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Form 990-PF

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0052 2015

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-PF and its separate instructions is at www.irs.gov/form990pf.

For calendar year 2015 or tax year beginning , and ending Employer identification number THE GIFT OF MUSIC FOUNDATION 20-6301478 Number and street (or P O box number if mail is not delivered to street address) Room/stute Telephone number (see instructions) 5543 EDMONDSON PIKE #22 615-495-9059 City or town, state or province, country, and ZIP or foreign postal code If exemption application is pending, check here TN 37211 NASHVILLE Initial return Initial return of a former public charity G Check all that apply 1 Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the Address change 85% test, check here and attach computation Name change Check type of organization | X | Section 501(c)(3) exempt private foundation If private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation X Cash J Accounting method: Fair market value of all assets at If the foundation is in a 60-month termination under section 507(b)(1)(B), check here Other (specify) end of year (from Part II, col. (c), 82,279 line 16) ▶ \$ (Part I, column (d) must be on cash basis) (d) Disbursements Analysis of Revenue and Expenses (The total of Part I (a) Revenue and (b) Net investment (c) Adjusted net for charitable amounts in columns (b), (c), and (d) may not necessarily equal income income purposes hooks the amounts in column (a) (see instructions)) cash basis only) Contributions, gifts, grants, etc., received (attach schedule) 13,900 1 2 Check ▶ I if the foundation is **not** required to attach Sch. B Interest on savings and temporary cash investments 3 4 Dividends and interest from securities RECEIVED 5a Gross rents Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 6a JULI 2 0 2615 Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) 0 7 OGDEN LIT Net short-term capital gain 8 9 Income modifications 10a Gross sales less returns and allowances b Less. Cost of goods sold Gross profit or (loss) (attach schedule) C Other income (attach schedule) 11 13,900 ol O 12 Total, Add lines 1 through 11 Compensation of officers, directors, trustees, etc. 13 Operating and Administrative Expenses 14 Other employee salanes and wages 15 Pension plans, employee benefits Legal fees (attach schedule) SEE STMT 1 558 16a STMT 2 200 Accounting fees (attach schedule) Other professional fees (attach schedule) 17 18 Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion 19 20 Occupancy 21 Travel, conferences, and meetings Printing and publications 22 STMT 3 12,433 23 Other expenses (att sch) Total operating and administrative expenses. 24 13,191 0 0 Add lines 13 through 23 2,350 2,350 25 Contributions, gifts, grants paid 15,541 0 Total expenses and disbursements. Add lines 24 and 25 0 26 27 Subtract line 26 from line 12 Excess of revenue over expenses and disbursements -1,641 ol Net investment income (if negative, enter -0-) Adjusted net income (if negative, enter -0-)

1 Total net assets or fund balances at beginning of year – Part II, column (a), line 30 (must agree with end-of-year figure reported on pnor year's return)

2 Enter amount from Part I, line 27a

3 Other increases not included in line 2 (itemize) ▶

4 Add lines 1, 2, and 3

5 Decreases not included in line 2 (itemize) ▶

5 Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30

6 83,234

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Part IV Capital Gains a	and Losses for Tax on Investm	nent Incon	ne				ı ağu ı
(a) List and des	scribe the kind(s) of property sold (e.g., real estate, warehouse, or common stock, 200 shs MLC Co.)			(b) How acquired P – Purchase D – Donation	1 ''	e acquired day, yr)	(d) Date sold (mo , day, yr)
1a N/A							
b					<u></u>		
С							
d							
e					L		
(e) Gross sales pnce	(f) Depreciation allowed (or allowable)		(g) Cost or plus exper				or (loss)) minus (g)
a							
_b							
С					ļ		
_d					ļ		
					ļ		
Complete only for assets show	ing gain in column (h) and owned by the	foundation o	n 12/31/6	i9	1	(I) Gains (Col	(h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		(k) Excess over cal	s of col (i) (j), if any			less than -0-) or om col (h))
	<u> </u>					·	
b							
<u>c</u>					<u> </u>		
d		<u> </u>			<u> </u>		
<u>e</u>	<u></u>				<u> </u>		
2 Capital gain net income or (net	is capital loss) If gain, also enter If (loss), enter -0- loss) as defined in sections 1222(5) and	ın Part I, line			2		
	8, column (c) (see instructions) If (loss)	, ,	}		3		
	Under Section 4940(e) for Red	uced Tax	on Net	Investment Inco	ome		
If "Yes," the foundation does not qu	ection 4942 tax on the distributable amou ualify under section 4940(e). Do not com	plete this par	t.				Yes X No
	n each column for each year; see the in	structions bef	ore makii	ng any entries.			
(a) Base period years Calendar year (or tax year beginning			Net value	(c) e of nonchantable-use asse	ets		(d) tribution ratio divided by col. (c))
2014		1,300		· · · · · · · · · · · · · · · · · · ·			
2013		1,100		·			
2012		299					
2011		560					
2010		1,566		14,	775		0.105990
2 Total of line 1, column (d)						2	0.105990
_	ne 5-year base period – divide the total o	-	or by the		1		
number of years the foundation	n has been in existence if less than 5 ye	ars			-	3	0.105990
4 Enter the net value of nonchar	ritable-use assets for 2015 from Part X, I	ine 5				4	82,049
5 Multiply line 4 by line 3					-	5	8,69
6 Enter 1% of net investment inc	come (1% of Part I, line 27b)					6	
7 Add lines 5 and 6						7	8,69
8 Enter qualifying distributions fi						8	2,350
If line 8 is equal to or greater t Part VI instructions	han line 7, check the box in Part VI, line	1b, and com	plete that	part using a 1% tax	rate See	e the	

