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	C	HANGE OF	507								
	-	_ 990	1-				on Exempt				OMB No 1545-0047
	Fo		ľ	Under section 501(c	• •			•		-	(2017)
		artment of the Treas mal Revenue Service					imbers on this form for instructions ar			•	Open to Public Inspection
	A	For the 2017	calendar y	ear, or tax year begi							
	В	Check if applicable	C Name of c	organization						D Employe	r Identification number
		Address change	<u> </u>		l						
		Name change	Doing bus	iness as nd street (or PO box if mail)	s and dolumend to ob-	not adder	vo)	· · · · · · · · · · · · · · · · · · ·	Room/suite	87-0	669814
	$\sqcap$	Initial return		ox 680896	S HOL GENVELED TO SIL	eer accure	83)		ROOTIVSUILE		901-7664
	Ħ	Final return/	City or tow	n, state or province, country,	and ZIP or foreign p	ostal cod	e				
,	H	terminated		City	UT 8	4068	-0896			G Gross rec	eipts\$ 671,213
٠,	片		i e	address of principal officer					H(a) is this a g	mun mhim for	subordinates Yes X No
۶//	<i>,</i> Ц	Application pending		n Richards					1		7. 7.
7	5			30x 680896			4060 0006		H(b) Are all su		
	_			City			4068-0896		- " " " " "	auaun a nsc	(see instructions)
	÷	Tax-exempt status		1(c)(3) 501(c) ( untaintownm	) (insert no		4947(a)(1) or	527	<del> </del>		
	<u></u>	Website: William  Form of organization	-		ociation Other			IL Y	H(c) Group exe ear of formation.	anpaon numb	M State of legal domicile
			ımmarv	Tabori Titasi Ass	OCASON   OSA				ear or romenous.		an orace of legal conficie
	<u> </u>	1		organization's mission	n or most signifi	icant a	ctivities		<del> </del>		<del></del>
	8			own Music exi				and su	pport li	ve mus	ic which
	Governance	enha	nces to	o the cultura	l experie	nce	for Park C	ity and	Summit	County	
	Veri	resi	dents	and visitors.							
	Ĝ	2 Check th	ns box	f the organization d	scontinued its o	peratio	ons or disposed of	f more than	25% of its net	assets	
	ತ	3 Number	of voting m	embers of the govern	ing body (Part \	/I, line	1a)			-3	10
i	Activities	4 Number	of independ	dent voting members of	of the governing	body	(Part VI, line 1b)			4	10
נ	₹	5 Total nun	mber of ind	ıvıduals employed ın o	alendar year 20	)17 (Pa	art V, line 2a)			5	3
2	AG			unteers (estimate if no		~				6	15
3				ness revenue from Pa						7a	0
<u> </u>		<b>b</b> Net unrel	lated busing	ess taxable income fro	om Form 990-T,	, line 3	<u> 4][(S - OSO - 1</u>	<del>13</del>	Prior Yea	7b	Current Year
<u>[</u>		8 Contributi	ions and d	rants (Part VIII, line 11	n)		1444 0 0 00	,, F		0,058	201,646
	Revenue	8 Contributions and grants (Part VIII, line 1h) 9 Program service revenue (Part VIII, line 2g)								691	464,708
<del>-</del>	Ş.	10 Investme		0							
누	æ			VIII, column (A), lines		•	iđ/t∄e)⊊Ni LITΔ	.н Г	1	1,281	466
	>			l lines 8 through 11 (n						030	666,820
T.	-	13 Grants ar	nd similar a	mounts paid (Part IX,	column (A), line	es 1–3	)	L			0
Sir	>	14 Benefits	paid to or f	or members (Part IX,	column (A), line	4)		<u> </u> _			0
v	√ တွ	1		pensation, employee t	•		nn (A), lines 5–10	)	105	,441	82,217
と	SIS.			sing fees (Part IX, col		1e)		_			0
CO				penses (Part IX, colum			40,58	9			
N			•	irt IX, column (A), line	•	•	がして	-		7,072	556,688
()				lines 13-17 (must ed	•	lumn (A	A), line 25)	1 1700		,513	638,905
2	• • ×		iess exper	ises. Subtract line 18	nom ine 12		AUG 10 2	<del>23431+</del>	Beginning of Cur	7517 Tent Year	27,915 End of Year
SE	85	20 Total ass	ets (Part X	, line 16)			H00 -	- · ·		,206	369,073
<del>'</del>	ABass	21 Total liabi	-	•			ECEIVED E.	ין כי זיוד		,437	120,389
0	<b>E</b> E	22 Net asset	ts or fund t	palances Subtract line	21 from line 20	ير٥	トレニハにハー	·	220	769	248,684
$\vdash$	Р	art II Sig	gnature	Block		· · · · · ·	1-				
20											my knowledge and belief, it
2020	tr	ie, correct, and c	complete. De	claration of preparer (oth	ner than officer) is	based	on all information o	f which prepared	arer has any kn	owledge	
		_	\ <u>/</u> -								
	Sig	·	ignature of office					5	Di	Date	-
	He	, , , ,	Brian ype or print nar	Richards	<del> </del>		<del>-</del>	EXECUT	ive Di	recto	<u>r                                     </u>
_			preparer's na		Preparer'	's s			Date	Chart	if PTIN
$\Omega_{-}$	Paid	. 1							i	Check 19 self-emp	U"[
$\mathcal{C}$		parer Firm's nam		SHAW & CO.						m's EIN	46-0952065
7		Only		1564 SOUTH	<del></del>	ST.	SUITE 20	1	——————————————————————————————————————	v EIII	
71		Firm's add	dress	BOUNTIFUL,			7400	<del>-</del>	PI	hone no	801-294-3155
く	May			n with the preparer st							X Yes No
<u>بر</u>	For			Notice, see the separat	<u>`</u>		· · · · · · · · · · · · · · · · · · ·		··· ·		Form <b>990</b> (2017)
)	DAA									_	10
									1.	27	//

