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Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2013

OMB No 1545-1150

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Do not enter Social Security numbers on this form as it may be made public. ▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

A F	or the	2013 calenda	ar year, or tax year beginning January 1 , 2013, and ending	Dece	mber 31	, 20 13
Вс	heck if ap	plicable	C Name of organization) Emplo	yer identific:	ation number
	ddress cl	hange .	Rock Bridge High School Show Choir Boosters		30-0462	2603
ן∟	lame cha	nge	Number and street (or P O box, if mail is not delivered to street address) Room/suite E	Teleph	one number	
$\overline{}$	nitial retur		1201 Chadwick		573-874-	-0009
一	erminated Imended i		City or town, state or province, country, and ZIP or foreign postal code	Group	Exemption	1
_		n pending	Columbia, MO 65203-5643	-	oer ▶	
G A	ccount	ing Method:	✓ Cash Accrual Other (specify) ► H C	heck ▶	If the c	rganization is not
I W	ebsite:	:▶	!		to attach So	
J Ta	эх-ехеп	npt status (che	eck only one) - ✓ 501(c)(3) ☐ 501(c) () ◀ (insert no) ☐ 4947(a)(1) or ☐ 527 (F	om 99	0, 990-EZ, d	or 990-PF).
			☐ Corporation ☐ Trust ☑ Association ☐ Other			
LA	dd lines	s 5b, 6c, and	7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total a	assets		
(Par	t II, colu	umn (B) belov	v) are \$500,000 or more, file Form 990 instead of Form 990-EZ, ·	. •	▶ \$	70,034
Pa	art I	Revenu	e, Expenses, and Changes in Net Assets or Fund Balances (see the ir	nstruct	tions for F	art I)
	•		the organization used Schedule O to respond to any question in this Part I.			•
	1		nns, gifts, grants, and similar amounts received		1	7,712
	2		ervice revenue including government fees and contracts	Ի	2	
	3		ip dues and assessments	🗀	3	
-	4	Investment			4	
	5a	Gross amo	unt from sale of assets other than inventory 5a	·		
	ь		or other basis and sales expenses			
	С		ss) from sale of assets other than inventory (Subtract line 5b from line 5a)		5c	
	6	•	d fundraising events			
14	а	Gross inc	ome from gaming (attach Schedule G if greater than			
űę		\$15,000) .		1		
JUNRêvenûe) 14	ь	Gross inco	me from fundraising events (not including \$ of contributions	\neg		
é			aising events reported on line 1) (attach Schedule G if the			
Ż		sum of suc	th gross income and contributions exceeds \$15,000) 6b	2,322		
3	С	Less: direc	t expenses from gaming and fundraising events 6c 1	7,261		
	d	Net incom	e or (loss) from gaming and fundraising events (add lines 6a and 6b and subti	ract		
SCANNED		line 6c) .			6d	33,503
Z	7a	Gross sale	s of inventory, less returns and allowances 7a			
₹	b	Less: cost	of goods sold			
ర్జ	С	Gross prof	it or (loss) from sales of inventory (Subtract line 7b from line 7a)		7c	
	8	Other reve	nue (describe in Schedule O) RECEIVED	[8	
	9	Total reve	nue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	▶_	9	52,773
	10	Grants and	l sımilar amounts paid (list in Schedule O)တူ	[10	4,053
	11	Benefits pa	aid to or for members		11	
es	12		ther compensation, and employee benefits	[12	
Expenses	13	Profession	al fees and other payments to independent contractors GDEN, U.T.	[13	
ĝ	14			. . [14	
Û	15		ublications, postage, and shipping	[15	
	16		enses (describe in Schedule O)		16	59,749
	17	Total expe	enses. Add lines 10 through 16	. ▶	17	63,802
ξ	18	Excess or	(deficit) for the year (Subtract line 17 from line 9) \cdot . \cdot . $$.		18	(11,029)
Se	19		or fund balances at beginning of year (from line 27, column (A)) (must agree			
As		-	r figure reported on prior year's return)		19	19,288
Net Assets	20		nges in net assets or fund balances (explain in Schedule O)	[20	
	21		or fund balances at end of year. Combine lines 18 through 20	. ▶	21	8,259
For	Papen	work Reduct	ion Act Notice, see the separate instructions. Cat. No. 106421		Form	990-EZ (2013)