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	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)				
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1				
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)	}			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	ļ			
	here ▶ ☐ and enter 1% of Part I, line 27b				
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of				
_	Part I, line 12, col (b).				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	<u> </u>			0
3	Add lines 1 and 2				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	ļ			0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	<u> </u>			0
6	Credits/Payments				
a	2015 estimated tax payments and 2014 overpayment credited to 2015 6a				
b	Exempt foreign organizations – tax withheld at source				
С.	Tax paid with application for extension of time to file (Form 8868) 6c				
_d	Backup withholding erroneously withheld 6d				
7	Total credits and payments. Add lines 6a through 6d				
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached				_
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				
11	Enter the amount of line 10 to be. Credited to 2016 estimated tax ▶ Refunded ▶ 11	L			
	art VII-A Statements Regarding Activities				
ıa	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No
L	participate or intervene in any political campaign?		1a	-	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see		'		
	Instructions for the definition)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials				
С	published or distributed by the foundation in connection with the activities. Did the foundation file Form 1120-POL for this year?				
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		1c		X
u	(1) On the foundation ► \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
·	on foundation managers. > \$				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				v
_	If "Yes," attach a detailed description of the activities.	}	2		X
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of				
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		_		х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		3		X
b		N/A	4a	_	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	• ' / 🕰	4b 5		X
	If "Yes," attach the statement required by General Instruction T				<u> </u>
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that				
	conflict with the state law remain in the governing instrument?		6	х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	Ì	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)	ŀ			
	NONE	İ			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General				
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	j	8b	x	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	ŀ	-55		
	4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes,"	ĺ	İ	1	
	complete Part XIV		9		Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	ŀ	-	-+	
	names and addresses		10		Х
			rm 99	0-PF	
				•)

