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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)

benefit trust or private foundation)

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

2012
Open to Public Inspection

A F	or the	2012 calendar year, or tax year beginning JUL 1, 2012 and	ل ending	TUN 30, 2013	· · · · · · · · · · · · · · · · · · ·
В	Check if applicable	C Name of organization		D Employer identific	cation number
	Addres	BERKS YOUTH CHORUS, INC.			
	Name change			23-2	684036
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	
	Termin ated	ZUI WASHINGION SIKEEI		610-	<u>898-7664</u>
	Amend return	City, town, or post office, state, and ZIP code		G Gross receipts \$	175,476.
	Application pendin	READING, PA 19001		H(a) Is this a group re	
	pendin	F Name and address of principal officer REV . CANON WALTER I	KRIE		Yes X No
		SAME AS C ABOVE		H(b) Are all affiliates inc	
		mpt status: X 501(c)(3) 501(c) ()	or 527		list. (see instructions)
		e: WWW.BERKSYOUTHCHORUS.ORG	1	H(c) Group exemptio	
	orm of	organization X Corporation Trust Association Other ► Summary	L_Year	of formation: 1992 N	State of legal domicile: PA
		Briefly describe the organization's mission or most significant activities: TO FC	STER	AND ADVANCE	CHORAL
Governance		EXCELLENCE IN THE YOUTH OF OUR LOCAL COM	TUNITY	THROUGH MU	SIC
rna	-	Check this box if the organization discontinued its operations or dispos			
Ş	ł	Number of voting members of the governing body (Part VI, line 1a)		3	12
ŏ		Number of independent voting members of the governing body (Part VI, line 1b)		4	0
ος O	ı	Fotal number of individuals employed in calendar year 2012 (Part V, line 2a)		5	10
ıte	l	Fotal number of volunteers (estimate if necessary)	•	6	0
Activities &	1 -	Fotal unrelated business revenue from Part VIII, column (C), line 12		7a	0.
Ř		Net unrelated business taxable income from Form 990-T, line 34		7b	0.
				Prior Year_	Current Year
-	8 (Contributions and grants (Part VIII, line 1h)		80,120.	94,744.
Revenue	1	Program service revenue (Part VIII, line 2g)		83,097.	66,834.
Vel	1	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		2,055.	1,318.
æ	i	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-	6,871.	5,064.
	l	Fotal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		172,143.	167,960.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
		Benefits paid to or for members (Part IX, column (A), line 4)		8,440.	12,970.
"		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		100,761.	91,981.
Expenses	Į.	Professional fundraising-fees (Part IX, column (A), line 11e)		0.	0.
Sen	loa i	Fotal fundraising stranges (14/12/10) column (D), line 25) 2,62	26.		<u>-</u>
$\overline{\mathbf{x}}$	17 (Other expenses (Part IX, column (A), lines 11 a-11d, 11f-24e)		70,913.	45,265.
	10	Fotal expenses (Add lines 13.17 (must solial Part IX, column (A) line 25)		180,114.	150,216.
3	10 [Fotal expenses (Add Jines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 18 from line 12		<7,971.	
et assets of line Balances	19 1	revenue less expenses subtractimie les formaire 12	Re	ginning of Current Year	End of Year
and	20 7	Total assets (Rat & Interest IT	1	225,842.	246,926.
SSa	21	Total liabilities (Part X, line 26)	•	21,955.	20,989.
E E	22 1	Net assets or fund balances Subtract line 21 from line 20		203,887.	225,937.
Pa	irt II	Signature Block		203,007	22375571
		ties of perjuty, I declare that I have examined this return, including accompanying schedules	and statem	ents, and to the best of m	v knowledge and belief it is
		, and complete. Declaration of preparer (other than officer) is based on all information of wh			y milotilougo and comer, it is
uc,	COLLECT	Par Que	ion propuro	Nos Z,	2013
Şigr	.	Signature of officer		Date	
	,	JAMES A Roth - Board Prosident			
Her		Type or print name and title			
		Print/Ope preparer's name Preparer's sognature	1	Date , Check	X PTIN
Paid		JOSEPH D. DANTAS, CPA	A	10 3 13 If sett-employ	
		Firm's name JOSEPH D. DANTAS, CPA	7)	Firm's EIN	81-0576749
	-	Firm's address 600 CARSONIA AVENUE	<u>.</u>	THILSEIN	<u> </u>
USE	Omy	READING, PA 19606		Phone no. 6	10.370.1820
NA ~:	tha ID	S discuss this return with the preparer shown above? (see instructions)		Tritolie ito. O	Yes No
			ne		Form 990 (2012)
23200	12-10	-12 LIDA FOR Paperwork neduction Actinotice, see the separate instruction	115.		101111 000 (2012)

