				
				<del>                                     </del>	<del> </del>			-		<del> </del>		
			1									
					<del> </del>			<del>   </del>	1	<del>                                     </del>		
						1						
					-		<u> </u>	<del> </del>	1			
Total								}				

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2012

Schedule A (Form 990 or 990-EZ) 2012						Page 2
Part II Support Schedule for C						
(Complete only if you checked				on failed to qualify	under Part III. If th	e organization
fails to qualify under the tests	listed below, plea	ise complete Part	111.)	<del></del>		
Section A. Public Support		T	1	T	1	T
Calendar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants ")	<del></del>					
2 Tax revenues levied for the organ-						
ization'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			<del> </del>			
4 Total. Add lines 1 through 3	·					
5 The portion of total contributions						
by each person (other than a						
governmental unit or publicly supported organization) included						
on line 1 that exceeds 2% of the						
amount shown on line 11,						
column (f)						
6 Public support. Subtract line 5 from line 4	<del>,, , ,, , , , , , , , , , , , , , , , </del>	***************************************		····	<u> </u>	
Section B. Total Support		1		·	<u> </u>	1
Calendar year (or fiscal year beginning in) ▶	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4		(2) 2000	(5) = 5 : 5	(5) = 5 · ·	(0) 20 12	17.512.
8 Gross income from interest,						
dividends, payments received on						
securities loans, rents, royalties						
and income from similar sources						
9 Net income from unrelated business						·
activities, whether or not the						
business is regularly 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						
12 Gross receipts from related activities,	etc. (see instructi	ons)			12	
13 First five years. If the Form 990 is for	the organization'	s first, second, thi	rd, fourth, or fifth t	ax year as a sectio	on 501(c)(3)	
organization, check this box and stop						<b>&gt;</b>
Section C. Computation of Publi	c Support Pe	rcentage				
14 Public support percentage for 2012 (lin	ne 6, column (f) d	livided by line 11,	column (f))		14	%
15 Public support percentage from 2011	Schedule A, Part	II, line 14			15	%
16a 33 1/3% support test - 2012. If the o	rganization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or	more, check this b	ox and
stop here. The organization qualifies a						▶∟
<b>b 33 1/3% support test - 2011.</b> If the o				d line 15 is 33 1/39	% or more, check t	his box
and stop here. The organization qualif						▶∟
17a 10% -facts-and-circumstances test						
and if the organization meets the "fact	s-and-circumstar	nces" test, check t	his box and stop h	nere. Explain in Pa	art IV how the orga	nızatıon

Schedule A (Form 990 or 990-EZ) 2012

meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

b 10% -facts-and-circumstances test - 2011. 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

## Schedule A (Form 990 or 990-EZ) 2012 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 organ	zation fails to
qualify under the tests listed below, please complete Part II.)	

Section A. Public Support	ow, piease com	piete Fart II.)		·	<del></del>	<del></del>
Calendar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and	101 2000	(5) 2009	10/ 2010	(4) 2011	10/2012	iotai
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 organ- ization'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) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(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>b</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)		<u> </u>	<u> </u>			L <u>.</u>
14 First five years. If the Form 990 is for check this box and stop here	the organization'	s first, second, thi	rd, fourth, or fifth t	ax year as a secti	on 501(c)(3) organiz	ation, ▶ ☐
Section C. Computation of Public	c Support Pe	ercentage				
15 Public support percentage for 2012 (lin			column (ft)		15	
16 Public support percentage from 2011			· · · · · · · · · · · · · · · · · · ·		16	
Section D. Computation of Inves				···	1 · · · · · ·	
17 Investment income percentage for 201					17	
18 Investment income percentage from 2			,		18	
19a 33 1/3% support tests - 2012. If the			on line 14, and line	e 15 is more than		
more than 33 1/3%, check this box an						▶□
b 33 1/3% support tests - 2011. If the						and
line 18 is not more than 33 1/3%, chec						▶□
20 Private foundation. If the organization						▶ [
232023 12-04-12	C.O HOL OHOOK B	237 011 1110 171 10	, cc., ccon t		hedule A (Form 99	0 or 990-EZ) 20