	rt VII-A Statements Regarding Activities (continued)			aye 3
			1,,,,	T
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	
40	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11	+	X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	1,0		x
42		12	x	<u> </u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A	13	1 1	<u> </u>
14	The books are in care of ► CHRISTINE ALLEN Telephone no ► 615-	-495	- 90 5	5 Q
14	5543 EDMONDSON PIKE	493	J U .	
	Located at ▶ NASHVILLE TN ZIP+4 ▶ 372	11		
15	Section 4947(a)(1) nonexempt chantable trusts filing Form 990-PF in lieu of Form 1041 – Check here			> [
13	and enter the amount of tax-exempt interest received or accrued during the year 15			
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority		Yes	No
10	over a bank, secunities, or other financial account in a foreign country?	16	⊣ ''	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			1
	the foreign country			
P	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	,		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No. X	,		
		,		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No	,		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?	,		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)	'		
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? N/2	A 16		
_	Organizations relying on a current notice regarding disaster assistance check here]		
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015? N/2	A 1c		1
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	` <u>"</u>	-	
2	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the second of			1
•	6e, Part XIII) for tax year(s) beginning before 2015?	,		
	If "Yes," list the years ▶ 20 , 20 , 20 , 20			
b				
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			1
	all years listed, answer "No" and attach statement – see instructions) N/2	А 2ь		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	▶ 20 , 20 , 20 , 20			
3a	· · · · · · · · · · · · · · · · · · ·			
	at any time during the year?	,		
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of	1		
	the 10-, 15-, or 20-year first phase holding penod? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2015) N/2	А <u>Зь</u>	\perp	↓
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	, , , , , , , , , , , , , , , , , , ,			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		<u> </u>
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Part VII-B Statements	Regarding Activities for Which Form	4720 May Be R	Required (conti	nued)		
5a During the year did the founda	ition pay or incur any amount to					
(1) Carry on propaganda, or o	therwise attempt to influence legislation (section	4945(e))?	Y	es X No		
(2) Influence the outcome of a	any specific public election (see section 4955); o	r to carry on,		_		i
directly or indirectly, any v	oter registration drive?			es X No		
(3) Provide a grant to an indiv	ridual for travel, study, or other similar purposes?	•	☐ Y	es X No		
(4) Provide a grant to an orga	inization other than a charitable, etc., organizatio	n described in		''		
section 4945(d)(4)(A)? (se	ee instructions)		Y	es X No		
(5) Provide for any purpose o	ther than religious, charitable, scientific, literary,	or educational				
purposes, or for the preve	ntion of cruelty to children or animals?		☐ Y	es 🗓 No		
)–(5), did any of the transactions fail to qualify un	der the exceptions d				
	or in a current notice regarding disaster assistance			N/A	5b	1
=	rent notice regarding disaster assistance check I	•		▶ □		
	tion 5a(4), does the foundation claim exemption f					
	liture responsibility for the grant?	Tom the tax	N/A 🗌 Y	es No		
	required by Regulations section 53 4945–5(d).			es		
	year, receive any funds, directly or indirectly, to	nav nremiume				
on a personal benefit contract	· · · · · · · · · · · · · · · · · · ·	pay premiants		es X No		
•	· · · year, pay premiums, directly or indirectly, on a p	preonal honofit conti		es 🔽 NO	65	x
If "Yes" to 6b, file Form 8870.	year, pay premiums, directly or munectly, on a p	ersonal benefit conti	racts		6b	- ^-
·	ir, was the foundation a party to a prohibited tax s	haltar transaction		es X No		
			~			
	ceive any proceeds or have any net income attrib			N/A	7b	
and Contract	About Officers, Directors, Trustees, F	oundation Man	agers, Hignly	Paid Employe	ees,	
	ors stees, foundation managers and their comper	antina (non inches	4:	·		
List all officers, directors, trus	stees, roundation managers and their comper	isation (see instruc	itions).			_
		(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit	(a) Eyner	ise account,
(·	a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	plans and deferred		llowances
		 		compensation	 	
CHRISTINE ALLEN	NASHVILLE	PRESIDENT				
5543 EDMONDSON PIKE, #22	TN 37211	2.00	0	0		0
PAUL ALLEN	NASHVILLE	1	_1			
5543 EDMONDSON PIKE #22	TN 37211	2.00	0	0		0
			 		 	
			1			
			<u> </u>		<u> </u>	
	est-paid employees (other than those included	on line 1 – see ins	tructions). If none	, enter		
"NONE."		1				
		(b) Title, and average		(d) Contributions to	4.1 E	
(a) Name and address of ea	ach employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred		ise account, Nowances
		devoted to position		compensation	<u> </u>	
NONE						
					l.	
						
		1				
				·	 	
		Ì				
			 		 	
		ţ				
Total number of other employees p	aud over \$50,000	_1			L	0
	5.5 5.5. W00,000				▶	U

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Part VIII	Information About Officers, Directors, Trustees, Fou	ndation Managers, Highly Paid E	mployees,
	and Contractors (continued)		
3 Five highe	st-paid independent contractors for professional services (see ins		
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			·
Tatal number of	others recovered over \$50,000 for professional convices		
	others receiving over \$50,000 for professional services		<u> </u>
Part IX-A	Summary of Direct Charitable Activities		
	s four largest direct chantable activities during the tax year. Include relevant statistical information of the properties of the conferences convened, research papers produced, etc.	lion such as the number of	Expenses
1 SEE S	TATEMENT 5		
			2,350
2			
3			
3			
4			
Part IX-B	Summary of Program-Related Investments (see ins	atructions)	
	argest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A			Anoun
2			
All other program r	related investments. See instructions		
3	Outdoor in Transcription Good in Allegations		
-			
Total. Add lines	1 through 3	>	

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3a

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4

3

Amounts set aside for specific charitable projects that satisfy the:

Adjusted qualifying distributions. Subtract line 5 from line 4

qualifies for the section 4940(e) reduction of tax in those years.