' Form	990 (2012) BERKS YOUTH CHORUS, INC.	23-2684036 Page 2
	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response to any question in this Part III	
1	Briefly describe the organization's mission	
•	TO FOSTER AND ADVANCE CHORAL EXCELLENCE IN THE YOUTH OF	OUR LOCAL
	COMMUNITY THROUGH MUSIC EDUCATION AND THE OPPORTUNITY TO	
		J I ERI ORIA
	BEFORE LIVE AUDIENCES.	
2	Did the organization undertake any significant program services during the year which were not listed on	Yes X No
	the prior Form 990 or 990-EZ?	. LIYes LAJNo
	If "Yes," describe these new services on Schedule O	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
	If "Yes," describe these changes on Schedule O	
4	Describe the organization's program service accomplishments for each of its three largest program services, as	measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	
	revenue, if any, for each program service reported	•
—— 4а	(Code) (Expenses \$116, 964. including grants of \$) (Revenue	ue\$ 66,918.)
40	PROVIDE CHILDREN BETWEEN THE AGES OF 8 AND 18 TRAINING	· · · · · · · · · · · · · · · · · · ·
		RK OVER 100
	LOCAL CHILDREN PARTICIPATED IN THIS PROGRAM	
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
4b	(Code) (Expenses \$) (Revenue)	ue \$ }
4c	(Code) (Expenses \$) (Reven	ue\$)
	Other pregram convece (Decembe in Schodule O.)	
4d	Other program services (Describe in Schedule O)	1
	(Expenses \$ including grants of \$) (Revenue \$	
4e	Total program service expenses ► 116,964.	

Form 990 (2012)

			V	A1 -
	504()(0) 40.47(-)(4) (-1) - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?	1	х	
_	If "Yes," complete Schedule A	2	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?			
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	3		х
	public office? If "Yes," complete Schedule C, Part I			
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	4		х
_	during the tax year? If "Yes," complete Schedule C, Part II			- 21
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	5		х
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	3_		21
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	6		x
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	0		- 21
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7	1	Х
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II			71
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	0		х
	Schedule D, Part III	8		Δ
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?			х
	If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	40	'	х
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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,		х	
	Part VI	11a	Λ_	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	446	х	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Λ	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			х
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
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			x
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	^
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		v	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			-
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	406		X
	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
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	<u> </u>	^
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	146		Х
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	 	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	15		х
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	13	<u> </u>	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	16	İ	x
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16_		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	17		Х
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	- ''- -	1	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	18		х
40	1c and 8a? If "Yes," complete Schedule G, Part II	10	 	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	19		x
00	complete Schedule G, Part III	20a	\vdash	X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20b	 	<u> </u>
d	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		990	(2012)

Form 990 (2012) BERKS YOUTH CHORUS, INC.
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	ļ	X
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		X
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		
С	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			
	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	!		
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		_X_
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		_X_
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			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34_		<u> </u>
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, 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," complete Schedule R, Part V, line 2	35b_		
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	-	_X_
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		_X_
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	
		Form	9907	2012

Form 990 (2012) BERKS YOUTH CHORUS, INC.
Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V		·	<u></u>	
			Yes	No	
1a	Effect the number reported in box 3 of Form 1030. Effect of thorappileable)			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable)			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			1	
	(gambling) winnings to prize winners?	1c	L	<u> </u>	_
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 2a 1)]		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	ļ	X	_
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	1			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	 	X	_
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	-	-	_
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a				
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	-	X	_
b	If "Yes," enter the name of the foreign country			1	
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts	_		3,5	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X	
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X	_
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c_		 —	_
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			.	
_	any contributions that were not tax deductible as charitable contributions?	6a		X	-
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6b		İ	
_	were not tax deductible?	- 60		 	-
7	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor'	7a		x	
a	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b			-
b	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	1			-
Č	to file Form 8282?	7c		Х	
d	If "Yes," indicate the number of Forms 8282 filed during the year				
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<u></u>	_
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	<u> </u>	<u> </u>	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	<u> </u>		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	1	ļ	_
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations Did the supporting			l	
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	ļ	<u> </u>	_
9	Sponsoring organizations maintaining donor advised funds.		Ì	İ	
а	Did the organization make any taxable distributions under section 4966?	9a	 	-	_
þ	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	<u> </u>	-	_
0	Section 501(c)(7) organizations. Enter				
	Initiation fees and capital contributions included on Part VIII, line 12	\dashv			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities [10b]	-			
1	Section 501(c)(12) organizations. Enter		1		
	Gross income from members or shareholders Cross income from other sources (Paret not amounte due or paid to other sources against	1	1		
D	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	`	1		
2-	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a			
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	120			-
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			}	
	Is the organization licensed to issue qualified health plans in more than one state?	13a		1	
a	Note. See the instructions for additional information the organization must report on Schedule O		1		-
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	╛			
С	Enter the amount of reserves on hand		<u> </u>		
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	1	<u> </u>	_
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b			_
		r .	. 000	10040	٠.

Form 990 (2012) BERKS YOUTH CHORUS, INC. 23-2684036 Page Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

	Check if Schedule O contains a response to any question in this Part VI			<u>X</u>
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 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 0.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 0			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			i e
	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	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
	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	1	Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
	The state of the s	8a	x	
	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		23	
9	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.)			
000	tion B. 1 onotes (mis section B requests information about policies not required by the line man nevertier code.)		Yes	No
100	Did the erganization have lead chapters branches or offiliates?	10a	162	X
	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	104		_A_
U	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990	110		
b 120		12a	х	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12b	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	120		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	40-	х	
40	In Schedule O how this was done	12c		v
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			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			7,
	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
	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		<u> X</u>
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	1		
	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		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ►PA			
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)	availab	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	icial	
	statements available to the public during the tax year			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza	tion 🕨	-	
	TREASURER - 610.775.7099			
	201 WASHINGTON STREET, READING, PA 19601			

orm 990 (2012)	_ BERKS	YOUTH	CHORUS,	INC.	23	-2684036	Page 7

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees; and former such persons.