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Part III SI		Music 87-0	0669814	Page 2
C	heck if Schedule O conta	ervice Accomplishments ans a response or note to any line in the	nis Part III	
Mountair enhances		ists to produce, foster al experience for Park		
рпог Form 9	anization undertake any significa 190 or 990-EZ? scribe these new services on S	ant program services during the year which were chedule O	e not listed on the	Yes X No
services?	anization cease conducting, or of scribe these changes on Sched	make significant changes in how it conducts, an	y program	Yes X No
Describe the expenses S	e organization's program service section 501(c)(3) and 501(c)(4)	e accomplishments for each of its three largest organizations are required to report the amount reach program service reported.		
vinter of Snowbasi Sponsor Out its	ive outdoor con months. In add in where the Or their Blues Br	553,746 including grants of\$ certs in the summer and ition, the Organization ganization rents its Ele ews BBQ Series. This ha work as well as getting .	formed a new parectro Voice PA systems as allowed the Organization	tnership wi stem and ganization
(Code	) (Expenses \$	including grants of\$	) (Revenue \$	)
	) (Expenses \$ ) (Expenses \$	including grants of\$	) (Revenue \$	)
(Code				)
(Code	) (Expenses \$ m services (Describe in Sched	including grants of\$		)

Form 990 (2017)

## Part IV Checklist of Required Schedules

	art iv Checklist of nequired schedules			
4	In the expension decombed in eacher E04/a)/(2) or 4047/a)/(4) (ather these a provide foundation) 2 if 67/a 7		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	x	ì
2	Is the organization required to complete Schedule B, Schedule of Contributors (see Instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3	1	X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	{		ł
	Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If	ĺ		1
	"Yes," complete Schedule D, Part I	6_		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	ł		
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7_		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	,	ļ ,	
_	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or			**
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9_		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	40		₩
44	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable  Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
a	complete Schedule D, Part VI	11a	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		<u> </u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		<u> </u>
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
4.5	"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		<u>X</u>
_	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
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	445		X
15	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		
13	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	j	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			-
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	<u> </u>		
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	j	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
•	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?		一	
	If "Yes," complete Schedule G, Part III	19		X

Checklist of Required Schedules (continued)

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government 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 or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u> </u>
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	i i		
	\$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 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
þ	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), 501(c)(4), and 501(c)(29) 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	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? 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,		- 1	
	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)		İ	
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		J	
	Schedule L, Part IV	28b		<u> </u>
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	i		
	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	i	ſ	
	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		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		l	
	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		<u> </u>
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		X
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	1	- (	
	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-chantable	- 1		
	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	Í	1	
	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	J		
	197 Note. All Form 990 filers are required to complete Schedule O.	38		X
			aan	

Form	n 990 (2017) Mountain Town Music		<u>)669814</u>			P	age 5
L Pa	art V Statements Regarding Other IRS Filings						
	Check if Schedule O contains a response o	r note to any line in ti	nis Part V			T	ᄔ
			1.1			Yes	No
_	Enter the number reported in Box 3 of Form 1096 Enter -0- if no		1a	66	-	1	
b	Enter the number of Forms W-2G included in line 1a Enter -0- i		[1b]		-	f i	·
С	Did the organization comply with backup withholding rules for re	portable payments to veno	dors and				
	reportable gaming (gambling) winnings to prize winners?				1c		X
2a	Enter the number of employees reported on Form W-3, Transmi	<del>-</del>		•			
	Statements, filed for the calendar year ending with or within the	· -		3	<del> </del>	-	
þ	If at least one is reported on line 2a, did the organization file all	• • •		37	2b	X	ļ
_	Note. If the sum of lines 1a and 2a is greater than 250, you may	•	-		- <u>-</u> -		-
_					3a	-	X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b,				3b	-	
4a	g,,		_				
	over, a financial account in a foreign country (such as a bank ac	count, securities account,	or other finan	icial	1.		٠
	account)?				4a		X
Ь	If "Yes," enter the name of the foreign country:						
	See instructions for filing requirements for FinCEN Form 114, Re	eport of Foreign Bank and	Financial Act	counts			
	(FBAR)	an at any tima dyman tha t			-		X
	Was the organization a party to a prohibited tax shelter transaction.		-	nn?	5a 5b		X
Ь	Did any taxable party notify the organization that it was or is a p if "Yes" to line 5a or 5b, did the organization file Form 8886-T?	arry to a promisited tax site	alei uarisacio	JIIF	5c		<del>-</del>
с 6а	Does the organization have annual gross receipts that are normal	ally greater than \$100 000	and did the		36	Н	
ou	organization solicit any contributions that were not tax deductible				6a		x
b	If "Yes," did the organization include with every solicitation an ex			or	<u> </u>		
_	gifts were not tax deductible?	proce otatomoni ulai essi.		•	6b		
7	Organizations that may receive deductible contributions un	der section 170(c).					
a	Did the organization receive a payment in excess of \$75 made p		partly for god	ods		1 1	
	and services provided to the payor?	,	. , ,		7a		
b	If "Yes," did the organization notify the donor of the value of the	goods or services provided	d?		7b		
С	Did the organization sell, exchange, or otherwise dispose of tang	•					
	required to file Form 8282?				7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year		7d				لــــا
е	Did the organization receive any funds, directly or indirectly, to p	ay premiums on a persona	al benefit con	tract?	7e		
f	Did the organization, during the year, pay premiums, directly or	indirectly, on a personal be	enefit contract	2	7f		
g	If the organization received a contribution of qualified intellectual	property, did the organiza	ition file Form	8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplane				7h		
8	Sponsoring organizations maintaining donor advised funds	. Did a donor advised fund	d maintained t	by the			لــــا
	sponsonng organization have excess business holdings at any ti	me dunng the year?			8		
9	Sponsoring organizations maintaining donor advised funds						
a	Did the sponsoring organization make any taxable distributions to		_		9a		
b	Did the sponsoring organization make a distribution to a donor, or	donor advisor, or related p	erson <sup>7</sup>		9b		
10	Section 501(c)(7) organizations. Enter		احمدا				1
a	Initiation fees and capital contributions included on Part VIII, line		10a		-		}
. b	Gross receipts, included on Form 990, Part VIII, line 12, for public	c use of club facilities	[10b]		1		l
11	Section 501(c)(12) organizations. Enter:		11a		l 1		
8	Gross income from members or shareholders	and to other pourses	114	····	1		
ь	Gross income from other sources (Do not net amounts due or pa against amounts due or received from them.)	aid to differ sources	116			İ	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organ	ization filma Form 990 in li		0412	12a		
b	If "Yes," enter the amount of tax-exempt interest received or acc		126	O 111			<del></del> -
13	Section 501(c)(29) qualified nonprofit health insurance issue		[120]	<del></del>	1		ì
а	Is the organization licensed to issue qualified health plans in mor				13a		<u>-</u>
_	Note. See the instructions for additional information the organiza		lule O.				ī
ь	Enter the amount of reserves the organization is required to mair	•			1 1		- 1
-	the organization is licensed to issue qualified health plans		136		]		ì
С	Enter the amount of reserves on hand		13c		1 1		[
14a	Did the organization receive any payments for indoor tanning sei	vices during the tax year?			14a		X
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No	-		)	14b		
DAA		<del></del>	- <del></del>	- <del></del>	Form	990	(2017)