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income

Suitability test (pnor IRS approval required)

Enter 1% of Part I, line 27b (see instructions)

Cash distribution test (attach the required schedule)

<u>Pa</u>	rt XIII Undistributed Incom	e (see instructions	<u> </u>			
1	Distributable amount for 2015 from Par	t XI,	(a) Corpus	(b) Years pnor to 2014	(c) 2014	(d) 2015
	line 7					4,102
	Undistributed income, if any, as of the	end of 2015				
а	Enter amount for 2014 only					
b	Total for prior years: 20 , 20	, 20				
3	Excess distributions carryover, if any, to	2015:				
а	From 2010		1			
b	From 2011					
С	From 2012]			
d	From 2013		1			
е	From 2014					
f	Total of lines 3a through e					
4	Qualifying distributions for 2015 from P	art XII,				
	line 4 ▶ \$ 2,350					
а	Applied to 2014, but not more than line	2a			1	
b	Applied to undistributed income of prior	r years				
	(Election required – see instructions)					
C	Treated as distributions out of corpus (Election				
	required - see instructions)					
d	Applied to 2015 distributable amount					2,350
е	Remaining amount distributed out of co	orpus				
5	Excess distributions carryover applied	to 2015				
	(If an amount appears in column (d), th	e same				······································
	amount must be shown in column (a))					
6	Enter the net total of each column as	3				
	indicated below:					
а	Corpus. Add lines 3f, 4c, and 4e. Subtr	act line 5			i	
b	Prior years' undistributed income. Subt	ract				
	line 4b from line 2b					
С	Enter the amount of prior years' undistr	ributed	,			
	income for which a notice of deficiency	has				
	been issued, or on which the section 4	942(a)				
	tax has been previously assessed					
d	Subtract line 6c from line 6b. Taxable					
	amount – see instructions					
е	Undistributed income for 2014. Subtract	ct line				
	4a from line 2a Taxable amount - see					
	instructions					
f	Undistributed income for 2015 Subtract	ct lines				-
	4d and 5 from line 1. This amount mus	t be				
	distributed in 2016					1,752
7	Amounts treated as distributions out of	corpus				
	to satisfy requirements imposed by sec	ction				
	170(b)(1)(F) or 4942(g)(3) (Election ma	ny be				
	required—see instructions)					
8	Excess distributions carryover from 20	10 not				<u></u>
	applied on line 5 or line 7 (see instruction	· · · · · ·				
9	Excess distributions carryover to 20	16.				
	Subtract lines 7 and 8 from line 6a					
10	Analysis of line 9					
а	Excess from 2011]		1	
b	Excess from 2012					
С	Excess from 2013				1	
d	Excess from 2014				1	
е	Excess from 2015					

	4 VIV Private Operating For	indations (see in	otructions and De	+ \//I \ = 00022	 	rage it
	rt XIV Private Operating Fou)	
1a	If the foundation has received a ruling or			ating .		
	foundation, and the ruling is effective for			,		
b	Check box to indicate whether the found		ting foundation descr		142(j)(3) or 4942	2(j)(5)
2a	Enter the lesser of the adjusted net	Tax year	<u>.</u>	Prior 3 years		(e) Total
	income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(c) rotar
	investment return from Part X for					
	each year listed					
b	85% of line 2a					
С	Qualifying distributions from Part XII,					
	line 4 for each year listed					
d	Amounts included in line 2c not used directly					······································
-	for active conduct of exempt activities					
е	Qualifying distributions made directly					
e	for active conduct of exempt activities.			Ì		
	Subtract line 2d from line 2c					
_	•		 	 		
3	Complete 3a, b, or c for the					
	alternative test relied upon:		\			
а	"Assets" alternative test – enter.					
	(1) Value of all assets			 		
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)			<u> </u>		
b	"Endowment" alternative test – enter 2/3					
	of minimum investment return shown in					
	Part X, line 6 for each year listed			1		
С	"Support" alternative test – enter:		-			
	(1) Total support other than gross					1
	investment income (interest,					
	dividends, rents, payments on					
	securities loans (section					
	512(a)(5)), or royalties)		 	 	<u> </u>	
	(2) Support from general public					
	and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(iii)			 		
	(3) Largest amount of support from					
	an exempt organization		-	 		
	(4) Gross investment income		a Abia mada anta i	[1.05.000	
۲	art XV Supplementary Infor			rtne roundation n	ad \$5,000 or more	e in assets at
_	any time during the		tions.)			
1	Information Regarding Foundation M					
а	List any managers of the foundation wh				•	
	before the close of any tax year (but onl	y if they have contribu	ted more than \$5,000). (See section 507(d)(2).)	
	N/A			 		
þ	List any managers of the foundation wh		· · · · · · · · · · · · · · · · · · ·		e portion of the	
	ownership of a partnership or other enti-	ty) of which the founda	ition has a 10% or gre	ater interest.		
	N/A					
2	Information Regarding Contribution,					
	Check here $\blacktriangleright \ f X $ if the foundation on	ly makes contributions	to preselected chanta	able organizations and o	loes not accept	
	unsolicited requests for funds. If the fou	indation makes gifts, g	rants, etc (see instru	ctions) to individuals or	organizations under	
	other conditions, complete items 2a, b,	c, and d.				
a	The name, address, and telephone num	nber or e-mail address	of the person to whor	n applications should be	addressed:	
-	N/A			EL CONTROLOGICA DE	: 	
	•					
b		e submitted and inform	mation and materials t	hey should include:		
	N/A					
С						
	N/A					
d	•	s, sucn as by geograph	nicai areas, charitable	rields, kinds of institution	ns, or other	
	factors					
	N/A					