Check this box if neither the organization n	or any related	orga	anıza	tion	COL	mper	nsat	ed any current officer, o	lirector, or trustee	
(A)	(B)			_ ((C)			(D)	(É)	(F)
Name and Title	Average	(do		Pos heck		l than i	one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson	ıs botl or/trus	han	compensation	compensation	amount of
	week		Cei ai		T	1		from	from related	other
	(list any hours for	rect				<u> </u>		the	organizations (W-2/1099-MISC)	compensation from the
	related	e or d	ie e			sated		organization (W-2/1099-MISC)	(W-2/1099-WIGC)	organization
	organizations	ruste	Institutional trustee		e Je	mpen		(***271033***********************************		and related
	below	gaj	ioit.	_	oldm	stco	16			organizations
	line)	Individual trustee or director	Instit	Officer	Key employee	Highest compensated employee	Former			3
(1) JAMES ROTH	2.00									
PRESIDENT		<u> </u>						0.	0.	0.
(2) J MICHAEL PRESSIMONE	2.00					,				
VICE PRESIDENT				L.,				0.	0.	0.
(3) ROSEMARY FRALEY	2.00		ļ						_	_
SECRETARY		ļ	ļ			ļ		0.	0.	0.
(4) KENNETH KUNKEL	3.00									
TREASURER								0.	0.	0.
(5) CARTER W CHESKEY, CBA, CFP	1.00					ľ				•
DIRECTOR		<u> </u>				-		0.	0.	0.
(6) MARY M ZERVANOS DIALECTOS, ESQ	1.00									
DIRECTOR	1 00							0.	0.	0.
(7) RABBI BRIAN MICHELSON	1.00				1					0
DIRECTOR	1 00							0.	0.	0.
(8) MARK EVERS	1.00					1			0	0
DIRECTOR	1 00					\vdash		0.	0.	0.
(9) CYNTHIA PHILLIPS	1.00							0.	0.	0.
DIRECTOR TANE WAITER MC DEPRECENTA	1.00							0.	<u> </u>	<u> </u>
(10) EMMA JANE MAURER, MS REPRESENTA DIRECTOR	1.00							0.	0.	0.
(11) REV. DAVID R STROBEL	1.00									
DIRECTOR								0.	0.	0.
(12) CINDY ROTHENBERGER	1.00								· · · · · · · · · · · · · · · · · · ·	!
DIRECTOR								0.	0.	0.
						1				
	1									
			\Box							<u></u>

Form 990 (2012) BERKS YO Part VII Section A. Officers Directors Trus									23-2	<u>684</u>	036	F	Page 8
Part VII Section A. Officers, Directors, Trus (A) Name and title	(B) Average hours per week	(do	not c	, and (C Posi check it ess per end a di	C) Ition more rson	l than is bot	one h an	(D) Reportable compensation from	es (continued) (E) Reportable compensatio	on amount of			t of
••	(list any hours for related organizations below line)	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organization (W-2/1099-MIS	ıs	fr org an	npensa rom th ganiza d rela anizat	ation ne ition ited
												u	
						-							
1b Sub-total								0.		0.			0.
c Total from continuation sheets to Part Vi d Total (add lines 1b and 1c)	·					>		0.		0.			0.
Total number of individuals (including but no compensation from the organization	ot limited to th	ose	liste	ed ab	00VE	e) wh	o re	eceived more than \$100	,000 of reportab	le 		Yes	0 N o
3 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s		stee	, ke	y em	nplo	yee,	or I	highest compensated e	mployee on	1	3		x
4 For any individual listed on line 1a, is the su and related organizations greater than \$150	0,000? If "Yes,	" cor	nple	ete S	Sche	dule	J f	or such individual		l	4		х
5 Did any person listed on line 1a receive or a rendered to the organization? If "Yes," com							elate	ed organization or indiv	idual for services		5	<u> </u>	х
Section B. Independent Contractors Complete this table for your five highest co										npens	ation f	rom	
the organization Report compensation for (A) Name and business		NC			ith c	or w	tnin	the organization's tax (B) Description of s	:	—	(C		 on
							_						
													
						.,							
2 Total number of independent contractors (iii	_	ot lın	nited	d to t	thos	se lis	ted	above) who received m	nore than				
\$100,000 of compensation from the organiz	zation >												

		Check if Schedule O conta	ains a response	to any question i	···	(5)	(C)	(D)
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
t 2	1 a	Federated campaigns	1a					
E E		Membership dues	1b					
اع ي			1c					
# #		Related organizations	1d					
S.E		0						
<u>ဗ</u> က်								
텵	_	similar amounts not included above	i i	94,744.				
Contributions, Gifts, Grants and Other Similar Amounts	a	Noncash contributions included in lines						
\ <u>a</u> \overline{\	_	Total. Add lines 1a-1f	·	>	94,744.			
				Business Code				
ي ا	2 a	STUDENT TUITION	Г	611600	54,275.	54,275.		
اھ≚	b	DEDEADAMAE DEE		611600	12,559.	12,559.		
S ž	С							
e a	d							
Program Service Revenue	е							
	f	All other program service reve	nue .					
	g	Total. Add lines 2a-2f		>	66,834.			
	3	Investment income (including	dividends, intere	est, and				
		other similar amounts)		▶	1,318.			1,318.
	4	Income from investment of tax	x-exempt bond p	oroceeds 🕨				
	5	Royalties .						
			(i) Real	(ıı) Personal				
	6 a	Gross rents				[
	b	Less. rental expenses						
	С	Rental income or (loss)				1		
	d	Net rental income or (loss)		. •				
	7 a	Gross amount from sales of	(i) Securities	(iı) Other				
		assets other than inventory						
	b	Less. cost or other basis				1		
		and sales expenses						
		Gain or (loss)	L	1				
		Net gain or (loss)						
힐	8 a	Gross income from fundraising						
ē		including \$						
Other Revenue		contributions reported on line	•	12 406	·			
卢		Part IV, line 18	a					1
₹		Less: direct expenses	b	7,516.	4 000			4,980.
		Net income or (loss) from fund			4,980.			4,300.
	9 a	Gross income from gaming ac						
	_	Part IV, line 19	а					
1		Less direct expenses	b	'				
		Net income or (loss) from gam			, , <u>, , , , , , , , , , , , , , , , , </u>			
	10 a	Gross sales of inventory, less						
		and allowances	a					
		Less: cost of goods sold	b	'				
	С	Net income or (loss) from sale		Dusiness Cada				
		Miscellaneous Revenu	е	Business Code 611600	84.	84.		
	_	MISCELLANEOUS		011000	04.	04.		
	b			 	,			
	C	All other revenue			<u> </u>	 	···········	
İ	d			<u> </u>	84.			
	12	Total. Add lines 11a-11d Total revenue See instructions.			167,960.		0	6,298.
23200	9	TOTAL TOTOTHE OUT HIST DUTIONS.			201,500			Form 990 (2012)