#### **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.

2012
Open to Public Inspection

Name of the organization

THE BROOKLYN QUEENS CONSERVATORY OF MUSIC

Employer identification number 11-1532426

Par	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds or A	Acco	unts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin			
		(a) Donor advised funds	<b>(b)</b> Fu	nds and other accounts
1	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised fur	nds	
	are the organization's property, subject to the organization's	exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be used	only	
	for charitable purposes and not for the benefit of the donor of			
	impermissible private benefit?		Ū	Yes No
Par		ganization answered "Yes" to Form 990, Part IV	, line 7	
1	Purpose(s) of conservation easements held by the organizat			
	Preservation of land for public use (e.g., recreation or e	education) Preservation of an historica	lly ımp	ortant land area
	Protection of natural habitat	Preservation of a certified h		
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of a c	onserv	ation easement on the last
	day of the tax year.			
				Held at the End of the Tax Year
а	Total number of conservation easements		2a	
ь	Total acreage restricted by conservation easements		2b	
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c	
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structure		
	listed in the National Register		2d	
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the orga	nizatio	n during the tax
	year ▶			
4	Number of states where property subject to conservation ea	sement is located ▶		
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of		
	violations, and enforcement of the conservation easements i	t holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements during	the yea	ar <b>&gt;</b>
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements during the ye	ear 🕨	\$
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170(h)(4)(	B)(ı)	
	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports conservat	on easements in its revenue and expense state	ment,	and balance sheet, and
	include, if applicable, the text of the footnote to the organization	tion's financial statements that describes the or	ganıza	tion's accounting for
	conservation easements.			
Pai	t III Organizations Maintaining Collections o	f Art, Historical Treasures, or Other	Simi	lar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8		
1a	If the organization elected, as permitted under SFAS 116 (AS			
	historical treasures, or other similar assets held for public ex	hibition, education, or research in furtherance of	f public	service, provide, in Part XIII,
	the text of the footnote to its financial statements that descr			
b	If the organization elected, as permitted under SFAS 116 (AS			
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of public se	ervice,	provide the following amounts
	relating to these items:			
	(i) Revenues included in Form 990, Part VIII, line 1			\$
	(ii) Assets included in Form 990, Part X			\$
2	If the organization received or held works of art, historical tre		provid	de
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items:		
а	Revenues included in Form 990, Part VIII, line 1			\$
b	Assets included in Form 990, Part X			\$