For	n 990 (2017) Mountain Town Music 87-0669814		P	age 6
	art VI   Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, a	and fo	or a "	No"
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O.	See	instru	ictions.
	Check if Schedule O contains a response or note to any line in this Part VI			$\prod$
Sec	ction 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 10 10			
	If there are material differences in voting rights among members of the governing body, or			<b>]</b>
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent  1b 10			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customanly performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		<u>X</u>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		<u>X</u>
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		<u>X</u>
6	Did the organization have members or stockholders?	6		<u>X</u>
7 <b>a</b>	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	- 1	- 1	
_	one or more members of the governing body?	7a		<u> </u>
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		<u> </u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the follow	~ -		
a	The governing body? .	8a	X	
b	Each committee with authority to act on behalf of the governing body?	<u>8b</u>	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	{	{	**
<u> </u>	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9 ]		X
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Co		<u> </u>
40-	Did the assessment being level about an homeless or offlicted?	100	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		<u> </u>
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	ا ۱۸۰	l	
440	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		X
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11a		<del>-</del>
120	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	120		X
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a 12b		
b	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	120		
С	describe in Schedule O how this was done	12c		
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			<del></del> -
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	ł		- 1
а	The organization's CEO, Executive Director, or top management official	15a		X
		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			1
	in the state of th	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			1
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the		į	- 1
	· · · · · · · · · · · · · · · · · · ·	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed None			
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)			
	available for public inspection Indicate how you made these available Check all that apply			
	Own website Another's website 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, and			
	financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records:			
	rian Richards PO Box 680896			
	rk City UT 84068-0896 435-	901	-76	64

Form'990 (20	17) Mountain Town Music	87-0669814	Page 7
Part VII	Compensation of Officers, Directors,	Trustees, Key Employees, Highest Compensate	d Employees, an
	Independent Contractors		
	Check if Schedule O contains a respons	se or note to any line 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. Reno	ort 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

[X] Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee (F) Name and Title Average Position Reportable Reportable Estimated compensation compensation from amount of hours per (do not check more than one related other box, unless person is both an from week (list any officer and a director/trustee) the omanizations compensation (W-2/1099-MISC) from the hours for organization Institutional (W-2/1099-MISC) related and related organizations employee below dotted organizations tine) trustee (1) Brian Richards 40.00 0 0.00 **Executive Director** X 0 (2) Ryan Walsh 0.00 President 0.00 X X 0 0 0 (3) Tyler Dustman 0.00 0 0 Board Member 0.00 X 0 (4) James New 0.00 0 Board Member 0.00 0 0 (5) Beth Moon 0.00 0.00 0 0 0 Board Member (6) Jessica Kahn 0.00 0 Board Member 0.00 0 0 77 Todd Evans 0.00 **Board Member** 0.00 X 0 0 0 (8) Nicole Johnson 0.00 0 Board Member 0.00 0 0 (9) Beau Ogburn 0.00 Board Member 0.00 0 0 X 0 (10) Bill Wilson 0.00 Board Member 0.00 0 0 X 0 (11) Susan Worthington 0.00 0 0 Board Member 0.00 Form 990 (2017)

Form **990** (2017)

Fon	n 990 (20	17) Moun										87-066				Р	age
P	art VII	Section A.	Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)  (A) (B) (C) (D) (E)														
	Na	(A) ame and tile		(B) Average hours per week (list any hours for related		offi	cera	Pos check ess pe	more more	than is both or/trus	tee)	Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	ł	Estum amou oth compen from organiz	ated nt of er setion the	
				organization below dotte line)		individual trustee or director	institutional trustee	Officer	y employee	Highest compensated employee	Former				and re organiz	lated	
		· · · · · · · · · · · · · · · · · · ·															
			<u> </u>														,· ···
																· · · · ·	
		<del></del>															
			· · · · ·												<u></u>	<del></del> .	
1b	Sub-tota			and to Read						<u></u>							
		om continua dd lines 1b a		ets-to-Part	·V (I,	Sec	AIO!	IA									
2	Total nu	mber of indiv	nduals (II					to th	ose	liste	d al	oove) who received more	than \$100,000 of				
	reportab	le compensa	tion fron	n the organi	zatio	on_	<u>v</u>						<del></del>		_	Yes	No
3		organization lee on line 1a?										mployee, or highest comp al	ensated		3		x
4		tion and rela										ation and other compensa s," complete Schedule J fo			4		X
5	Did any	person listed										any unrelated organizati	on or individual				X
Sect		dependent (			<i>,</i> 11	res	, 60	mpi	ele .	SCHE	auic	J for such person	<u> </u>		_ 5		
1	Complet	e this table for	or your f	ive highest								ontractors that received m	ore than \$100,000 of within the organization's	lav vaas			
	Compens	sauon nom u		(A) business addres		VIIII	<i>J</i> E113	auui	1 101	uie			(B) tool of services	ax year		(C) mpensat	ion
		3	THAIR GIN	business duties	<u> </u>							Doory	0.00			прогос	JOI1
															_		
· · · · · ·		<u>-</u>		<u> </u>							_	· · · · · · · · · · · · · · · · · · ·					
				<del></del>											-	•	
2		mber of indep										hose listed above) who	0				