	990-EZ (2013)	o for Dort II)	-			Page
Pal	Balance Sheets (see the instruction Check if the organization used Schedu		ny gyaatian in thia	Dow II		
	Check if the organization used Schedi	ule O to respond to a	ny question in triis	(A) Beginning of year		
22	Cash, savings, and investments			19,258		8,134
23	Land and buildings			17,230	23	0,134
24	Other assets (describe in Schedule O)				24	
25	Total assets			19,288	 	8,134
26				17,200	26	125
27	Net assets or fund balances (line 27 of colui		<u> </u>	19,288		8,259
Par		<u>-</u>				
	Check if the organization used Schedu	•		,	/D	Expenses
What	is the organization's primary exempt purpose?		je High School's show			uired for section c)(3) and 501(c)(4)
Desc	ribe the organization's program service accom	plishments for each of	of its three largest p	rogram services,	organ	nizations and section (a)(1) trusts; optional
as m	leasured by expenses. In a clear and concise ons benefited, and other relevant information for	manner, describe the each program title.	e services provided	I, the number of		hers.)
28	We hold fundraisers for raise money for 3 show ci		approximately 90 stud	dents. The funds		I
	are used to pay for costumes, sets and props, cho		•			
	in several show choir competitions each year. We		•	•		
		ınt includes foreign gra	•		28a	63,802
29				<u> </u>		- 50,000
	(Grants \$) If this amou	ınt includes foreign gra	ants, check here .	▶ □	29a	
30			,	<u> </u>		
	-		-			
	(Grants \$) If this amou	ınt includes foreign gra	ants, check here .	▶ 🗆	30a	
31	Other program services (describe in Schedule C					
	(Grants \$) If this amou	int includes foreign gra	ants, check here .	▶ □	31a	
32	Total program service expenses (add lines 28	Ba through 31a)		🕨	32	
Par	List of Officers, Directors, Trustees, and	Key Employees (list eac	h one even if not com	pensated-see the	nstruc	tions for Part IV)
	Check if the organization used Schedu	ule O to respond to a	ny question in this	Part IV		🗀
		(b) Average	(c) Reportable	(d) Health benefits,		
	(a) Name and title	hours per week	compensation (Forms W-2/1099-MISC)	contributions to employ benefit plans, and		Estimated amount of ther compensation
		devoted to position	(if not paid, enter -0-)	deferred compensatio		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Leon	ard Manson	1 hour			ĺ	
Pres	dent					
Mike	Pierson	5 hours				
	President		c)		
Chris	s Brown	1 hour				
Treas	surer		c			
Cher	yl Jackson	1 hour				· -
Secr	etary)		
_						
					\top	
			<u> </u>			
					1	

Part	·			
	instructions for Part V) Check if the organization used Schedule O to respond to any question in this	Part	_	
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a		Yes	No
	detailed description of each activity in Schedule O	33		~
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		~
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		~
ь	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		
C	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		~
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		7
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a			
b	Did the organization file Form 1120-POL for this year?	37b		~
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? .	38a		~
b	If "Yes," complete Schedule L, Part II and enter the total amount involved			
39	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on line 9	-		
b 40a	Gross receipts, included on line 9, for public use of club facilities	1		
₩	section 4911 ► ; section 4912 ► ; section 4955 ►			
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit			
_	transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been			
	reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		/
С	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		~
41	List the states with which a copy of this return is filed ▶			
42a	The organization's books are in care of ▶ Chris Brown Telephone no. ▶	573-23	9-3537	7
	Located at ► 7009 Madison Creek Dr , Columbia, MO ZIP + 4 ►		203	
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Yes	
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country: ▶	42b		~
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			
	and Financial Accounts.			
C	At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c		~
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here		. 1	
			Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a		~
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		,
С	Did the organization receive any payments for indoor tanning services during the year?	44c		~
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44d		_
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		V
45b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the	<u> </u>		Ť
	meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45h		