Form 990 (2012) BERKS YOUTH C
Part IX Statement of Functional Expenses

sec	Check if Schedule O contains a respons			Implete Column (A)	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) 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				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16	10.070	10.070		
4	Benefits paid to or for members	12,970.	12,970.		
5	Compensation of current officers, directors,	33,496.	22,331.	11,165.	
_	trustees, and key employees	33,490.	44,331.	11,100.	
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	50,806.	42,722.	7,725.	359.
8	Pension plan accruals and contributions (include	30,000.	12,,22,		
Ŭ	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	7,679.	5,925.	1,721.	33.
11	Fees for services (non-employees).				
а	Management	80.		80.	
b	Legal				
С	Accounting	1,190.		1,190.	
d	Lobbying	, ,			
е	Professional fundraising services. See Part IV, line 17	,			
f	Investment management fees .				
g	, ,	:			
	column (A) amount, list line 11g expenses on Sch O.)	E 445	D 145		
12	Advertising and promotion	7,145.	7,145.	1 252	
13	Office expenses	3,757.	2,505. 753.	1,252. 377.	
14	Information technology	1,130.	753.	311.	
15	Royalties	8,616.	5,744.	2,872.	
16	Occupancy . Travel	0,010.	J, 144.	2,012.	·
17 18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,996.	1,996.		
20	Interest	2/3300			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	801.	534.	267.	
23	Insurance	3,500.	2,333.	1,167.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
_	amount, list line 24e expenses on Schedule 0.) PERFORMANCE FEES	3,446.	3,446.		
a	COURTED ALLES DO DE DESDES	2,971.	2,971.		
b c	MUSIC	$\frac{2,971}{2,147}$.	2,147.		
d	DD 71707110 00 000	2,134.	2,11,0		2,134.
	All other expenses	6,352.	3,442.	2,810.	100.
25	Total functional expenses Add lines 1 through 24e	150,216.	116,964.	30,626.	2,626.
<u> </u>	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SQP 98-2 (ASC 958-720)				

Form 990 (2012)
Part X Balance Sheet

Par	t X	Balance Sheet				·
		Check if Schedule O contains a response to an	y question in this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		157,860.	1	198,624
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net		25,000.	3	500
	4	Accounts receivable, net			4	
	5	Loans and other receivables from current and for	ormer officers, directors,			
		trustees, key employees, and highest compens				
ŀ		Part II of Schedule L	. ,		5	
	6	Loans and other receivables from other disqual				
	•	section 4958(f)(1)), persons described in section	· · · · · · · · · · · · · · · · · · ·			
		employers and sponsoring organizations of sec	i			
		employees' beneficiary organizations (see instr)		6		
2	7	Notes and loans receivable, net	Complete Fait in or come		7	· · · · · · · · · · · · · · · · · · ·
	7	Inventories for sale or use			8	
	8	Prepaid expenses and deferred charges			9	
-	9		ı i			
1	10a	Land, buildings, and equipment cost or other	10a 29,164.			
		basis. Complete Part VI of Schedule D	A	1,862.	10c	1 387
		Less accumulated depreciation	10b 27,777.	36,915.	11	1,387 41,648
	11	Investments - publicly traded securities		30,313.		41,040
	12	Investments · other securities See Part IV, line	-		12	······································
	13	Investments - program-related. See Part IV, line	11		13	
	14	Intangible assets		4 205	14	1 765
	15	Other assets See Part IV, line 11		4,205.	15	4,767 246,926
	16	Total assets. Add lines 1 through 15 (must equ	al line 34)	225,842.	16_	
	17	Accounts payable and accrued expenses			17	489
	18	Grants payable		18		
	19	Deferred revenue .		19		
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete		· · · · · · · · · · · · · · · · · · ·	21	. <u></u>
	22	Loans and other payables to current and forme	r officers, directors, trustees,			
		key employees, highest compensated employee	es, and disqualified persons.			
'		Complete Part II of Schedule L.			22	
	23	Secured mortgages and notes payable to unrela	ated third parties		23	
	24	Unsecured notes and loans payable to unrelate	d third parties		24	
-	25	Other liabilities (including federal income tax, pa	yables to related third		1 1	
		parties, and other liabilities not included on lines	s 17-24) Complete Part X of			
		Schedule D	_	21,955.	25	20,500
_	26	Total liabilities. Add lines 17 through 25		<u>21,955.</u>	26	20,989
ļ		Organizations that follow SFAS 117 (ASC 958	B), check here ▶ 🐰 and			
3		complete lines 27 through 29, and lines 33 ar	id 34.			
!	27	Unrestricted net assets		153,524.	27	186,622
	28	Temporarily restricted net assets	İ	50,363.	28	39,315
	29	Permanently restricted net assets			29	
		Organizations that do not follow SFAS 117 (A	SC 958), check here 🕨 🗔			
		and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building, or ed	guipment fund		31	
	32	Retained earnings, endowment, accumulated in			32	
	33	Total net assets or fund balances	,	203,887.	33	225,937
- 1	34	Total liabilities and net assets/fund balances		225,842.	34	246,926