For	m'99	0 (2017) <b>MO</b> 1	untain T	own	Mus:	ic		87-0669814	<u> </u>	Page 9
	art_\	/III State	ment of Rev	enue	)					
		Check	if Schedule	0 00	ntains	a response		line in this Part V	<del></del>	
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D)  Revenue excluded from tax under sections 512-514
#E	1a	Federated ca	ampaigns	1a			<del></del>	1		1
و م	Ь	Membership		1b		28,360				
δĀ	c	Fundraising		1c						
등	d	Related orga		1d	<del></del>					
ωE	е	Government grant		1e		111,500		1		1
Ö	1	All other contribute	•							]
₹			ts not included above	1f		61,786				1
EO.	g	Noncash contributi	ons included in lines i	la-1f	\$			ŀ		
<u>ပ</u> ြွဲ့	h	Total. Add lir	nes 1a-1f				201,646			
Ju.						Busn. Code				
Service Revenue Contributions, Gifts, Grants	2a	Product	ions Servic	es			416,410			
	b	Service	s				48,298	48,298		
ž	C							<b></b>		
Š	d					<b>  </b>				
Tal	e					<b></b>				
Program (	1		ram service rev	enue		L	464,708		<u> </u>	L
		Total. Add lir		مام مرتام	anda inte		404,708	···		
	3		icome (including nilar amounts)	aiviae	enus, inte	erest,				
	1		investment of ta	10VQ_V	nnt hond	nroceeds				
	5	Royalties	mvesiment of te	IX-CXCI	npt bond	proceeds				-
	ľ	Royalics	(i) Real		(ir) F	Personal	*************			
	6a	Gross rents	(7.112							
	b	Less rental exps.	<del></del> -							
		Rental inc or (loss						1		
	d	•	et rental income or (loss)							
	7a	Gross amount from			(ii)	Other				ļ
		sales of assets other than inventor								
	ь	Less cost or other								
		basis & sales exps								
	С	Gain or (loss)	<u> </u>					[		
	d	Net gain or (le	oss)							
e	8a		rom fundraising ev	ents		ł				1
evenue		(not including \$								
æ			reported on line 1	c) [		}				
ē		See Part IV, line		а						
Other		Less direct e	•	, b[						
_			r (loss) from fun		g events					<del></del> ,
	98		rom garning activiti	- 1						
	_	See Part IV, line		a						
		Less direct e	•	b[	atuation.			· <del></del>	<del></del>	
			r (loss) from gai of inventory, less		cuviues			<del></del>		
	IVa	returns and a	-	a		4,859				ļ
	b	Less cost of		ь		4,393				
l			r_(loss) from sale	_	ventory		466	466		
			elianeous Revenue			Busn. Code				
Ì	11a									
ļ	þ									
	С									
d	d	All other rever	nue							
	е	Total. Add lin	es 11a-11d							
]	12	Total revenue	e. See instruction	ns		Г	666,820	465,174	0	0

Form 990 (2017) Mountain Town Music

Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (B) Program service expenses (D) Fundraising expenses (A) Total expenses (C) Management and general expenses Do not include amounts reported on lines 6b. 7b, 8b, 9b, and 10b of Part VIII. Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals See Part IV. line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 62,136 31,068 15,534 15,534 trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 12,469 6,235 3,117 3,117 Other salanes and wages Pension plan accruats and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 7,612 3,806 1,903 1,903 10 Payroll taxes 11 Fees for services (non-employees) a Management b Legal 4,519 4,519 c Accounting d Lobbying e Professional fundraising services See Part IV, line 17 f Investment management fees g. Other (If line 11g amount exceeds 10% of line 25, column 894 446 224 224 (A) amount, list line 11g expenses on Schedule O) 16,593 8,297 4,148 4,148 12 Advertising and promotion 6,569 3,285 1,642 1,642 Office expenses 4,300 2,150 2,150 Information technology 8,600 14 Royalties 15 3,050 1,524 763 763 Occupancy 16 Travel 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials . 4,473 2,237 1,118 Conferences, conventions, and meetings 1,118 20 Interest 10,048 10,048 21 Payments to affiliates 64,477 64,477 Depreciation, depletion, and amortization 11,246 5,622 2,812 2,812 23 Insurance 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 O) 259,505 259,505 Musicians Sound Engineers 62,731 62,731 b **Production Costs** 37,275 37,275 C Equipment Rental <u>16,784</u> 16,784 e All other expenses 49,924 36,106 6,640 7,178 25 Total functional expenses. Add lines 1 through 24e 638,905 553,746 44,570 40,589 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 following SOP 98-2 (ASC 958-720)

	X   Balance Sheet  Check if Schedule O contains a response or note to	any line in this Part X	<del></del>		
	Oreas in excission of contains a response or note to	any me mano rarex,	(A) Beginning of year		(B) End of year
1	Cash—non-interest bearing		156,799	1	181,873
2	Savings and temporary cash investments	[		2	
3	Pledges and grants receivable, net			3	
4	Accounts receivable, net		14,365	4	33,23
5	Loans and other receivables from current and former office	cers, directors,			
ļ	trustees, key employees, and highest compensated empl	oyees			
	Complete Part II of Schedule L			5	
6	Loans and other receivables from other disqualified person	ns (as defined under section	·		
	4958(f)(1)), persons described in section 4958(c)(3)(B), a	nd contributing employers an	d		
	sponsoring organizations of section 501(c)(9) voluntary e	mployees' beneficiary			<del> </del>
Ì	organizations (see instructions). Complete Part II of Sche-	dule L		6	<u> </u>
7	Notes and loans receivable, net			7	
8	Inventones for sale or use			8	
9	Prepaid expenses and deferred charges	,	2,007	9	2,007
10a	Land, buildings, and equipment, cost or				
	other basis Complete Part VI of Schedule D				
b		333,660	175,393	10c	138,870
11	Investments—publicly traded securities			11-	
12		<u></u>		12	<del></del>
13	Investments—program-related See Part IV, line 11	_	22 660	13	0 11
14	Intangible assets	-	22,669	14	8,119 4,973
ì	Other assets See Part IV, line 11	-	4,973	15	260 073
16	Total assets. Add lines 1 through 15 (must equal line 34)		376,206 322	16	369,073
17	Accounts payable and accrued expenses	ŀ	322	17	
18	Grants payable	-		18	
19	Deferred revenue	-		19 20	
21	Tax-exempt bond liabilities	Cahadula D		21	
22	Escrow or custodial account liability Complete Part IV of a Loans and other payables to current and former officers,				· · · · · · · · · · · · · · · · · · ·
22	trustees, key employees, highest compensated employees				
	disqualified persons Complete Part II of Schedule L.	5, 4110		22	<del></del>
23	Secured mortgages and notes payable to unrelated third	narties	155,115	23	120,389
	Unsecured notes and loans payable to unrelated third par		133/113	24	120/303
25	· ·				
	parties, and other liabilities not included on lines 17-24) (				
	of Schedule D			25	
26	Total liabilities. Add lines 17 through 25		155,437	26	120,389
	Organizations that follow SFAS 117 (ASC 958), check	here X and			
	complete lines 27 through 29, and lines 33 and 34.				_
27	Unrestricted net assets		220,769	27	228,677
28	Temporanly restricted net assets		`	28	20,007
29	Permanently restricted net assets			29	
	Organizations that do not follow SFAS 117 (ASC 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 equipment f	und		31	
32	Retained earnings, endowment, accumulated income, or o	other funds		32	
33	Total net assets or fund balances		220,769	33	248,684
34	Total liabilities and net assets/fund balances	. i	376,206	34	369,073