	0-EZ (2013)			 		Yes	age 4
46	Did the organization engage, directly or in	ndirectly, in political c	ampaign activities on	behalf of or in opposi	rtion [163	140
	to candidates for public office? If "Yes," of	complete Schedule C	, Part I	<u> </u>	- 46		~
Part	All section 501(c)(3) organization		stions 47–49b and	52, and complete th	ne tables f	or line	es
	50 and 51. Check if the organization used Sc	hedule () to respond	to any guestion in th	nie Dart VI			
	Check if the organization used de	ricadie O to respond	to any question in ti	iis i art vi	• • • •	Yes	No
47	Did the organization engage in lobbying year? If "Yes," complete Schedule C, Par		section 501(h) electro	_	tax . 47		~
48	Is the organization a school as described in	n section 170(b)(1)(A)(i	i)? If "Yes," complete S	Schedule E	. 48		~
49a	Did the organization make any transfers t				. 49a		~
b	If "Yes," was the related organization a se	ection 527 organization	on?		. 49b		<u> </u>
50	Complete this table for the organization's employees) who each received more than	s five highest compen	sated employees (oth	er than officers, direc	tors, truste	es an	d key
	employees) who each received more than		<u> </u>	(d) Health benefits,	le, enter i	ione.	
	(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	contributions to employee benefit plans, and deferred compensation			
				 			
	, , , , , ·						
				=			-
	T-A-l mark and all an analysis and all and an analysis and all and an analysis and all and an analysis and analysis and an ana	A100.000	L			_	
51	Total number of other employees paid ov Complete this table for the organization \$100,000 of compensation from the orga	's five highest compe	ensated independent	contractors who eac	h received	more	than
	(a) Name and business address of each independ		(b) Type of serv	ice la) Compensati	OD.	
	(2)		(5) 1) po oi doi i	(0	y Comparisati	-	-
_							
d	Total number of other independent contra	actors each receiving	over \$100,000	<u> </u>			
52	Did the organization complete Schedule nonexempt charitable trusts must attach	A? Note. All section 5	01(c)(3) organizations		► ☐ Yes		No.
Under p	renalties of perjury, I declare that I have examined this rect, and complete Declaration of preparer (other that	retum, including accompan	ying schedules and stateme	nts, and to the best of my k			ıt ıs
			EF	,			

		nined this return, including accompanying schedules and site of the control of which prepared the same of which prepared the control of the c		
Sign Here	Signature of officer Chris Brown, Treasurer Type or print name and title	Clin Brown		Date 5/13/2014
Paid Preparer	Print/Type preparer's name	Preparer's signature	Date	Check if relative if self-employed
Use Only	Firm's name ▶			Firm's EIN ▶
	Firm's address ▶			Phone no.
May the IRS	discuss this return with the	preparer shown above? See instructions .		· · · · ▶ ☐ Yes ☐ No

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ.
► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