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 232051 12-10-12

Schedule D (Form 990) 2012

Schedule D (Form 990) 2012

Schedule D (Form 990) 2012

liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

·		THE BROOKLYN Q	UEENS CONSER	RVATORY				
Sched	dule D (Form 990) 2012	MUSIC					1532426	Page 4
Par	t XI Reconciliation o	f Revenue per Audited	Financial Stateme	<u>ents With F</u>	Revenue per R	eturn		
1	Total revenue, gains, and oth	her support per audited financi	al statements			1	2,912,	581.
2	Amounts included on line 1 b	but not on Form 990, Part VIII,	line 12:					
а	Net unrealized gains on inves	stments		2a				
ь	Donated services and use of	f facilities		2b	8,135.			
С	Recoveries of prior year gran	nts		2c				
	Other (Describe in Part XIII.)			2d	_			
	Add lines 2a through 2d					2е	8,	135.
	Subtract line 2e from line 1					3	2,904,	446.
		990, Part VIII, line 12, but not o	n line 1:		,			
		cluded on Form 990, Part VIII, I		4a				
	Other (Describe in Part XIII.)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		4b	83,172.			
	Add lines 4a and 4b			<u> </u>	,	4c	83,	172.
		nd <b>4c.</b> (This must equal Form 9	90 Part I line 12 )			5	2,987,	618.
		of Expenses per Audited		nents With	Expenses per			
1		per audited financial statements	•			1	2,857,	809.
2	·	but not on Form 990, Part IX, li				·		
	Donated services and use of		116 25.	2a	8,135.			
a	Prior year adjustments	raciities		2b	0,2001			
b	•			2c				
C	Other losses			2d				
d	Other (Describe in Part XIII.)			20		20	8.	135.
_	Add lines 2a through 2d					2e 3	8, 2,849,	674
3	Subtract line 2e from line 1	000 D AIV has 05 heat and a	les s de				2,045,	074.
4		990, Part IX, line 25, but not on		1 4. 1				
		cluded on Form 990, Part VIII, I	ine /b	4a	83,172.			
	Other (Describe in Part XIII.)			4b	03,172.		0.2	172
_	Add lines 4a and 4b		000 5 111 101			4c	83, 2,932,	916
5		and 4c. (This must equal Form	990, Part I, line 18)			5	2,932,	040.
	rt XIII Supplemental In							
		descriptions required for Part II					b; Part V, line	4; Part
		and Part XII, lines 2d and 4b. A					N 7 7 7 7	
Par	rt X, Line 2: T	HE CONSERVATORY	HAS NOT ENT	ERED IN	TO ANY UN	CER	PAIN	
					T DEGOGNIT	m T ()		
TAX	R POSITIONS THA	T WOULD REQUIRE	FINANCIAL S	TATEMEN	T RECOGNI	TIO	N AND IS	NO
						0170	DD TOD II	10
TOV	NGER SUBJECT TO	AUDITS BY THE	APPLICABLE I	'AXING J	URISDICTI	ONS	PRIOR 1	0
		22 2212						
PER	RIODS ENDING JU	NE 30, 2010.			<del>-</del>	·		
<b>.</b>	-1 TT T Al-							
Par	rt XI, Line 4b	- Other Adjustm	ents:	<del></del> .		_		<del></del>
CCL	UOI ADCHIDC							
SCE	HOLARSHIPS		<del></del>	<del></del>	<del></del>			
					<del></del>	Cabad	lula D (Farm 0	00) 2012

# THE BROOKLYN QUEENS CONSERVATORY OF

Schedule D (Form 990) 2012 PIUSIC 11-1532426 Page 5
Part XIII Supplemental Information (continued)
Part XII, Line 4b - Other Adjustments:
SCHOLARHSIPS
THE CONSERVATORY RECIEVED IN-KIND CONTRIBUTIONS FROM A LOCAL INSTRUCTOR
EOD MUCTO DOCODAMO AND EDOM LONG TOLAND EINANGTAL MANACEMENT CEDUTOEC EOD
FOR MUSIC PROGRAMS AND FROM LONG ISLAND FINANCIAL MANAGEMENT SERVICES FOR
ACCOUNTING SERVICES. THE VALUE OF THESE SERVICES HAS BEEN RECORDED ON THE
TIVINGIAL GENERATION INCOME AG AN IN WIND DONATION WITH THE
FINANCIAL STATEMENTS UNDER INCOME AS AN IN-KIND DONATION, WITH THE
OFFSETTING EXPENSE INCURRED UNDER PROFESSIONAL FEES.
Schedule D (Form 990) 201

232055

Schedule D (Form 990) 201:

#### SCHEDULE E

(Form 990 or 990-EZ)

Internal Revenue Service

### **Schools**

► Complete if the organization answered "Yes" to Form 990, Part IV, line 13,

or Form 990-EZ, Part VI, line 48.

Attach to Form 990 or Form 990-EZ.

2012

Open to Public Inspection

Name of the organization

THE BROOKLYN QUEENS CONSERVATORY OF MUSIC

Employer identification number 11-1532426

Schedule E (Form 990 or 990-EZ) (2012)