orm	990 (2012) BERKS YOUTH CHORUS, INC.	23-2684	036	_ Pag	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI		·		
1	Total revenue (must equal Part VIII, column (A), line 12)	1			<u>60.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2			<u> 16.</u>
3	Revenue less expenses Subtract line 2 from line 1	3			44.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			<u>87.</u>
5	Net unrealized gains (losses) on investments	5		<u>1,3</u>	<u>06.</u>
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	225	5,9	<u>37.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				oxdot
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other		1 1		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	-	2a	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a	1 1		
	separate basis, consolidated basis, or both		l i		
	X Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		_2b		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,			
	consolidated basis, or both		1 1		ĺ
	Separate basis Consolidated basis Both consolidated and separate basis				ł
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,	1 1		1
	review, or compilation of its financial statements and selection of an independent accountant?		2c	1	Х
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	edule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir			- 1	l
	Act and OMB Circular A-133?	•	3a		х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit			
_	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3h		ĺ

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.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization

BERKS YOUTH CHORUS, INC. Employer identification number 23-2684036

Part I	Reason	for Public Cha	rity Status (All organiz	ations mu	st complet	e this part	.) See inst	ructions				
he organ	ization is not a	a private foundation	because it is (For lines 1	1 through	11, check	only one b	ox)					
1	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).											
2 X	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)											
з 🔲			oital service organization of	·		170(b)(1)	(A)(ni).					
4	•		operated in conjunction					(b)(1)(A)(ıi	i). Enter	the hospita	l's nan	ne,
	city, and stat											
5 🔲	•		benefit of a college or ur	niversity ov	wned or or	perated by	a governr	nental uni	describ	ed in		
	section 170	(b)(1)(A)(iv). (Comp	lete Part II)									
6	A federal, sta	ate, or local governm	nent or governmental unit	t described	d in sectio	n 170(b)(1	I)(A)(v).					
7	An organizati	on that normally red	ceives a substantial part	of its supp	ort from a	governme	ntal unit o	r from the	general	public desc	cribed	in
	=	(b)(1)(A)(vi). (Comple				•						
8 🔲			section 170(b)(1)(A)(vi). ((Complete	Part II.)							
9			ceives. (1) more than 33 1			rom contri	butions, m	nembershij	p fees, a	ınd gross re	eceipts	from
			inctions - subject to certa									
			taxable income (less sect									
		509(a)(2). (Complet			,			, 3.			•	
ю 🗀			perated exclusively to te	st for publ	ic safety 9	See sectio	n 509(a)(4	L) .				
	-	=	perated exclusively for the		-				v out the	purposes	of one	or
''			ations described in section									
			organization and comple				., 000 300)	u)(O).			
	a Type I	· ' ' "		ype III - Fu	_		d	і 🔲 Тур	e III - No	n-functiona	llv inte	orated
	• •		at the organization is not	• •	-	_		• •				_
e			than one or more publicly									
		_	itten determination from t						λ(α)(٠) Οι	000000000000	٠,١٣٠,٠	•
f				ine ino ina	at it is a ry	pe i, Type	ii, or Type	, III				
		rganization, check t				from one	of the fall	Owing por	cone?			٠
g			organization accepted ar							,	Voc	No
			directly controls, either al	one or tog	ether with	persons c	iescribed i	in (ii) and (iii) Delow		Yes	No
	-		supported organization?			•		-		11g(i)		
			on described in (i) above?		-0		•		•	11g(ii)		
_			a person described in (i) o			-		•		[11g(ıii	ш	1
h	Provide the fo	ollowing information	n about the supported org	ganization	(S)							
		<u>r</u>	1	k		() D.d.		(vi) Is	the	T		
	of supported	(ii) EIN	(iii) Type of organization	r ,	organization sted in your	, , ,		Lorganization	on in col.	(vii) Amoun		netary
orga	inization		(described on lines 1-9 above or IRC section		document?		support?	(i) organiz U.S	ea in the	Sul	pport	
			(see instructions))	Yes	No	Yes	No	Yes	No	1		
	•.			162	NO	165	- 140	103	110	 		
									1			
							-					
									 			
									j			
			_	1				-				
			<u> </u>			 	<u> </u>	<u> </u>	 			
				1								
	·		<u> </u>	1			ļ	 _	<u> </u>	<u> </u>		
otai			1	1	1	1	1	1				

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-F71	2012
CHEUUIE A	11 01111	3300	330-12	12012