ıame	or u	ne organization						"	Employer id	renuncatio	n number		
Rock	Bri	<u> </u>	ol Show Choir Boo								62603		
Par	<u>t I</u>	Reason for	or Public Char	rity Status (All orga	nizations	s must c	omplete	this par	rt.) See i	nstructio	ons.		
The c	_		•	tion because it is: (Fo		_		-	•				
1				nes, or association of			ed in sec	tion 170((b)(1)(A)(i).			
2		A school desc	ribed in section	170(b)(1)(A)(ii). (Attac	h Sched	ıle E.)							
3				spital service organiza									
4			earch organizatione, city, and state	on operated in conjund e:	ction with	a hospit	al descrit	oed in se	ction 17	0(b)(1)(A)	(iii). Ente	er the	
5			on operated for t)(1)(A)(iv). (Comp	the benefit of a collect plete Part II.)	ge or uni	versity ov	vned or	operated	by a go	vernment	tal unit o	describ	oed in
6 7		An organization	on that normally	nment or governmenta receives a substantia (A)(vi). (Complete Par	part of					nit or fron	n the ge	neral	public
8		A community t	trust described i	n section 170(b)(1)(A)	(vi). (Cor	nplete Pa	rt II.)						
9	V	receipts from support from	activities related gross investme	receives: (1) more that I to its exempt functi nt income and unrel fter June 30, 1975. Se	ions—sul ated bus	oject to d siness tax	ertain ex kable ind	ceptions ome (les	s, and (2) ss sectio	no more	e than 3	31/3%	of its
10		An organizatio	n organized and	operated exclusively	to test fo	r public s	safety. Se	e sectio	n 509(a)((4).			
11		purposes of o	ne or more pub	d operated exclusive dicly supported organ describes the type of	nzations	described	d in secti	ion 509(a	a)(1) or se	ection 50	9(a)(2). \$		
		a ☐ Type I	b ☐ Type							Non-funct	_	ntegra	ted
е				that the organization		-	-				-	_	
				ers and other than one									
		or section 509	(a)(2).										
f		If the organization, organization, or		written determination	on from 1	the IRS t	hat it is	a Type	I, Type 	ll, or Typ	e III su 	pportu	ng
g		Since August following person		he organization accep	oted any	gift or co	ontributio	n from a	iny of the	•			
				ndirectly controls, eithody of the supported of						d ın (ii) aı	nd [11g(Yes	No
		7 7		on described in (i) abo	_						11g(i	_	
		•	•	a person described in							11g(i		\vdash
h				on about the support							196	··/[.1
(i)		ne of supported ganization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) is the o	organization sted in your document?	the organ col. (i)	ou notify nization in of your port?	organiza (i) organi	Is the tion in col. ized in the S.?	(vii) Amou	ınt of m upport	onetary
					Yes	No	Yes	No	Yes	No	1		
(A)												-	
(B)													
(C)							-					_	
(D)										-			_
(E)								-	-				
								 	 	 	 		
			:	1	1								

Part	I Support Schedule for Organiza	ations Desci	ibed in Sect	ions 170(b)(1)(A)(iv) and 1	170(b)(1)(A)(v	ri)
	(Complete only if you checked the						alify under
	Part III. If the organization fails to	o qualify unde	er the tests lis	sted below, p	lease comple	ete Part III.)	
	on A. Public Support			·			
	idar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and	1					
	membership fees received. (Do not	ļ					
•	include any "unusual grants.")						ļ
2	Tax revenues levied for the organization's benefit and either paid		:				
	to or expended on its behalf				ļ		
3	The value of services or facilities	-			-		
	furnished by a governmental unit to the				{		
	organization without charge						
4	Total. Add lines 1 through 3			<u> </u>			
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.	·	<u>i</u>		<u> </u>		<u> </u>
	ion B. Total Support	(-) 0000	6) 0040	() 0044	/ D 00/0		I 40 T
	Amounts from line 4	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7							
8	Gross income from interest, dividends, payments received on securities loans,	İ					
	rents, royalties and income from similar	-					
	sources						
9	Net income from unrelated business						
	activities, whether or not the business	<u> </u>			}		
	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	<u> </u>	<u> </u>	<u></u>			
12	Gross receipts from related activities, etc					12	504()(0)
13	First five years. If the Form 990 is for the organization, check this box and stop he				_		
Secti	on C. Computation of Public Support			• • • • •	- · · · · · · · · · · · · · · · · · · ·	· · · · ·	▶ <u> </u>
14	Public support percentage for 2013 (line			1 column (f)		14	%
15	Public support percentage from 2012 Sci					15	/0
16a	331/3% support test—2013. If the organi						
	box and stop here. The organization qua	difies as a pub	licly supported	organization			🕨 🛚
b	331/3% support test-2012. If the organ					15 is 33½%	
	check this box and stop here. The organ	ization qualifie	s as a publicly	supported org	ganization .		🕨 🗀
17a	10%-facts-and-circumstances test-2						
	10% or more, and if the organization me						
	Part IV how the organization meets the "I			_	•		··
	organization						🕨 🗖
b	10%-facts-and-circumstances test—2						
	15 is 10% or more, and if the organization						
	Explain in Part IV how the organization in supported organization		s-and-circums		ne organizatio	n qualifies as	
18	Private foundation. If the organization di				or 17h chec	k this hav and	<u> </u>
.0	unetructions	HOL GILCON A	DOX OIT III IG TO	, 100, 100, 170	a, or 110, 01160	ייי מווס שטא מווט	

Part III

Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.