Part XV Supplementary Information (co				
3 Grants and Contributions Paid During the	e Year or Approved for F	uture Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year GOODWILL INDUSTRIES HERMAN STREET				
NASHVILLE TN 37209	TO BENEFIT MUS	C PROGRAMS O	F THE ORG	800
MAKE A WISH FOUNDATION 8119 ISABELLA LANE BRENTWOOD TN 37027	TO BENEFIT MUS	IC PROGRAMS O	THE ORG	200
MOTHERS AGAINST DRUNK DRIV 511 E. JOHN CARPENTER FWY IRVING TX 75062		CTIMS OF DRUN	K DRIVING	100
NASHVILLE RESCUE MISSION 639 LAFAYETTE STREET NASHVILLE TN 37203		HELP FOR THE	HOMELESS	700
SALVATION ARMY 631 DICKERSON PIKE NASHVILLE TN 37207	TO BENEFIT MUS	IC PROGRAMS O	F THE ORG	500
WOUNDED WARRIOR PROJECT DR 4899 BELFORT RD SUITE 300 JACKSONVILLE FL 32256	IVE			500
Total			▶ 3a	2,350
b Approved for future payment N/A				
Total			▶ 3b	

Part XVI-A	Analysis of Income-Producing Ac	GAIGES				
Inter gross amo	ounts unless otherwise indicated.	Unrelated (a) Business code	(b) Amount	(c) Exclusion code	d by section 512, 513, or 514 (d) Amount	(e) Related or exempt function income
1 Program se	rvice revenue:			cone		(See instructions)
a		-				
		-				
c		-		ļ		
d		-		ļ		
e		-		 		
f		-		<u> </u>		
g Feesa	nd contracts from government agencies			ļ		
	p dues and assessments	<u> </u>	_ -	ļ		·····
	savings and temporary cash investments			-		
	and interest from securities			ļ		
	ncome or (loss) from real estate:			 		
	nanced property			 		
	ot-financed property			ļ		
	ncome or (loss) from personal property			 -		
	tment income	 		 		· · · · · ·
•	ss) from sales of assets other than inventory	- -		 		
	or (loss) from special events			+		
•	t or (loss) from sales of inventory			├ ──		
11 Other reve				-	<u> </u>	
		-		 		
		-		+		
		-				
e					L	
42 Subtotal A	dd columns (h) (d) and (a)			1		0
	dd columns (b), (d), and (e)				0	
13 Total. Add	line 12, columns (b), (d), and (e)		(13	0
13 Total. Add (See workshee	line 12, columns (b), (d), and (e) t in line 13 instructions to verify calculations.)	Accomplishm			13 _	
13 Total. Add (See workshee Part XVI-E Line No.	line 12, columns (b), (d), and (e) t in line 13 instructions to verify calculations.) Relationship of Activities to the A Explain below how each activity for which incom	ne is reported in c	ent of Exempt P	urpose	13	0
13 Total. Add (See workshee Part XVI-E	line 12, columns (b), (d), and (e) t in line 13 instructions to verify calculations.) Relationship of Activities to the A	ne is reported in c	ent of Exempt P	urpose	13	0
13 Total. Add (See workshee Part XVI-E Line No.	line 12, columns (b), (d), and (e) t in line 13 instructions to verify calculations.) Relationship of Activities to the A Explain below how each activity for which incom	ne is reported in c	ent of Exempt P	urpose	13	0
13 Total. Add (See workshee Part XVI-E Line No.	line 12, columns (b), (d), and (e) t in line 13 instructions to verify calculations.) Relationship of Activities to the A Explain below how each activity for which incom	ne is reported in c	ent of Exempt P	urpose	13	0
13 Total. Add (See workshee Part XVI-E Line No.	line 12, columns (b), (d), and (e) t in line 13 instructions to verify calculations.) Relationship of Activities to the A Explain below how each activity for which incom	ne is reported in c	ent of Exempt P	urpose	13	0
13 Total. Add (See workshee Part XVI-E Line No.	line 12, columns (b), (d), and (e) t in line 13 instructions to verify calculations.) Relationship of Activities to the A Explain below how each activity for which incom	ne is reported in c poses (other than	ent of Exempt P	urpose	13	0
13 Total. Add (See workshee Part XVI-E Line No.	line 12, columns (b), (d), and (e) t in line 13 instructions to verify calculations.) Relationship of Activities to the A Explain below how each activity for which incom	ne is reported in c	ent of Exempt P	urpose	13	0
13 Total. Add (See workshee Part XVI-E Line No.	line 12, columns (b), (d), and (e) t in line 13 instructions to verify calculations.) Relationship of Activities to the A Explain below how each activity for which incom	ne is reported in c poses (other than	ent of Exempt P	urpose	13	0
13 Total. Add (See workshee Part XVI-E Line No.	line 12, columns (b), (d), and (e) t in line 13 instructions to verify calculations.) Relationship of Activities to the A Explain below how each activity for which incom	ne is reported in c poses (other than	ent of Exempt P	urpose	13	0