Page 2

P	art II Support Schedule for	Organization	s Described in	Sections 170	(b)(1)(A)(iv) ar	nd 170(b)(1)(A)(v	vi)
-	(Complete only if you checked						
	fails to qualify under the tests			•			-
Se	ction A. Public Support		<u> </u>				
	endar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Gifts, grants, contributions, and	127.232	107-00	(9)23.3	(G) = 3.1.		
	membership fees received (Do not						
	include any "unusual grants ")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf				<u> </u>		
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a			Ī			
	governmental unit or publicly						
	supported organization) included			1			
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
	Public support. Subtract line 5 from line 4			<u> </u>	J.,	<u> </u>	
	ction B. Total Support		1	ı			г
	endar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Amounts from line 4						
8	•						
	dividends, payments received on						
	securities loans, rents, royalties						
_	and income from similar sources Net income from unrelated business						
9	activities, whether or not the						
	business is regularly carried on						
10	Other income Do not include gain						
10	or loss from the sale of capital						
	assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10						
	Gross receipts from related activities,	etc (see instructi	ions)	1	1	12	<u> </u>
	First five years. If the Form 990 is for	•	•	d fourth or fifth t	ax vear as a secti	····	
	organization, check this box and stop		oo., oooo, o,	2, 100/11, 01	an your as a soon	J. 10 . (0)(0)	▶□
Se	ction C. Computation of Publi		rcentage				
14	Public support percentage for 2012 (li	ne 6, column (f) d	livided by line 11, o	column (f))		14	%
	Public support percentage from 2011			.,, -		15	%
	33 1/3% support test - 2012. If the o		•	n line 13, and line	14 is 33 1/3% or	more, check this bo	
	stop here. The organization qualifies a	s a publicly supp	oorted organization	1 _		-	▶□
t	33 1/3% support test - 2011. If the o	rganization did no	ot check a box on l	line 13 or 16a, and	line 15 is 33 1/3	% or more, check th	nis box
	and stop here. The organization qualif						
17a	10% -facts-and-circumstances test	- 2012. If the org	janization did not d	check a box on line	e 13, 16a, or 16b,	and line 14 is 10%	or more,
	and if the organization meets the "fact						
	meets the "facts-and-circumstances" t	est The organiza	ation qualifies as a	publicly supported	d organization		▶□
b	10% -facts-and-circumstances test	- 2011. If the org	ganization did not d	check a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or

more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

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

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

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 organization fails to
worlds under the teste listed heles, where complete Dest II.)

Section A. Public Support	now, picase com	piete r art ir j				
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and]	
membership fees received (Do not						
ınclude any "unusual grants ")			· · · · · · · · · · · · · · · · · · ·			
2 Gross receipts from admissions,						
merchandise sold or services per-						
formed, 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 bus-						
iness under section 513					i	
4 Tax revenues levied for the organ-				-		
ization's benefit and either paid to						
or expended on its behalf				•		
furnished by a governmental unit to			i			
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					ļ	
8 Public support (Subtract line 7c from line 6)				l		
Section B. Total Support						
Calendar year (or fiscal year beginning in) ► 🛚	(a) 2008	(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 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		, i				
activities not included in line 10b,						
whether or not the business is regularly carried on						
12 Other income. Do not include gain						
or loss from the sale of capital						
assets (Explain in Part IV.) 13 Total support. (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for	the erganization!	n first second thir	d fourth or fifth t	av vear as a section	on 501(c)(3) organiz	ation
-	the organization :	s ilist, second, triir	u, louitii, or illiir t	ax year as a section	on soricitor organiz	ation,
check this box and stop here Section C. Computation of Public	C Support Pe	rcentage		·		
15 Public support percentage for 2012 (lir			column (fl)		15	%
16 Public support percentage from 2011		•	.olumin (i))		16	
Section D. Computation of Inves					1101	
			a 13 column (f)		17	%
17 Investment income percentage for 201			ie 13, coluitin (i))		17	——————————————————————————————————————
18 Investment income percentage from 2			an line 14 and line	· ·	18 33 1/3% and less 1	
19a 33 1/3% support tests - 2012. If the c	=					/ IS HOT
more than 33 1/3%, check this box and	-	-				. ▶∟
b 33 1/3% support tests - 2011. If the c						and
line 18 is not more than 33 1/3%, chec						P
20 Private foundation. If the organization	did not check a	box on line 14, 19:	a, or 19b, check tl	nis box and see in	structions	

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.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number 23-2684036