Part I YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, X other governing instrument, or in a resolution of its governing body? Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, X catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain Х If you need more space, use Part II 3 THE BROOKLYN QUEENS CONSERVATORY OF MUSIC ADVERTISES IN NEWSPAPERS STATING THAT ALL RACES AND NATIONAL ORIGINS ARE ACCEPTED. Does the organization maintain the following? X a Records indicating the racial composition of the student body, faculty, and administrative staff? 4a X **b** Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? 4b c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student X 4c admissions, programs, and scholarships? X 4d d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. If you need more space, use Part II. Does the organization discriminate by race in any way with respect to: 5a a Students' rights or privileges? X 5b **b** Admissions policies? 5c c Employment of faculty or administrative staff? d Scholarships or other financial assistance? 5d Educational policies? 5e f Use of facilities? 5f 5g g Athletic programs? 5h h Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II. 6a Does the organization receive any financial aid or assistance from a governmental agency? 6a X 6b b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either line 6a or line 6b, explain on Part II. Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or Form 990-EZ.

### THE BROOKLYN QUEENS CONSERVATORY OF

Schedule [	E (For	m 990	or 990-EZ	(2012	MUSI	C								1	1-15	32426 Page 2
Part II	Sı	elaaı	mental l	Inforr	nation.	Comple	ete this p	part to p	rovide 1	the explar	nations	s requ	ired by Par	t I, lines 3, 4		
······	às	applica	able. Also	comple	ete this pa	art to pro	ovide an	y other	additior	nal inform	ation.	•	Ţ			
•							-	-			•	_				
Sched	ule	Ε,	line	6 -	- Exp	lana	tion	of	Gove	ernme	nt I	Fin	ancial	l Aid:		
						_										
THE C	ONS	ERV.	ATORY	API	PLIES	AND	REC	EIVE	S GF	RANTS	FRO	MO	CITY,	STATE	AND	FEDERAL
							_									
GOVER	NME	NTS	TO H	ELP	SUPP	ORT .	AND	FURT	HER	ITS	PROC	GRA	MS.			
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Schedule I (Form 990) (2012) **2 Employer identification number** 11-1532426 OMB No 1545-0047 Open to Public 2012 Inspection (h) Purpose of grant or assistance X Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. ▶ Attach to Form 990. recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table THE BROOKLYN QUEENS CONSERVATORY OF (c) IRC section LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. if applicable Enter total number of other organizations listed in the line 1 table **General Information on Grants and Assistance** (p) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization MUSIC or government Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE (Form 990) Partil Parti

11-1532426

Page 2

Schedule I (Form 990) (2012)

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
SCHOLARSHIPS	78	83,172.	.0		
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	de the information	n required in Part I,	line 2, Part III, colum	n (b), and any other additional inf	ormation.
Schedule I, Part I, Line 2: SCHOLARSHI	(PS	ARE BASED O	ON FINANCIAL NEED	L NEED AND	
ARE AWARDED TO STUDENTS WHO OTHERWISE	TISE WOULD	NOT BE	ABLE TO AFF	AFFORD MUSIC	
INSTRUCTION. AWARDS ARE NEVER MORE	THAT 508	OF THE	STUDENTS TO	TOTAL TUITION	
(UNLESS THE STUDENT IS PART OF OUR		ZZ PROGRAM	TEEN JAZZ PROGRAM). TEEN JAZZ	22	
SCHOLARSHIPS ARE FUNDED BY VARIOUS	GRANTS	AND AWARDS	AWARDS COVER 90%	90%-100% OF THE	
WOTHING					

ALL SCHOLARSHIP STUDENTS ARE REQUIRED TO FILL OUT A FINANCIAL AID

APPLICATION. THIS INCLUDES SUBMITTING THEIR MOST RECENT FEDERAL TAX FORM 322010 12-18-12

232102 12-18-12

## SCHEDULE O

## 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.

2012
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

THE BROOKLYN QUEENS CONSERVATORY OF MUSIC

Employer identification number 11-1532426

FORM 990, Part I, Line 1, Description of Organization Mission:

THE BROOKLYN QUEENS CONSERVATORY OF MUSIC TRANSFORMS AND ENRICHES THE

LIVES OF THOSE WHO ARE UNDERSERVED THROUGH MUSIC EDUCATION AND MUSIC

THERAPY. WE ACCOMPLISH THIS BY PROVIDING MUSIC EDUCATION PROGRAMS IN

SCHOOLS, COMMUNITY CENTERS, AND COLLABORATING WITH OTHER ORGANIZATIONS.