13 Total. Add (See workshee Part XVI-E Line No.	line 12, columns (b), (d), and (e) t in line 13 instructions to verify calculations.) Relationship of Activities to the A Explain below how each activity for which incom	ne is reported in c poses (other than	ent of Exempt P	urpose	13	0
13 Total. Add (See workshee Part XVI-E Line No.	line 12, columns (b), (d), and (e) t in line 13 instructions to verify calculations.) Relationship of Activities to the A Explain below how each activity for which incom	ne is reported in c poses (other than	ent of Exempt P	urpose	13	0
13 Total. Add (See workshee Part XVI-E Line No.	line 12, columns (b), (d), and (e) t in line 13 instructions to verify calculations.) Relationship of Activities to the A Explain below how each activity for which incom	ne is reported in c poses (other than	ent of Exempt P	urpose	13	0
13 Total. Add (See workshee Part XVI-E Line No.	line 12, columns (b), (d), and (e) t in line 13 instructions to verify calculations.) Relationship of Activities to the A Explain below how each activity for which incom	ne is reported in c poses (other than	ent of Exempt P	urpose	13	0
13 Total. Add (See workshee Part XVI-E Line No.	line 12, columns (b), (d), and (e) t in line 13 instructions to verify calculations.) Relationship of Activities to the A Explain below how each activity for which incom	ne is reported in c poses (other than	ent of Exempt P	urpose	13	0
13 Total. Add (See workshee Part XVI-E Line No.	line 12, columns (b), (d), and (e) t in line 13 instructions to verify calculations.) Relationship of Activities to the A Explain below how each activity for which incom	ne is reported in c poses (other than	ent of Exempt P	urpose	13	0
13 Total. Add (See workshee Part XVI-E Line No.	line 12, columns (b), (d), and (e) t in line 13 instructions to verify calculations.) Relationship of Activities to the A Explain below how each activity for which incom	ne is reported in c poses (other than	ent of Exempt P	urpose	13	0
13 Total. Add (See workshee Part XVI-E Line No.	line 12, columns (b), (d), and (e) t in line 13 instructions to verify calculations.) Relationship of Activities to the A Explain below how each activity for which incom	ne is reported in c poses (other than	ent of Exempt P	urpose	13	0
13 Total. Add (See workshee Part XVI-E Line No.	line 12, columns (b), (d), and (e) t in line 13 instructions to verify calculations.) Relationship of Activities to the A Explain below how each activity for which incom	ne is reported in c poses (other than	ent of Exempt P	urpose	13	0
13 Total. Add (See workshee Part XVI-E Line No.	line 12, columns (b), (d), and (e) t in line 13 instructions to verify calculations.) Relationship of Activities to the A Explain below how each activity for which incom	ne is reported in c poses (other than	ent of Exempt P	urpose	13	0
13 Total. Add (See workshee Part XVI-E Line No.	line 12, columns (b), (d), and (e) t in line 13 instructions to verify calculations.) Relationship of Activities to the A Explain below how each activity for which incom	ne is reported in c poses (other than	ent of Exempt P	urpose	13	0
13 Total. Add (See workshee Part XVI-E Line No.	line 12, columns (b), (d), and (e) t in line 13 instructions to verify calculations.) Relationship of Activities to the A Explain below how each activity for which incom	ne is reported in c poses (other than	ent of Exempt P	urpose	13	0
13 Total. Add (See workshee Part XVI-E Line No.	line 12, columns (b), (d), and (e) t in line 13 instructions to verify calculations.) Relationship of Activities to the A Explain below how each activity for which incom	ne is reported in c poses (other than	ent of Exempt P	urpose	13	0
13 Total. Add (See workshee Part XVI-E Line No.	line 12, columns (b), (d), and (e) t in line 13 instructions to verify calculations.) Relationship of Activities to the A Explain below how each activity for which incom	ne is reported in c poses (other than	ent of Exempt P	urpose	13	0
13 Total. Add (See workshee Part XVI-E Line No.	line 12, columns (b), (d), and (e) t in line 13 instructions to verify calculations.) Relationship of Activities to the A Explain below how each activity for which incom	ne is reported in c poses (other than	ent of Exempt P	urpose	13	0