Pai	rt I Organizations Maintaining Donor Advised	Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line 6		
		(a) Donor advised funds	(b) Funds 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 wi	riting that the assets held in donor advi-	sed funds
_	are the organization's property, subject to the organization's ex		Yes No
6	Did the organization inform all grantees, donors, and donor ad-	_	e used only
•	for charitable purposes and not for the benefit of the donor or		
	impermissible private benefit?		Yes No
Pai		nization answered "Yes" to Form 990, I	
1	Purpose(s) of conservation easements held by the organization		
•	Preservation of land for public use (e.g., recreation or edi		storically important land area
	Protection of natural habitat	· -	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifie	d conservation contribution in the form	of a conservation easement on the last
_	day of the tax year		
	out of the tax your		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements	•	2b
c	Number of conservation easements on a certified historic structure.	ture included in (a)	2c
d			
_	listed in the National Register		2d
3	Number of conservation easements modified, transferred, release	ased, extinguished, or terminated by th	e organization during the tax
_	year >		· ·
4	Number of states where property subject to conservation ease	ement is located	
5	Does the organization have a written policy regarding the perio		
	violations, and enforcement of the conservation easements it h		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, at		during the year 🟲
7	Amount of expenses incurred in monitoring, inspecting, and er		
8	Does each conservation easement reported on line 2(d) above		
	and section 170(h)(4)(B)(ii)?	, ,	Yes No
9	In Part XIII, describe how the organization reports conservation	n easements in its revenue and expens	e statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization		
	Conservation easements.		
Par	t III Organizations Maintaining Collections of	Art, Historical Treasures, or C	Other Similar Assets.
	Complete if the organization answered "Yes" to Form 99	90, Part IV, line 8	
1a	If the organization elected, as permitted under SFAS 116 (ASC	958), not to report in its revenue state	ment and balance sheet works of art,
	historical treasures, or other similar assets held for public exhib	oition, education, or research in further	ance of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describe	es these items	
b	If the organization elected, as permitted under SFAS 116 (ASC	958), to report in its revenue statemer	nt and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, edu	ication, or research in furtherance of pu	ublic service, 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 treas	sures, or other similar assets for financi	
	the following amounts required to be reported under SFAS 116		-
а	Revenues included in Form 990, Part VIII, line 1		> \$
	Assets included in Form 990, Part X		> \$

			OUTH CHORU							84036	
Pa	rt III	Organizations Maintaining	Collections of A	\rt, F	listorical Tr	easures, d	or Oth	er Simil	ar Asse	ts(continu	ied)
3	Using t	the organization's acquisition, access	sion, and other recor	ds, cl	neck any of the	following tha	it are a s	ignificant	use of its	collection	rtems
	(check	all that apply)									
а	F	Public exhibition		d 🗌	Loan or exc	hange progra	ams				
b		Scholarly research		e [Other						
С	F	Preservation for future generations									
4	Provide	e a description of the organization's c	collections and expla	un ho	w they further t	he organizati	on's exe	mpt purp	ose in Par	t XIII.	
5	During	the year, did the organization solicit	or receive donations	of an	t, historical trea	sures, or oth	er sımıla	r assets		_	
		old to raise funds rather than to be m	naintained as part of	the o	rganization's co	ollection?				Yes	No_
Pa	rt IV	Escrow and Custodial Arrar	ngements. Comp	lete ıf	the organizatio	n answered	"Yes" to	Form 990), Part IV,	line 9, or	
		reported an amount on Form 990, Pa	art X, line 21.								
1a	is the c	organization an agent, trustee, custoc	dian or other interme	diary	for contribution	s or other as	sets not	t included	r	_	
	on For	m 990, Part X?	**						L_	Yes	∟ No
b	If "Yes	" explain the arrangement in Part XIII	and complete the fe	ollowi	ng table						
									<u></u>	Amount	
С	Beginn	ing balance .			•			1c			
d	Additio	ns during the year			-			1d			
е	Distribi	utions during the year						1e			
f	Ending	balance .							<u> </u>		
2a	Did the	organization include an amount on F	form 990, Part X, line	e 21?			-		. L_	Yes	∐_ No
		" explain the arrangement in Part XIII									
Pa	rt V	Endowment Funds. Complete	if the organization a	nswe	red "Yes" to Fo	,					
			(a) Current year	(1	b) Prior year	(c) Two year	rs back	(d) Three	years back	(e) Four y	ears back
1a	Beginn	ing of year balance		ļ							
b	Contrib	outions								1	
С	Net inv	estment earnings, gains, and losses									
d	Grants	or scholarships						·			
е	Other e	expenditures for facilities									
	and pro	ograms									
f	Admini	strative expenses									
g	End of	year balance				<u> </u>		<u> </u>		<u></u>	
2	Provide	the estimated percentage of the cur	rrent year end balan	ce (lın	e 1g, column (a	a)) held as					
а	Board (designated or quasi-endowment		%							
b	Permar	nent endowment ►	%								
С		rarily restricted endowment 🕨	%								
	The pe	rcentages in lines 2a, 2b, and 2c sho	uld equal 100%.								
3а	Are the	re endowment funds not in the posse	ession of the organiz	zation	that are held a	nd administe	ered for t	the organi	zation	_	
	by									Y	es No
	(i) uni	related organizations			-	- •				3a(i)	
	(ii) rela	ited organizations								3a(ii)	
b	If "Yes'	to 3a(II), are the related organization	s listed as required (on Sc	hedule R?					3b	
4_		e in Part XIII the intended uses of the									
Pai	t VI	Land, Buildings, and Equipn	nent. See Form 99	0, Pai	rt X, line 10						
		Description of property	(a) Cost or o			or other	• •	ccumulat		(d) Book	value
			basis (invest	ment)	basis	(other)	de	preciation	1		
1a	Land	•									
b	Building	gs									
С	Leaseh	old improvements .									
d	Equipm	ent _			2	9,164.		27,7	77.	1	<u>,387.</u>
е	Other				l						
[ntal	Add Im	es 1a through 1e. (Column (d) must e	agual Form 000 Part	t X co	dumn (R) line 1	(O(c))				1	.387.