	If the organization fails to qualify	under the tes	ts listed belo	w, please co	mplete Part I	<u>l.) </u>	
Secti	on A. Public Support				_	-	
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")	6150	4625	3350	1310	4053	19,488
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	32542	37779	30475	45160	33503	179,459
3	Gross receipts from activities that are not an	32342	37/17	30473	43100	33303	177,437
3	unrelated trade or business under section 513						
					_		
4	Tax revenues levied for the						
	organization's benefit and either paid					1	
	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	38692	42404	33825	46470	37556	198,947
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						
_	· •						
8	Add lines 7a and 7b						
0	line 6.)						
Ca aki							
	on B. Total Support	() 0000	# N 00 4 0	4.3.0044	(n a a d a a a a a		
	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6	38692	42404	33825	46470	37556	198947
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			1			
	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 carned on	i		İ			
12	Other income. Do not include gain or						
	loss from the sale of capital assets	ļ	l	1			
	(Explain in Part IV.)					1	
13	Total support. (Add lines 9, 10c, 11,	1					
	and 12.)	38692	42404	33825	46470	37556	198947
14	First five years. If the Form 990 is for the						
17	organization, check this box and stop he	_			-	-	, ,, ,
Coati	on C. Computation of Public Suppor			· · · · · ·	- : : : :	· · · · ·	· · • v
				0 1 (6)		Tari	
15	Public support percentage for 2013 (line 8					15	%
16 Socti	Public support percentage from 2012 Sch			<u>· · · · -</u> -		16	%
	on D. Computation of Investment Inc			. !: 10 :	(6)	147	
17	Investment income percentage for 2013 (17	%
18	Investment income percentage from 2012					18	%
19a	331/3% support tests—2013. If the organ						· ·
	17 is not more than 331/3%, check this box						
b	331/3% support tests—2012. If the organiz						
	line 18 is not more than 331/3%, check this l				-	-	
20	Private foundation. If the organization de	d not check a b	oox on line 14,	19a, or 19b, c	heck this box	and see instruc	ctions > \

ı	P:	ac	ıe	4

۰.	hadi	da	٨	/Earm	990 or	000	57	2012	
ЭC	Heut	JIE.	м.	LEOTH	99U OF	990-	-	2013	

Part IV Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Schedule A (Form 990 or 990-EZ) 2013

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

Rock	Bridge High School Show Choir B						0462603
Pai	Fundraising Activities				vered "Yes" to F	orm 990, Part IV,	line 17.
	Form 990-EZ filers are		<u>-</u>				
1	Indicate whether the organizati	on raised funds t	through any	of the follo	owing activities. C	heck all that apply.	
а	Mail solicitations		е 🗆		on of non-govern	•	
b	Internet and email solicitate	ons	f [Solicitat	on of government	t grants	
C	Phone solicitations		g ⊡	Special i	fundraising events	5	
d	In-person solicitations						
2a	• • • • • • • • • • • • • • • • • • • •						
	or key employees listed in Form		-		•	•	
b	If "Yes," list the ten highest par compensated at least \$5,000 b			draisers) pi	ursuant to agreen	nents under which th	ne fundraiser is to be
	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	custody o	draiser have r control of outlons?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
			Yes	No			
1				·			
2							
3							
4		1	<u> </u>				
5			_				
6							
7			 				
8							
9		-					
10			1				
Tota	List all states in which the org	anization is regis	stered or lic	Þ	olicit contribution	s or has been notifi	ed it is everet from

registration or licensing.