, are		Exempt Organ <u>iza</u>	_			iis and itelationsin	iha Miri	i Noncha	ırıtabi ç		
1 D				e in any of the follo	owing with any o	ther organization describ	ped			Yes	No
						ction 527, relating to poli					
	ganızatıon										
a T	ransfers fro	m the reporting found	ation to a noi	ncharitable exemp	ot organization o	f:					
(1) Cash								1 <u>a(1)</u>		X
(2	2) Other as	sets							1a(2)		X
b 0	ther transa	ctions:									
(1) Sales of	assets to a noncharita	able exempt	organization					1b(1)		X
(2	2) Purchas	es of assets from a no	ncharitable e	exempt organization	on				1b(2)		X
(3	3) Rental o	f facilities, equipment,	or other ass	ets					1b(3)		X
(4	l) Reimbui	rsement arrangements	}						1b(4)		X
•	•	r loan guarantees							1b(5)		_X_
•	•	ance of services or me	•	•					1b(6)		X
	•	acilities, equipment, ma	•	•					1c		X
						nn (b) should always sho					
						the foundation received I					
	alue in any Line no	(b) Amount involved				the goods, other assets,			i		
1/A	LITTE NO	(b) Amount involved	(c) Name	of noncharitable exemp	ot organization	(d) Description of tr	ransfers, Iran	sactions, and sh	haring arrangeme	nts	
.1/ A		*****									
				-							
	**			· · · · · · · · · · · · · · · · · · ·					·		
									···		
_											
									.,		
							_				
											
		<u> </u>									
					<u>.</u>						
2a l	s the found	ation directly or indirec	tly affiliated	with or related to	one or more to	-exempt organizations					
		section 501(c) of the				. •				es X	l No
		nplete the following sc			5)(0))	11 027 :			L_ ''	33 21	} 140
		a) Name of organization		(b) Type of o	rganization		(c) Description	n of relationship	D		
N,	/A		_		·		-,′		,		
		<u>-</u>									
									-		
	- 										
	Under pe correct, a	nalties of perjury, I declare th nd complete Declaration of p	at I have examı preparer (other t	ned this return, including than taxpaver) is based.	g accompanying sch on all information of	edules and statements, and to the which preparer has any knowled	he best of my	/ knowledge ar	nd belief, it is true).	
	}		, , , , , , , , , , , , , , , , , , , ,	, , , , ,		The property in the strip in th			IRS discuss this r		
Sign	1	a.	<u> </u>	1 .					preparer shown b tructions)?	elow _ Yes	No
Here		Chi ha	N G	1000-	_ , ,	1/12/1/		<u> </u>			1
	1 🕽 ڃ	ature of officer or trustee	70 00	mis -		//	PRESI	DENT			
	- 			. 	Date	Titl	le				
	Pnnt/T	pe preparer's name			Preparer's signatu	<i>/</i> 1			Date	Check	
Paid	и. с	OLLEEN ADAMS,	CPA		1 M	oller Ho	1		6/6/16	self-em	ployed
Prepai	rer			P CPA GRO	UP, PLLC	occes / 61	(apro		T	7100	
Use O	nly		WARD CI		OE, PILL	·-		PTIN	P00037		
	Firm's		TWOOD,		7-2304			Firm's EIN >	615-37		
		. النباد	_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	111 3/02	, 2304			Phone no		3-3	_

Form 990-PF Return Summary

For calendar year 2015, or tax year beginning

, and ending

20-6301478

THE GIFT OF MUSIC FOUNDATION

investment	income					
Interest						
Dividend	ls					
Gross re	ints					
Capital o	gain net income					
Other in	come					
Tota	al investment incom	e	-			
Expenses						
Officer of	compensation					
Salaries	/ employee benefits				•	
Other ex	rpenses					
Tota	al expenses					
	Net investment inco	me		-		
Taxes / Cre	dits					
Regular	tax					
Section						
Subtitle	A tax					
	al tax					
	Penalties / Applicat	ion		_		
-	ed tax payments					
Tax with						
	ayments					
	ed tax penalty					
	yment applied to next	vear's tax				
	ments / penalty / ap					
	Net tax due			-		
Interest on I	ate payments					
Failure to file			-			
Failure to pa						
	ns to tax					
	•					
Bal	ance due					
	iund					
Reve	nue / Expenses per	Books Adiu	sted Net Inco	me		
Total contributions	13,90					
Interest		<u> </u>			Nov	t Year's Estimates
Dividends			 -		1st quarter	real 3 Estimates
Capital gains / losses				·	2nd quarter	
Income modifications					3rd quarter	
Sale of inventory						
Other income				-	4th quarter	
Total revenue	13,90	<u> </u>		_	Total	
	15,54			_		
Total expenses	-1,6			_		
Excess / ANI		<u> </u>		=		ous Information
			_		Amended return	00/15/15
_		Balance Shee	et		Return / extended due	date <u>08/15/16</u>
	ginning	Ending	224	Differences		
Assets	84,875	83	<u>,234</u>			
Liabilities				_		
Net assets	84,875	83	,234	-1,6	541	
					-	