USING MUSIC AS A THERAPEUTIC TOOL, WE HELP PEOPLE WITH EMOTIONAL,

DEVELOPMENTAL, AND PHYSICAL DISABILITIES IMPROVE THEIR LIVES. SKILLS

THAT ARE DEVELOPED THROUGH UNDERSTANDING AND MAKING MUSIC ARE ESSENTIAL

TO THE EDUCATIONAL PROCESS; AND TO THE GROWTH AND WELL-BEING OF THE

INDIVIDUAL. BQCM IS COMMITTED TO THIS WORK BECAUSE EVERYONE NEEDS

MUSIC IN THEIR LIVES TO REALIZE THEIR POTENTIAL AND THEREFORE BENEFIT

SOCIETY. WE BELIEVE THAT MUSIC HAS THE POWER TO BUILD COMMUNITY AND

FORM 990, Part III, Line 1, Description of Organization Mission:

ORGANIZATIONS. USING MUSIC AS A THERAPEUTIC TOOL, WE HELP PEOPLE WITH

EMOTIONAL, DEVELOPMENTAL, AND PHYSICAL DISABILITIES IMPROVE THEIR

LIVES. SKILLS THAT ARE DEVELOPED THROUGH UNDERSTANDING AND MAKING MUSIC

ARE ESSENTIAL TO THE EDUCATIONAL PROCESS; AND TO THE GROWTH AND

WELL-BEING OF THE INDIVIDUAL. BQCM IS COMMITTED TO THIS WORK BECAUSE

EVERYONE NEEDS MUSIC IN THEIR LIVES TO REALIZE THEIR POTENTIAL AND

THEREFORE BENEFIT SOCIETY. WE BELIEVE THAT MUSIC HAS THE POWER TO BUILD

COMMUNITY AND TRANSFORM LIVES.

Form 990, Part III, Line 4b, Program Service Accomplishments:

WORK ETHIC, AND DEVELOP A SENSE OF CAMARADERIE WITH THEIR PEERS.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2012)

232211 01-04-13 Form 990, Part III, Line 4d, Other Program Services:

OTHER MUSIC PROGRAMS INCLUDE MUSIC THERAPY - THE DEVELOPMENTAL,

EMOTIONAL, PSYCHOLOGICAL AND SOCIAL NEEDS OF CHILDREN AND ADULTS ARE

ADDRESSED THROUGH ACTIVE MUSIC-MAKING IN A RELATIONSHIP WITH A MUSIC

THERAPIST, BERKELEY CARROLL SCHOOL - THE BERKELEY CARROLLS PARTNERSHIP

WITH THE BROOKLYN CONSERVATORY OF MUSIC IS A UNIQUE PROGRAM THAT OFFERS

NEIGHBORING BERKELEY CARROLL SCHOOL STUDENTS ON-SITE PRIVATE LESSONS

AND GROUP CLASSES WITH BCM FACULTY, COMMUNITY CHORALE, COMMUNITY

ORCHESTRA, MUSIC ADVENTURES - UNSTRUCTURED MUSIC AND INSTRUMENT PLAY

FOR CHILDREN AND THEIR ADULT COMPANIONS, WITH GUIDANCE FROM BCM EARLY

CHILDHOOD FACULTY, AND PROFESSIONAL STUDIES

Expenses \$ 657,248. including grants of \$ 8,994. Revenue \$ 226,435.

FORM 990, Part VI, Section B, line 11: THE CONSERVATORY'S 990 IS PREPARED

BY AN INDEPENDENT CPA FIRM. IT IS THEN REVIEWED BY STAFF AND THE EXECUTIVE

DIRECTOR AND UPDATED AS NECESSARY. A REVISED DRAFT IS SENT TO THE

EXECUTIVE DIRECTOR AND BOARD FOR REVIEW AND APPROVAL BEFORE FILING. ONCE

THE FORM IS APPROVED IT IS SUBMITTED TO THE IRS BEFORE THE DEADLINE.