		gross receipts greater that		51.5		
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			Program Ad Sales	Show Choir Festival (event type)	3	(add col. (a) through col. (c))
ω 1		ŀ	(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	15654	29764	17129	62547
Š	•	Gross receipts	10004	27704	17127	
-	2	Less: Contributions				
	3	Gross income (line 1 minus				
		line 2)	15654	29764	17129	62547
		Cook prizos				
	4	Cash prizes				
	5	Noncash prizes				
, 0						
Ses	6	Rent/facility costs				·
be	_					
Ψ	7	Food and beverages		5021	4762	<u> </u>
Direct Expenses	8	Entertainment				
Δ				-		
	9	Other direct expenses .		6793	809	7602
	_	_				
	10 11	Direct expense summary. Ad Net income summary. Subtra			🟲 📙	17385
Рa	rt III	Gaming. Complete if the				45162
_		than \$15,000 on Form 99				
ē			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
èn				bingo/progressive bingo		col. (a) through col. (c))
Revenue						
	1					
		Gross revenue				
တ္ဆ	2					
sesu	2	Cash prizes				
xbenses	2					
ct Expenses	3	Cash prizes				
Orrect Expenses		Cash prizes				
Direct Expenses	3	Cash prizes Noncash prizes Rent/facility costs				
Direct Expenses	3	Cash prizes	☐ Yes %	☐ Yes % [Yes %	
Direct Expenses	3	Cash prizes Noncash prizes Rent/facility costs	☐ Yes %	景 ::	☐ Yes %	
Direct Expenses	3 4 5 6	Cash prizes Noncash prizes Rent/facility costs Other direct expenses . Volunteer labor	□ No	□ No [
Direct Expenses	3 4 5	Cash prizes Noncash prizes Rent/facility costs Other direct expenses .	□ No	□ No [
Direct Expenses	3 4 5 6 7	Cash prizes	No ld lines 2 through 5 in c	No [
Direct Expenses	3 4 5 6	Cash prizes Noncash prizes Rent/facility costs Other direct expenses . Volunteer labor	No No d lines 2 through 5 in c	No [
Direct Expenses	3 4 5 6 7 8	Cash prizes	No d lines 2 through 5 in c	olumn (d)		
	3 4 5 6 7 8 Er a Is	Cash prizes	No d lines 2 through 5 in co y. Subtract line 7 from li ganization operates gar	olumn (d)		□ Yes □ No
	3 4 5 6 7 8 Er a Is	Cash prizes	No d lines 2 through 5 in co y. Subtract line 7 from li ganization operates gar	olumn (d)		🗆 Yes 🗆 No
	3 4 5 6 7 8 Er a Is	Cash prizes	No d lines 2 through 5 in co y. Subtract line 7 from li ganization operates gar	olumn (d)		🗆 Yes 🗎 No
	3 4 5 6 7 8 Er a Is	Cash prizes	No d lines 2 through 5 in c y. Subtract line 7 from li ganization operates gar perate gaming activities	olumn (d)	No No	

Does the organization operate gaming activities with nonmembers? 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? 13 Indicate the percentage of gaming activity operated in: 14 The organization's facility 15 An outside facility 16 An outside facility 17 An outside facility 18 An outside facility 18 An outside facility 18 An outside facility 19 An outside facility 19 An outside facility 19 An outside facility 19 An outside facility 18 An outside facility 18 An outside facility 18 An outside facility 18 An outside facility 19 An outside facility 19 An outside facility 19 An outside facility 19 An outside facility 19 An outside facility 19 An outside facility 19 An outside facility 19 An outside facility 19 An outside facility 19 An outside facility 19 An outside facility 19 An	 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer chantable gaming? Indicate the percentage of gaming activity operated in: The organization's facility An outside facility Enter the name and address of the person who prepares the organization's gaming/special events books and records: 	_	
Indicate the percentage of gaming activity operated in: a The organization's facility	Indicate the percentage of gaming activity operated in: a The organization's facility		%
b An outside facility	b An outside facility		
Enter the name and address of the person who prepares the organization's gaming/special events books and records: Name ► Address ► 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:		%
Name ► Address ► Address ► 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	records:		
Address ► 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Name ►		
Does the organization have a contract with a third party from whom the organization receives gaming revenue?			
revenue?	Address ►		
amount of gaming revenue retained by the third party ▶ \$ c If "Yes," enter name and address of the third party: Name ▶ Address ▶ 16 Gaming manager information: Name ▶ Gaming manager compensation ▶ \$ Description of services provided ▶ □ Director/officer □ Employee □ Independent contractor 17 Mandatory distributions: a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	revenue?	☐ Yes	i □ No
Address ► 16 Gaming manager information: Name ► Gaming manager compensation ► \$ Description of services provided ► □Director/officer □Employee □Independent contractor 17 Mandatory distributions: a is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	amount of gaming revenue retained by the third party ▶ \$		
Gaming manager information: Name ► Gaming manager compensation ► \$ Description of services provided ► □Director/officer □Employee □Independent contractor Mandatory distributions: a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Name ►		
Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and	Address ►		
Gaming manager compensation ► \$ Description of services provided ► □ Director/officer □ Employee □ Independent contractor 17 Mandatory distributions: a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	16 Gaming manager information:		
Director/officer	Name ►		
Director/officer	Gaming manager compensation ► \$		
 Mandatory distributions: a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	Description of services provided ►		
 a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	□ Director/officer □ Employee □ Independent contractor		
 b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and 	a Is the organization required under state law to make charitable distributions from the gaming proceeds to	☐ Yes	i □ No
	b Enter the amount of distributions required under state law to be distributed to other exempt organizations or		
additional information (see instructions).	Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide	nd (v), a e any	ınd