Fom	m <sup>.</sup> 990 (2017) <b>Mountain Town Music 87-0669814</b>			_ Pa	<u>ge 12</u>
Pa	art XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				┚
1	Total revenue (must equal Part VIII, column (A), line 12)	1		66,	
2	Total expenses (must equal Part IX, column (A), line 25)	2		38,	
3	Revenue less expenses Subtract line 2 from line 1	3		27,	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2	20,	<u> 769</u>
5	Net unrealized gains (losses) on investments	.5			
6	Donated services and use of facilities	6			
7	Investment expenses	7	<u> </u>		
8	Pnor period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9	<u> </u>		
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))		2	48,	<u> 684</u>
Pa	art XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII			· · · · · · · · · · · · · · · · · · ·	Щ.
				Yes	No
1	Accounting method used to prepare the Form 990. Cash X Accrual Other				ì
	If the organization changed its method of accounting from a pnor year or checked "Other," explain in		1	{	1
	Schedule O.			l —	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		<u>2a</u>	<del> </del>	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or		ļ	İ	
	reviewed on a separate basis, consolidated basis, or both.		]		j
	Separate basis Consolidated basis Both consolidated and separate basis				
þ	Were the organization's financial statements audited by an independent accountant?		<u>2b</u>	<u> </u>	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a		-		
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis			<u> </u>	_ ~ .
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig	ht	İ		1
	of the audit, review, or compilation of its financial statements and selection of an independent accounta	nt?	2c	L	
	If the organization changed either its oversight process or selection process during the tax year, explain	ın			
	Schedule O				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in	1	1		
	the Single Audit Act and OMB Circular A-133?		3a	<u> </u>	
þ	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	e		1	
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audit	s	3b		L
			For	m <b>99</b> 0	(2017)

## SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

# **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.

2017

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Mountain Town Music Employer Identification number 87\_0669814

		Mountain 10	WIL MUSIC			07-000	7014		
Par	t I Rea	son for Public Charit	y Status (All organizatio	ns mus	t comp	lete this part) See instr	ructions		
The o	ganization is n	ot a private foundation beca	ause it is (For lines 1 through	12, check	only on	e box)			
1 [	A church, o	onvention of churches, or a	association of churches describ	ed in se	ction 170	D(b)(1)(A)(i).			
2	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ) )								
3	<del>-</del> 1 .	, , ,	rvice organization described in						
4	<b>-</b>	•	ted in-conjunction with a hospi				r the hospital's name.		
	city, and sta	•					,,,		
5 [			it of a college or university own	ned or on	erated by	v a governmental unit describ	ed in		
• [		0(b)(1)(A)(iv). (Complete P	•	.00 0. 0	J. 0.00 D	, a governmentar and accomb	ou		
6 [	_		r governmental unit described	ın sectio	n 170(b)	(1)(A)(v).			
7	= '		a substantial part of its suppor		٠,	· /· /· /	public		
۰ ۲	<del></del> 1	n section 170(b)(1)(A)(vi).		Dad II \					
8	_		n 170(b)(1)(A)(vi). (Complete F			consumption with a land around	t college		
9 [			described in section 170(b)(1)( e of agriculture (see instruction			-	•		
10 [	An organiza receipts from support from	n activities related to its exi n gross investment income	(1) more than 33 1/3% of its sempt functions—subject to cert and unrelated business taxable	ain excer e income	otions, an (less se	d (2) no more than 33 1/3% ction 511 tax) from businesse	of its		
44 [	_ ` `	•	30, 1975 See section 509(a)						
11		•	d exclusively to test for public	-					
12 [			d exclusively for the benefit of, inizations described in section						
	Check the b	ox in lines 12a through 12d	that describes the type of sur	oporting o	organizatı	on and complete lines 12e, 12	2f, and 12g		
ε			operated, supervised, or control	-			y giving		
		• ,, ,	ower to regularly appoint or ele		onty of th	e directors or trustees of the			
_		• •	complete Part IV, Sections A						
t			supervised or controlled in con						
			orting organization vested in the Part IV, Sections A and C.		persons	that control or manage the su	ірропеа		
c	Type III	functionally integrated. A	A supporting organization opera instructions) You must complete	ated in co	nnection	with, and functionally integra	ited with,		
c			ted. A supporting organization				nization(s)		
	that is n	ot functionally integrated T	he organization generally must imust complete Part IV, Sect	t satisfy a	a distribu	tion requirement and an atter			
•	Check t	nis box if the organization re	eceived a written determination	from the	IRS that	ıt ıs a Type I, Type II, Type I	II		
			non-functionally integrated support	porting o	rganizatio	on	<del> </del>		
f ç		umber of supported organize following information about	ations the supported organization(s)				Ĺ		
	ame of supported	(ii) EIN	(iii) Type of organization	(iv) Is the	organization	(v) Amount of monetary	(vi) Amount of		
	organization	.,	(described on lines 1-10	listed in your governing			other support (see		
			above (see instructions))	docu	nent?	instructions)	instructions)		
	<del></del>			Yes	No				
(A) <sub>(</sub>			-						
(B)						•			
		<del> </del>		<b></b>					
(C)									
(D)									
(E)	· · · · · · · · · · · · · · · · · · ·					<del></del>			
				-					
		1	I	ı	1				

b 10%-facts-and-circumstances test—2016. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Schedule A (Form 990 or 990-EZ) 2017

organization

instructions

supported organization

Schedule A (Form 990 or 990-EZ) 2017 Mountain Town Music

Part III Support Schedule for Organizations Described in Section 509(a)(2)