Form 990, Part VI, Section B, Line 12c: THE BROOKLYN QUEENS CONSERVATORY

OF MUSIC'S CONFLICT OF INTEREST POLICY REQUIRES OFFICERS, DIRECTORS AND KEY

EMPLOYEES TO FILE ANNUAL CONFLICT OF INTEREST REPORTS WITH THE

ORGANIZATION. THE FOLLOWING PROCESS IS USED TO GATHER, REVIEW AND RESOLVE

ANY CONFLICTS. FIRST THE STAFF SENDS CONFLICT OF INTEREST REPORTS TO EACH

OFFICER, DIRECTOR AND KEY EMPLOYEE ANNUALLY. THE STAFF THEN GATHERS THE

REPORTS, REVIEWS THEM AND WRITES A CONFLICT OF INTEREST MEMO STATING THE

NUMBER OF COI REPORTS WITH NO CONFLICTS, LISTING MISSING AND OUTSTANDING

Schedule O (Form 990 or 990-EZ) (2012)

COI REPORTS AND SUMMARIZES THE REPORTS WITH POTENTIAL AND ACTUAL CONFLICTS
OF INTEREST INCLUDING IN-DEPTH INFORMATION REGARDING THE CONFLICT AND
RECOMMENDATIONS FOR RESOLUTION OF THE POTENTIAL OR ACTUAL CONFLICT OF
INTEREST. THE STAFF SENDS THE MEMO ALONG WITH COI REPORTS CONTAINING
CONFLICTS TO THE AUDIT COMMITTEE AND GOVERNANCE COMMITTEE. THE GOVERNANCE
COMMITTEE REVIEWS THE MEMO, CONFLICT OF INTEREST REPORTS AND
RECOMMENDATIONS FOR RESOLUTION AND DETERMINES THE APPROPRIATE COURSE OF
ACTION UNDER THE CONFLICT OF INTEREST POLICY. THE DETERMINED COURSE OF
ACTION IS REPORTED TO THE INTERESTED PARTIES. THE GOVERNANCE COMMITTEE
ALSO REPORTS EACH CONFLICT AND RESOLUTION TO THE DIRECTORS OF THE BROOKLYN
QUEENS CONSERVATORY OF MUSIC AT THE SUBSEQUENT BOARD MEETING.

Form 990, Part VI, Section B, Line 15: THE BROOKLYN QUEENS CONSERVATORY OF MUSIC USES COMPARABLE COMPENSATION DATA TO REVIEW, ANALYZE AND DETERMINE THE INITIAL COMPENSATION OF THE EXECUTIVE DIRECTOR AND OTHER STAFF BASED ON RESEARCH REGARDING COMPENSATION FOR SIMILARLY QUALIFIED PERSONS IN FUNCTIONALLY COMPARABLE POSITIONS AT SIMILARLY SITUATED ORGANIZATIONS REPORTED ON FORM 990 OF COMPARABLE ORGANIZATIONS OR IN COMPENSATION SURVEYS. AFTER THE FIRST YEAR OF EMPLOYMENT, COMPENSATION IS DETERMINED BY PERFORMANCE AND BY COLA ADJUSTMENTS. THE ORGANIZATION DOES NOT USE COMPARABLE COMPENSATION DATA TO DETERMINE THE COMPENSATION OF THE EXECUTIVE DIRECTOR AND OTHER STAFF AFTER THE INITIAL STARTING COMPENSATION IS THE INITIAL COMPENSATION OF THE EXECUTIVE DIRECTOR IS REVIEWED DETERMINED. AND APPROVED BY THE ORGANIZATION'S GOVERNING BODY. THE INITIAL COMPENSATION OF OTHER STAFF IS REVIEWED AND APPROVED BY THE EXECUTIVE DIRECTOR AND HUMAN RESOURCES STAFF. THE CONSERVATORY'S BOARD USES CONTEMPORANEOUS DOCUMENTATION AND RECORDKEEPING WITH RESPECT TO THE DELIBERATIONS AND DECISIONS REGARDING THE COMPENSATION OF THE EXECUTIVE Schedule O (Form 990 or 990-EZ) (2012)

### Form **8868**

(Rev. January 2013)

Department of the Treasury Internal Revenue Service

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

File a separate application for each return.