Adjusted Net Adjusted Adjusted Statement 2 - Form 990-PF, Part I, Line 16b - Accounting Fees Statement 3 - Form 990-PF, Part I, Line 23 - Other Expenses Statement 1 - Form 990-PF, Part I, Line 16a - Legal Fees Investment Investment Investment Federal Statements Set Net 1,002 1,586 372 558 1,346 501 390 6,696 558 200 200 540 12,433 Total Total Total GIFTMUS The Gift of Music Foundation INSTRUMENTS AND RECORDING EQU INSTRUMENTS/SHEET MUSIC INDIRECT ACCOUNTING FEES Description Description Description INSURANCE ANSWERING SERVICE INDIRECT LEGAL FEES FYE: 12/31/2015 TELEPHONE 20-6301478 TOTAL TOTAL OFFICE MEALS EXPENSES BOOKS

Charitable

Purpose

Charitable

Purpose

Charitable

Purpose

20-6301478 FYE: 12/31/2015

Federal Statements

	_
, and Equipment	
4 - Land, Building,	-
tatement 4 - Form 990-PF, Part II, Line 1	
State	

Net FMV	7,470 26,898 47,911	82,279
End Accumulated Depreciation	w.	\$\tag{\text{0}}
End Cost / Basis	7,470 26,898 47,911	82,279
·	7,470 \$ 26,898 47,911	ν ₊ "
Description	MUSICAL INSTRUMENTS FINE ART INCLUDING COPYRIGHT SOUND RECORDING EQUIPMENT	TOTAL

GIFTMUS The Gift of Music Foundation

20-6301478

Federal Statements

FYE: 12/31/2015

Statement 5 - Form 990-PF, Part IX-A, Line 1 - Summary of Direct Charitable Activities

Description

THE FOUNDATION SUPPORTED NASHVILLE RESCUE MISSION, GOODWILL, THE MAKE A WISH FOUNDATION, THE SALVATION ARMY, MOTHERS AGAINST DRUNK DRIVERS, AND WOUNDED WARRIOR PROJECT BY PROVIDING FUNDS FOR THEIR CHARITABLE USE.

GIFTMUS . . .

Schedule B (Form 990, 990-EZ, or 990-PF)

Schedule of Contributors

OMB No 1545-0047

2015

Department of the Treasury Internal Revenue Service

Name of the organization

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

rs.gov/form990 Employer identification number

THE GIFT OF MU	JSIC_FOUNDATION	20-6301478		
Organization type (check one):				
	O and the man			
Filers of:	Section:			
Form 990 or 990-EZ	501(c)() (enter number) organization			
	4947(a)(1) nonexempt chantable trust not treated as a private foundation			
	527 political organization			
Form 990-PF	X 501(c)(3) exempt private foundation			
	4947(a)(1) nonexempt chantable trust treated as a private foundation			
	501(c)(3) taxable private foundation			
	covered by the General Rule or a Special Rule.), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	e See		
General Rule				
	ing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5 property) from any one contributor. Complete Parts I and II. See instructions for determinant tributions.			
Special Rules				
regulations under sec 13, 16a, or 16b, and t	escnbed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ /3 % support test tions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Pa hat received from any one contributor, during the year, total contributions of the greater of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts	rt II, line of (1)		
For an organization described in section 501(c)(7), (8), or (10) filling Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.				
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year.				
990-EZ, or 990-PF), but it mu	t is not covered by the General Rule and/or the Special Rules does not file Schedule B (last answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form occurring that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or	990-EZ or on its		

Name of organization

THE GIFT OF MUSIC FOUNDATION

Employer identification number 20-6301478

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed.				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
1	CHRISTINE ALLEN AND PAUL ALLEN 5543 EDMONDSON PK #22 NASHVILLE TN 37211	\$ 13,900	Person X Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person] Payroll] Noncash] (Complete Part II for noncash contributions.)		