	(Complete only if you chause of the organization fails to						under Part II
Sec	tion A. Public Support	o quality under	the tests liste	su below, piea	se complete i	ait ii.j	
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Grifs, grants, contributions, and membership fees received (Do not include any "unusual grants")	(4) 2010	(5/ =5 / .	(0) 2010	(1)	(5) 35	(7)
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5		<u> </u>				
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						<del> </del>
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			<del></del>
8	Public support. (Subtract line 7c from line 6)						
	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6		· ···· - · · · · · · · · · · · · · · ·				<del></del>
108	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						<del> </del>
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)				<u> </u>		
13	Total support. (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is for the organization, check this box and stop he		first, second, third	, fourth, or fifth tax	year as a sectio	n 501(c)(3)	▶ []
Sec	tion C. Computation of Public S		entage				
15	Public support percentage for 2017 (line	8, column (f) divid	ded by line 13, co	lumn (f))		15	%
16	Public support percentage from 2016 Sc					16	%
	tion D. Computation of Investment					· · · · · · · · · · · · · · · · · · ·	
17	Investment income percentage for 2017	•	**	: 13, column (f))		17	<u>%</u>
18	Investment income percentage from 201	•		و - سالسم 4.4 مسا	is a more than o	18	<u>%</u>
19a	33 1/3% support tests—2017. If the org					•	▶ 🗌
ь	17 is not more than 33 1/3%, check this 33 1/3% support tests—2016. If the org		-			-	
-	line 18 is not more than 33 1/3%, check						▶ []
20	Private foundation. If the organization of						▶ 🗍

Schedule A (Form 990 or 990-EZ) 2017

Part IV | Supporting Organizations (Complete only if you checked a box in line 12 on Part I If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A and D. and C. and D. and C. and D

								120 011 411 1, 0		
Sec	ctions A, D,	and E. If	you checked	12d of Part I	, complete	Sections A	and D,	and complete F	Part V.)	
Section A. All	Supporting	Organiz	ations							

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes." and if you checked 12a or 12b in Part I, answer (b) and (c) below
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
- b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

	Yes	NO_
1		
_		
2		
3a		
3b		
3c		
4b		
4c		1
 5a		
5b		
5c	-	
6		
7		
8		
9a		
9b		
9c		
10a		
106		!

		-0669814	···	Page 5
Pa	rt IV   Supporting Organizations (continued)		T.,	1
	the the constant of a second of a second of the following paragraps	Γ	Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?  A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	ı	1	1
a	below, the governing body of a supported organization?	11a		-
h	A family member of a person described in (a) above?	11b	<del>1                                    </del>	<del>                                     </del>
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part		-	<del> </del>
	tion B. Type I Supporting Organizations	<u>vi. 1110</u>	<del></del>	<u> </u>
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to	<u></u>	1	1
-	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			ŀ
	controlled the organization's activities. If the organization had more than one supported organization,	1	ł	
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	1		
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported	•		1
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			ľ
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	l	·	l
_	supervised, or controlled the supporting organization.	2		
Sect	ion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		1	
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control	İ		
	or management of the supporting organization was vested in the same persons that controlled or managed	j	.	
	the supported organization(s)	1	<u> </u>	<u> </u>
Sect	ion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			1
	organization's tax year, (i) a written notice describing the type and amount of support provided during the price	1		1
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	_		l
_	organization's governing documents in effect on the date of notification, to the extent not previously provided	<sup>2</sup> 1	<b></b>	<del> </del>
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI h	1		
_	the organization maintained a close and continuous working relationship with the supported organization(s).	2		<del> </del>
3	By reason of the relationship described in (2), did the organization's supported organizations have a			ļ
	significant voice in the organization's investment policies and in directing the use of the organization's	j	}	
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	3		i
Sect	supported organizations played in this regard.  ion E. Type III Functionally-Integrated Supporting Organizations		ــــــــــــــــــــــــــــــــــــــ	L
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year	(see instructions)	-	
' a	The organization satisfied the Activities Test Complete line 2 below	,see mondenens,		
b	The organization is the parent of each of its supported organizations Complete line 3 below.			
C	The organization supported a governmental entity Describe in Part VI how you supported a government	entity (see instruc	tions)	
		,	Ĺ	
2 /	Activities Test Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify	[	ĺ	ĺ
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	' l		
	that these activities constituted substantially all of its activities.	2a		ļ
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	:	ļ	j
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			<b> </b>
	activities but for the organization's involvement.	2b	L	
3	Parent of Supported Organizations Answer (a) and (b) below.	1		
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	I	<b> </b>	<b> </b>
	trustees of each of the supported organizations? Provide details in Part VI	3a	<b></b>	<u> </u>
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of e			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b-	L.	}

Schedule A (Form 990 or 990-EZ) 2017 Mountain Town Music		87-0669	<b>814</b> Page 6				
Part V   Type III Non-Functionally Integrated 509(a)(3) Supporting C							
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust or							
instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E							
Section A - Adjusted Net Income		(A) Pnor Year	(B) Current Year (optional)				
1 Net short-term capital gain	1						
2 Recovenes of prior-year distributions	2						
3 Other gross income (see instructions)	3						
4 Add lines 1 through 3	4						
5 Depreciation and depletion	5						
6 Portion of operating expenses paid or incurred for production or							
collection of gross income or for management, conservation, or							
maintenance of property held for production of income (see instructions)	6						
7 Other expenses (see instructions)	7						
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4).	8						
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)				
Aggregate fair market value of all non-exempt-use assets (see	Ī						
instructions for short tax year or assets held for part of year).							
Average monthly value of securities	1a						
b Average monthly cash balances	1b						
c Fair market value of other non-exempt-use assets	1c						
d Total (add lines 1a, 1b, and 1c)	1d						
e Discount claimed for blockage or other			1				
factors (explain in detail in Part VI)	<u> </u>						
2 Acquisition indebtedness applicable to non-exempt-use assets	2						
3 Subtract line 2 from line 1d	3						
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,							
see instructions)	4						
5 Net value of non-exempt-use assets (súbtract line 4 from line 3)	5						
6 Multiply line 5 by .035	6						
7 Recovenes of prior-year distributions	7		V				
8 Minimum Asset Amount (add line 7 to line 6)	8						
Section C - Distributable Amount			Current Year				
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1	·					
2 Enter 85% of line 1.	2						
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3						
4 Enter greater of line 2 or line 3	4						
5 Income tax imposed in prior year	5						
6 Distributable Amount. Subtract line 5 from line 4, unless subject to							
emergency temporary reduction (see instructions)	6	,					
7 Check here if the current year is the organization's first as a non-functionally integra	ited Ty	pe III supporting organiza	tion (see				
instructions)							