• If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

OMB No 1545-1709

Form 8868 (Rev. 1-2013)

ightharpoons

	are filing for an Additional (Not Automatic) 3-Month Ex						
	complete Part II unless you have already been granted a						
	nic filing (e-file). You can electronically file Form 8868 if y						
require	d to file Form 990-T), or an additional (not automatic) 3-mo	nth extens	sion of time. You can electronically f	ile Form 88	368 to request an	extension	
of time	to file any of the forms listed in Part I or Part II with the ex-	ception of	Form 8870, Information Return for	Transfers A	Associated With C	ertain	
Person	al Benefit Contracts, which must be sent to the IRS in pap	er format	(see instructions) For more details	on the elec	tronic filing of this	form,	
	w irs gov/efile and click on e-file for Chanties & Nonprofits		<del> </del>				
Part						·-··	
	ration required to file Form 990.T and requesting an autor	natic 6-mo	onth extension - check this box and	complete		r	
Part I o	•				J	<b>L</b>	
All othe to file in	r corporations (including 1120-C filers), partnerships, REM come tax returns	ICs, and t	rusts must use Form 7004 to reques	at an exten	sion of time		
Туре о	Name of exempt organization or other filer, see instru	ctions		Employer	identification nun	nber (EIN) or	
print	THE BROOKLYN QUEENS CONSERV	VATOR	Y OF				
	MUSIC				11-15324	26	
File by the due date f		ee instruc	tions.	Social se	curity number (SS	N)	
filing your return Se	58 SEVENTH AVENUE						
instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions  BROOKLYN, NY 11217-3608							
Enter th	e Return code for the return that this application is for (file	a separa	te application for each return)			0 1	
<u> </u>			I		· · · · · · · · · · · · · · · · · · ·	<del></del>	
Applica	ition	Return	Application			Return	
Is For		Code	Is For			Code	
	90 or Form 990-EZ	01	Form 990-T (corporation)	• • • •		07	
Form 99		02	Form 1041-A		08		
	<sup>2</sup> 20 (individual)	03	Form 4720	·	09		
Form 99		04	Form 5227		10		
	90-T (sec 401(a) or 408(a) trust) 90-T (trust other than above)	05 06	Form 6069 Form 8870		12		
1 01111 3	The Organization		FOITI 6070			12	
• The	books are in the care of <b>58 SEVENTH AVE</b>		BROOKI.VN NV 1121	7-360	8		
	phone No. ► 718-622-3300	1011	FAX No. ▶	7 300	<u> </u>		
	organization does not have an office or place of business	s in the l lr				• 🗆	
	s is for a Group Return, enter the organization's four digit			If this is foi	r the whole aroup.	check this	
box 🕨	If it is for part of the group, check this box	1					
	request an automatic 3-month (6 months for a corporation						
•	February 15, 2014, to file the exemp	•	-		The extension		
	for the organization's return for.	t Organiza	tion for the organization have				
_	calendar year or						
_	X tax year beginning JUL 1, 2012	an	d ending JUN 30, 2013				
_					<del></del>		
2 If	the tax year entered in line 1 is for less than 12 months, c  Change in accounting period	heck reas	on Initial return	Final retur	n		
3a If	this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	nter the tentative tax, less any				
_	onrefundable credits. See instructions			3a	\$	<u>0.</u>	
	this application is for Form 990-PF, 990-T, 4720, or 6069,					_	
	stimated tax payments made. Include any prior year overp			3b	\$		
	alance due. Subtract line 3b from line 3a Include your pa					_	
	y using EFTPS (Electronic Federal Tax Payment System)			3c	\$	0.	
Cautio	If you are going to make an electronic fund withdrawal v	vith this Fo	orm 8868, see Form 8453-EO and Fe	orm 8879-l	EO for payment in	structions	

LHA