2. FIN 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's 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 PROPERTY OF THE TAXABLE THE		22 -	2694026	n 4
	dule D (Form 990) 2012 BERKS YOUTH CHORUS, INC. t XI Reconciliation of Revenue per Audited Financial Statemen			<u>2684036</u>	Page 4
		its with the vehicle por th	1	·	
1	Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12		- ' -		
2	· · · · · · · · · · · · · · · · · · ·	20			
а	Net unrealized gains on investments	2a	1 1		
b	Donated services and use of facilities .	2b			
С	Recoveries of prior year grants	2c	1		
ď	Other (Describe in Part XIII)	2d	2e		
e	Add lines 2a through 2d		3		
3	Subtract line 2e from line 1 Amounts included on Form 990, Part VIII, line 12, but not on line 1	-			
4	· · · · · · · · · · · · · · · · · · ·	40	1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	1 1		
b	Other (Describe in Part XIII.)	40	4c		
c	Add lines 4a and 4b	•	5		
Pai	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) † XII Reconciliation of Expenses per Audited Financial Statemen	nts With Expenses per	<u>. </u>	rn	
1	Total expenses and losses per audited financial statements		1	····	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	•			
	Donated services and use of facilities	2a			
a		2b	1		
b	Prior year adjustments Other losses	2c	1 [
C	Other (Describe in Part XIII)	2d	1		
d	Add lines 2a through 2d	20	2e		
e	Subtract line 2e from line 1		3		
3	Amounts included on Form 990, Part IX, line 25, but not on line 1.				
4	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
a	Other (Describe in Part XIII)	4b	1		
b	Add lines 4a and 4b	40	4c		
C E	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	•	5		
Par	t XIII Supplemental Information			 .	
	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III,	lines 1a and 4; Part IV, lines 1	b and	2b, Part V, line 4	1, Part
	e 2; Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to p				•
	T X, LINE 2: THE ORGANIZATION ADOPTED THE			ASC	
	at My Bitth B. The Ottomatematical about the				
740	-10 ON JULY 1,2009. THE ORGANIZATION RECOR	DS A LIABILITY	FOR	THE	
7	10 01 0021 1/20030 1112 01101112112112101111				
UNC	ERTAIN TAX POSITIONS WHEN IT IS PROBABLE T	HAT A LOSS HAS	BEE	N INCURR	ED
<u> </u>					
ANI	THE AMOUNT CAN BE REASONABLY ESTIMATED. T	HERE ARE NOT AN	IY U	NCERTAIN	ſ
				1	
TAX	POSITIONS AS OF JUNE 30, 2011 AND NO ASSO	CIATED INTEREST	OR	PENALTI	ES
REC	OGNIZED IN THE FINANCIAL STATEMENTS. MANAG	EMENT CONTINUAL	ιLΥ	EVALUATE	S
====					
EXF	IRING STATUTES OF LIMITATIONS, AUDITS, PRO	POSED SETTLEMEN	TS,	CHANGES	IN
TAX	LAW AND NEW AUTHORITATIVE RULINGS. THE TA	X YEARS ENDED J	UNE	30, 200	8
				dule D (Form 9	

Schedule D (Fo	orm 990) 2	012 ontal Infor	BERKS YO	OUTI	H CHORUS, IN	<u>C.</u>			23-268	34036	Page 5
	uppiem	ental inion	mation (contin	uea)							
THROUGH	2011	REMAIN	SUBJECT	то	EXAMINATION	BY	FEDERAL	AND	STATE		
TUDICDI	7MT () \ \	7									
JURISDIO	CTIONS	.					······································				
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SCHEDULE E (Form 990 or 990-EZ)

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.

OMB No 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

BERKS YOUTH CHORUS, INC.

Employer identification number

23-2684036 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 3 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 X 3 If you need more space, use Part II THE ORGANIZATION ADVERTISES ITS RACIAL NON-DISCRIMINATION POLICY THROUGH THE LOCAL AREA NEWSPAPER AT LEAST ANNUALLY Does the organization maintain the following? 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 admissions, programs, and scholarships? 40 X d Copies of all material used by the organization or on its behalf to solicit contributions? 4d 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 Students' rights or privileges? Х 5h Admissions policies? c Employment of faculty or administrative staff? 5c Х d Scholarships or other financial assistance? 5d X e Educational policies? 5e Х 5f f Use of facilities? X g Athletic programs? 5g X h Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II. 6a 6a Does the organization receive any financial aid or assistance from a governmental agency? X b Has the organization's right to such aid ever been revoked or suspended? 6b If you answered "Yes" to either line 6a or line 6b, explain on Part II 7 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4 05 of

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

Rev. Proc 75.50, 1975.2 C B 587, covering racial nondiscrimination? If "No," explain on Part II

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

Part II Supplemental Information. Complete this part to provide the explanations required by Part I, lines 3, 4d, 5h, 6b, an as applicable. Also complete this part to provide any other additional information.	~ · · ·

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

Name of the organization

BERKS YOUTH CHORUS, INC.

Employer identification number 23-2684036

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
EDUCATION AND THE OPPORTUNITY TO PERFORM BEFORE LIVE AUDIENCES.
FORM 990, PART VI, SECTION B, LINE 11: THE BOARD REVIEWED THE 990 AT THEIR FEBRUARY 2012 BOARD MEETING AND APPROVED IT'S FILING.
FORM 990, PART VI, SECTION B, LINE 12C: ALL BOARD MEMBERS ARE REQUIRED TO REVIEW AND SIGN THE CONFLICT OF INTEREST POLICY ANNUALLY
FORM 990, PART VI, SECTION C, LINE 18: POSTED ON GUIDESTAR
FORM 990, PART VI, SECTION C, LINE 19: REVIEWED FINANCIAL STATEMENTS AND FORMS 990 OR 990EZ POSTED ON GUIDESTAR. ALSO, PDF FILES ARE PROVIDED UPON
SPECIFIC REQUEST.