Schedule A (Form 990 or 990-EZ) 2017

	ule A (Form 990 or 990-EZ) 2017 Mountain Town Mus		87-0669	
	t V   Type III Non-Functionally Integrated 509(a)(3	) Supporting Organ	nizations (continued	
_Sec	tion D - Distributions	<del></del>		Current Year
1_	Amounts paid to supported organizations to accomplish exempt pur			
2	Amounts paid to perform activity that directly furthers exempt purpo	ses of supported		
	organizations, in excess of income from activity			
3_	Administrative expenses paid to accomplish exempt purposes of su	upported organizations	· · · · · · · · · · · · · · · · · · ·	
_4_	Amounts paid to acquire exempt-use assets			
5_	Qualified set-aside amounts (prior IRS approval required)			<del> </del>
<u>-6</u>	Other distributions (describe in Part VI). See instructions	<del></del>		<del> </del>
$-\frac{7}{2}$	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the organ	nization is responsive		
	(provide details in Part VI) See instructions.			
9_	Distributable amount for 2017 from Section C, line 6			
_10_	Line 8 amount divided by line 9 amount	6)	/ / / / / / / / / / / / / / / / / / /	(ili)
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(ili) Distributable Amount for 2017
_1	Distributable amount for 2017 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2017			
	(reasonable cause required-explain in Part VI) See			i
	instructions	<u> </u>		!
3	Excess distributions carryover, if any, to 2017			<u> </u>
	!			
	From 2013			
	From 2014	<u> </u>		
	From 2015			<u> </u>
	From 2016			<u> </u>
	Total of lines 3a through e		<del> </del>	
	Applied to underdistributions of prior years			<u> </u>
	Applied to 2017 distributable amount			
<del>- +</del>	Carryover from 2012 not applied (see instructions)			<u> </u>
	Remainder Subtract lines 3g, 3h, and 3i from 3f.			<u> </u>
4	Distributions for 2017 from		•	1
	Section D, line 7 \$			<u></u>
	Applied to underdistributions of prior years  Applied to 2017 distributable amount			<u> </u>
	Remainder Subtract lines 4a and 4b from 4			1
<u>_</u>	Remaining underdistributions for years prior to 2017, if		· · · · · · · · · · · · · · · · · · ·	<del> </del>
3	any Subtract lines 3g and 4a from line 2 For result			
	greater than zero, explain in Part VI See instructions.			ł
6	Remaining underdistributions for 2017 Subtract lines 3h			<u> </u>
•	and 4b from line 1 For result greater than zero, explain in			
	Part VI. See instructions			
7	Excess distributions carryover to 2018. Add lines 3			1
•	and 4c			
8	Breakdown of line 7			<del>                                     </del>
	Excess from 2013		<del></del>	<u> </u>
	Excess from 2014			<u> </u>
	Excess from 2015		· · · · · · · · · · · · · · · · · · ·	<u> </u>
	Excess from 2016			i
	Evoes from 2017			<u> </u>

Schedule A (Form 990 or 990-EZ) 2017

Schedule A (Form 990 or 990-EZ) 2017 Mountain Town Music 87-0669814 Page 8

Part VI Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b; Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E,

lines 2, 5, and 6 Also complete this part for any additional information. (See instructions.)

## SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements
Complete If the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990.

Go to www.irs gov/Form990 for instructions and the latest information.

OMB No 1545-0047 2017 Open to Public Inspection

Name of the organization	ſ	Employer Identification number
Mountain Town Music		87-0669814
Part I Organizations Maintaining Donor Advis	sed Funds or Other Similar Funds	
Complete if the organization answered "Y	(a) Donor advised funds	(b) Funds and other accounts
1. Tatal number at and of year	(a) Doror advised lands	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year	when that the exects hold in denot advand	<u> </u>
5 Did the organization inform all donors and donor advisors in v	_	□ v <sub>ee</sub> □ v <sub>e</sub>
funds are the organization's property, subject to the organization.  6 Did the organization inform all grantees, donors, and donor at	•	∐ Yes ∐ No
•	• •	u
only for chantable purposes and not for the benefit of the don conferming impermissible private benefit?	or or donor advisor, or for any other purpose	Yes No
Part II Conservation Easements.		
Complete if the organization answered "Y		
1 Purpose(s) of conservation easements held by the organization	· · · · · · · · · · · · · · · · · · ·	
Preservation of land for public use (e.g., recreation or edu		•
Protection of natural habitat	Preservation of a certified histo	onc structure
Preservation of open space		
2 Complete lines 2a through 2d if the organization held a qualifi	ied conservation contribution in the form of a	
easement on the last day of the tax year.		Held at the End of the Tax Yea
a Total number of conservation easements		2a
b Total acreage restricted by conservation easements		2b
c Number of conservation easements on a certified historic stru	. * *	2c
d Number of conservation easements included in (c) acquired a	fter 7/25/06, and not on a	
historic structure listed in the National Register		2d
Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the org	panization during the
tax year		
4 Number of states where property subject to conservation ease		
5 Does the organization have a written policy regarding the per		П., П.,
violations, and enforcement of the conservation easements it		Yes   No
Staff and volunteer hours devoted to monitoring, inspecting, h	nandling of violations, and enforcing conserva	tion easements during the year
7 Amount of expenses incurred in monitoring, inspecting, handle	ing of violations, and enforcing conservation	easements during the year
\$		
8 Does each conservation easement reported on line 2(d) above	re satisfy the requirements of section 170(n)(	
and section 170(h)(4)(B)(ii)?		∐ Yes ∐ No
9 In Part XIII, describe how the organization reports conservation balance sheet, and include, if applicable, the text of the footnote.	•	•
organization's accounting for conservation easements	ble to the organization's infancial statements	triat describes trie
Part III Organizations Maintaining Collections Complete if the organization answered "Ye	of Art, Historical Treasures, or Otl	her Similar Assets.
<del></del>	<del></del>	
1a If the organization elected, as permitted under SFAS 116 (ASI	•	
works of art, historical treasures, or other similar assets held f	•	
public service, provide, in Part XIII, the text of the footnote to		
b If the organization elected, as permitted under SFAS 116 (ASI		
works of art, historical treasures, or other similar assets held to	•	iuruierance or
public service, provide the following amounts relating to these	nems	*
(i) Revenue included on Form 990, Part VIII, line 1		\$
(ii) Assets included in Form 990, Part X	auron or other armiles essets for Energy	\$
2 If the organization received or held works of art, historical trea		in, provide the
following amounts required to be reported under SFAS 116 (A	ac 900) relating to triese items	<b>c</b> r
a Revenue included on Form 990, Part VIII, line 1		\$
_b Assets included in Form 990, Part X		<del>_</del>