SCHEDULE O (Form 990 or 990-EZ)

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.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or 990-EZ.

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization

Rock Bridge High School Show Choir Boosters

Employer identification number

30-0462603

Part I, Line 10, Grants and similar amounts paid

CASA (Court Appointed Special Advocates) - \$4,053

Part I, Line 16, Other Expenses

Choreography 11,362

Competitions 34,820

Costumes 8,775

Insurance 584

Props: 1,581

Other. 2,627

Schedule O (Form 990 or 990-EZ) (2013) Name of the organization	Page 2 Employer identification number
· · · · · · · · · · · · · · · · · · ·	

Rock Bridge High School Show Choir Boosters By-Laws

١.

Name:

Rock Bridge High School Show Choir Boosters

11.

The Rock Bridge High School Show Choir Boosters is a nonprofit public benefit corporation. The period of duration for the RBHS Show Choir Boosters is perpetual.

III.

Purpose

The purpose of the Rock Bridge High School Show Choir Boosters shall be to support the RBHS Show Choir program through organizational coordination, volunteer services and fundraising efforts designed to secure suitable, adequate financial backing that would be otherwise unavailable to the program.

IV.

Membership

Any one interested in the welfare of the RBHS Show Choir program and the development of programs thereof shall be eligible for membership.

٧.

Officers

The officers of this organization will include president, secretary, and treasurer. The current Director of Vocal Music Programs at RBHS will serve as an ex-officio member of the executive committee. The officers will serve as the executive committee of the RBHS Show Choir Boosters.

VI.

Elections

The executive committee will nominate a slate of officers for the next school year. This slate of officers will be presented during the first meeting of the RBHS Show Choir Boosters at the beginning of each school year.

Vii.

Duties of Officers

Section A. President shall preside at all meetings and provide leadership to the organization; shall appoint committee members; countersign checks in the absence of the Treasurer.

Section B. Secretary shall be responsible for recording minutes at all meetings of the organization and provide them when requested. This person will attend to all correspondence on behalf of the organization as directed by the board of directors.

Section C. Treasurer shall receive all funds due the organization, deposit same, pay all authorized bills as directed by the executive committee, and submit records for audit at the conclusion of each school year.

VIII.

Steering Committee

Section A. The Steering Committee of this organization will be comprised of the executive committee and no more than 8 at-large members that shall be appointed by the executive committee.

Section B. The steering committee shall have the power to act on all urgent matters for the membership between the meetings of this organization.

IX.

Meetings

General meetings of the organization will be open to all members of said organization. At least two meetings will be held annually; one at the beginning of the school year and a second one prior to the major fundraising activity. Additional meetings may be called as deemed necessary by the executive committee. A majority of the members present at an announced meeting shall constitute a quorum. Meetings will not be required to follow Robert's Rules of Order.

Χ.

Assets and Property

All property acquired by RBHS Show Choir Boosters shall become property of the RBHS Vocal Music Department. The assets of the organization will be distributed upon dissolution as a donation to the RBHS Vocal Music Department.

XI.

Amendments

The by-laws may be amended by a majority vote of the members present at a General Meeting of the organization.

By-Laws Adopted and Approved by the Steering Committee on June 1, 2006.