Sch	edule D (Form 990) 2017 Mountain	Town Mus	ic			87-0	<u>6698:</u>	<u> 14</u>		Page 2
P	art III Organizations Maintainin	g Collections	of Art	, Historica	Treasur	es, or C	Other S	imila	r Assets	
3	Using the organization's acquisition, acces collection items (check all that apply)	sion, and other red	cords, ch	eck any of the	following ti	nat are a	significan	t use o	of its	
а	Public exhibition	аГ	Loan o	r exchange p	rograms					
b	Scholarty research	e	Other	•	Ū					
С		L	,							
4	Provide a description of the organization's	collections and ex	olain ho	w they further	the organiza	ation's exe	empt pur	ose in	Part	
	XIII									
5	During the year, did the organization solici	t or receive donati	ons of a	rt. historical tre	easures, or o	other simil	аг			
-	assets to be sold to raise funds rather than									Yes No
P	art IV Escrow and Custodial A		<u> </u>							
•	Complete if the organization		es" on	Form 990.	Part IV. I	ine 9. o	r report	ed ar	amount	on Form
	990, Part X, line 21.									
18	Is the organization an agent, trustee, custo	odian or other inter	mediary	for contributio	ns or other	assets no	·			<del></del>
	included on Form 990, Part X?						•			Yes No
h	If "Yes," explain the arrangement in Part X	ill and complete th	ne follow	no table					ш	
_	in res, explain the arrangement in rate x	un ana compicie a	ic ionow	ing table			Г		Amo	unt
c	Beginning balance						}	1c		<del></del>
	Additions during the year						l l	1d		
	Distributions during the year						<u> </u>	1e		
	Ending balance						<u></u>	1f		
, 20	Did the organization include an amount on	Earn 000 Part V	lino 21	for accrow or	cuetodial a	ccount liab	ulah/2	-::	П	Yes No
	<del>-</del>						-		L	"" H ""
	If "Yes," explain the arrangement in Part X art V Endowment Funds.	iii Check here ii u	е ехріаі	laudii nas bee	ii piovided	UII Fait A				
Г	Complete if the organization	an answered "V	'ec" on	Form 990	Dart IV	ne 10				
	Complete if the organization			) Prior year	(c) Two ye		(d) Then	e years	book (a)	our years back
•	Page 1 of the state of the stat	(a) Current year	<del>  '</del>	y Pilor year	(c) Two ye	als back	(0) 1106	e years	Dack (e)	our years back
	Beginning of year balance		+							
	Contributions		<del>                                     </del>	<del></del>	<del> </del>		<del> </del>		<del></del>	
С	Net investment earnings, gains, and						-			
	losses	··	+		<b></b>					· · · · · · · · · · · · · · · · · · ·
	Grants or scholarships				<del> </del>	<del> ·· -</del> -			<del></del>	<del></del>
е	Other expenditures for facilities and		1							
	programs				<u> </u>				<del></del>	
f	Administrative expenses				ļ		ļ			
9	End of year balance				L		L			
2	Provide the estimated percentage of the cu	urrent year end bal	ance (lin	e 1g, column	(a)) held as					
а	Board designated or quasi-endowment	%								
b	Permanent endowment %									
C	Temporanly restricted endowment	%								
	The percentages on lines 2a, 2b, and 2c s	•								
3а	Are there endowment funds not in the pos-	session of the orga	inization	that are held	and adminis	tered for t	he			<del></del>
	organization by									Yes No
	(i) unrelated organizations								3a(	1)
	(ii) related organizations								3a(	ii)
b	If "Yes" on line 3a(ii), are the related organ	izations listed as n	equired (	on Schedule R	(?				_3t	
4_	Describe in Part XIII the intended uses of		endowme	ent funds						
. Pa	ert VI Land, Buildings, and Equ									
	Complete if the organization	<u>n answered "Y</u>	es" on	Form 990,	Part IV, li	ne 11a.	See Fo	<u>om 9</u>	90, Part 2	K, line 10.
	Description of property	(a) Cost or other	basis	(b) Cost or o	other basis	(c) A	\ccumulated		(d) Bo	ok value
		(investment	)	(othe	¥)	de	preciation		ļ <u> </u>	
1a	Land			<u></u>						
b	Buildings									
c	Leasehold improvements									
d	Equipment			47	72,530		333,	660		138,870
e	Other									
Total	. Add lines 1a through 1e (Column (d) mus	t equal Form 990,	Part X, o	column (B), lin	e 10c.)					38,870

(7)

(8)
(9)

Total. (Column (b) must equal Form 990, Part X, col (B) line 25)

2. Liability for uncertain tax positions 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

DAA

Schedule D (Form 990) 2017

Sch	edule D (Form 990) 2017 Mountain Town Music	87-0669	814	Page 4
P	art XI Reconciliation of Revenue per Audited Financial Sta	tements With Revenue	per Ret	urn.
_	Complete if the organization answered "Yes" on Form 99	90, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII )	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	1 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII )	4b		
С	Add lines 4a and 4b		4c	
_5_	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	
Pa	art XII Reconciliation of Expenses per Audited Financial Sta	atements With Expense	s per R	eturn.
	Complete if the organization answered "Yes" on Form 99	90, Part IV, line 12a		
1	Total expenses and losses per audited financial statements		1	<del></del>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a	[	
þ	Pnor year adjustments	2b		
С	Other losses	2c		
d	Other (Describe in Part XIII.)	2d	_	
e	Add lines 2a through 2d		2e	<del></del>
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1.		1 1	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	46	_	
C	Add lines 4a and 4b		4c	
_5_	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	·	5	
Pa	rt XIII Supplemental Information.			

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line

2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

Schedule D (Form 990) 2017 Mountain Town Music
Part XIII | Supplemental Information (continued)

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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.

Attach to Form 990 or 990-EZ.

. Go to www.irs gov/Form990 for the latest information.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Mountain Town Music

87-0669814

Employer identification number

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 No review was or will be conducted.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation No documents available to the public