(Rev January 2020)

# **Return of Organization Exempt From Income Tax**

OMB No 1545-0047

Department of the Treasury

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

Open to Public

Form 990 (2019)

▶ Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning and ending C Name of organization D Employer identification number Check if applicable West Virginia Jazz Society Inc Doing business as Address change Number and street (or PO box if mail is not delivered to street address) Room/suite 27-1353750 Name change 426 Center Avenue E Telephone number Initial return City or town State ZIP code Weston WV 26452 Final return/terminated Foreign postal code Foreign country name Foreign province/state/county 44,428 Amended return G Gross receipts \$ F Name and address of principal officer Application pending H(a) Is this a group return for subordinates? Eric Spelsburg 426 Center Avenue, Weston, WV 26452 H(b) Are all subordinates included? If "No " attach a list (see instructions) X 501(c)(3) 501(c) ( ) **(**insert no ) 4947(a)(1) or 527 Tax-exempt status Website: ► N/A H(c) Group exemption number ▶ X Corporation Form of organization Trust Association Other > L Year of formation 2010 M State of legal domicile WV Part I Briefly describe the organization's mission or most significant activities The West Virginia Jazz Society has a Activities & Governance mission to identify and develop the market for live jazz music in central West Virginia, in order to enhance local culture and music education in the community Check this box I if the organization discontinued its operations or disposed of more than 25% of its net assets 2 3 Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI ling 4 6 Total number of individuals employed in calendar year 2019 (Part V, line and Total number of volunteers (estimate if necessary) 5 6 7a Total unrelated business revenue from Part VIII, column (C), line 12 Net unrelated business taxable income from Form 990-T, line 39 7b **Current Year** 56.497 28,207 Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2q) 11.861 16,221 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 68.358 44.428 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 2,450 1,400 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 16a Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 70,937 43,122 73,387 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 44.522 18 Revenue less expenses Subtract line 18 from line 12 19 -5.029-94 Beginning of Current Year **End of Year** 20 Total assets (Part X, line 16) 287 193 21 Total liabilities (Part X, line 26) 22 Net assets or fund balances Subtract line 21 from line 20 287 193 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sian Here Type or print name and title Pnnt/Type preparer's name Preparer's signature Check X if Paid 11/6/2020 self-employed P00072496 Mark Kiger Preparer ▶ R Mark Kiger CPA Firm's name Firm's EIN ▶ **Use Only** Firm's address ▶ P O Box 876, Bridgeport, WV 26330 (304)641-5921 Phone no May the IRS discuss this return with the preparer shown above? (see instructions) X Yes No

For Paperwork Reduction Act Notice, see the separate instructions.

# 40

Form 9	990 (2019) West Virginia Jazz Society Inc	27-1353750	P	age 3
Part	· Checklist of Required Schedules			
	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A.	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Х
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		Х
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," <i>complete Schedule C, Part II</i>	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part	: /// 5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II.	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		х
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			x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		Х
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		Х
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		Х
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		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part	X 11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Ye and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	es," 12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	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		Х
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		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			
40	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		<u> </u>
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		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

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

Form	990 (2019) <u>Wes</u>	t Virginia Jazz Society Inc	27-1353750	Р	age 4
Par	t IV · Checklist o	of Required Schedules (continued)		Т	
	•			Yes	No
22	•	eport more than \$5,000 of grants or other assistance to or for domestic individuals on ne 2? If "Yes," complete Schedule I, Parts I and III	22		×
23		nswer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the	22		<del>  ^</del>
23	•	and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," of		23		X
24a		ave a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the las	st day of the year, that was issued after December 31, 2002? If "Yes," answer lines			İ
	_	complete Schedule K If "No," go to line 25a .	24a		X
b		nvest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	<u> </u>	↓
С		naintain an escrow account other than a refunding escrow at any time during the year	245		İ
	to defease any tax-ex		24c 24d	<del> </del> -	<del>                                     </del>
		ct as an "on behalf of" issuer for bonds outstanding at any time during the year?  1(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	240		<del>                                     </del>
ZJa		qualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b		are that it engaged in an excess benefit transaction with a disqualified person in a			
-		e transaction has not been reported on any of the organization's prior Forms 990 or	į		
	990-EZ? If "Yes," com	plete Schedule L, Part I	25b		X
26	Did the organization re	eport any amount on Part X, line 5 or 22, for receivables from or payables to any current	ŀ		
		tor, trustee, key employee, creator or founder, substantial contributor, or 35%			١
	•	nily member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27		rovide a grant or other assistance to any current or former officer, director, trustee, key			
		ounder, substantial contributor or employee thereof, a grant selection committee controlled entity (including an employee thereof) or family member of any of these			ŀ
	·	nplete Schedule L, Part III	27		X
28	•	a party to a business transaction with one of the following parties (see Schedule L,			
		or applicable filing thresholds, conditions, and exceptions)			
а		icer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	If"Yes," complete Scho		28a		X
b		ny individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С		y of one or more individuals and/or organizations described in lines 28a or 28b? If			l
	If"Yes," complete Scho		28c	ļ	X
29		eceive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M eceive contributions of art, historical treasures, or other similar assets, or qualified	29		X
30	•	cons? If "Yes," complete Schedule M	30	l	х
31		quidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Par</i>			X
32	<del>-</del>	ell, exchange, dispose of, or transfer more than 25% of its net assets?			
	If "Yes," complete Sch		32		Х
33	_	wn 100% of an entity disregarded as separate from the organization under Regulations			
		and 301 7701-3? If "Yes," complete Schedule R, Part I	33	<u> </u>	Х
34	•	related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II,			١.,
	III, or IV, and Part V, III		34	<u> </u>	<u> </u>
	•	ave a controlled entity within the meaning of section 512(b)(13)? d the organization receive any payment from or engage in any transaction with a controlle	35a	<u> </u>	$\vdash$
b		ing of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		-
36	•	anizations. Did the organization make any transfers to an exempt non-charitable related	335		
		complete Schedule R, Part V, line 2	36		Х
37	_	onduct more than 5% of its activities through an entity that is not a related organization		[	
	<del>-</del>	a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	<u> </u>	X
38	Did the organization of	omplete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		•	
		0 filers are required to complete Schedule O	38	X	
Par		Regarding Other IRS Filings and Tax Compliance		1	
	Check if Sc	hedule O contains a response or note to any line in this Part V		· ·	ᆜ
			[	Yes	No
1a	Enter the number repo	orted in Box 3 of Form 1096 Enter -0- if not applicable 1a	11		

Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable

gaming (gambling) winnings to prize winners?

Did the organization comply with backup withholding rules for reportable payments to vendors and reportable

Par	· Statements Regarding Other IRS Filings and Tax Compliance (continued)	· · ·	Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		Tes	No
	Statements, filed for the calendar year ending with or within the year covered by this return 2a			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		LX
b	If "Yes," enter the name of the foreign country ▶			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	<u> </u>		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	1		
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			ĺ
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		<del></del>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282? .  If "Yes," indicate the number of Forms 8282 filed during the year   7d	7c		
d	· · · · · · · · · · · · · · · · · · ·	-		_
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f		
-	If the organization, during the year, pay premiums, directly of molrectly, on a personal benefit contract?  If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		_
g h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 <u>9</u> 7h		H
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	<b>-</b> '''		
Ū	sponsoring organization have excess business holdings at any time during the year?	8		X
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		X
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		Х
10	Section 501(c)(7) organizations. Enter			<u> </u>
а	Initiation fees and capital contributions included on Part VIII, line 12			ľ
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			İ
11	Section 501(c)(12) organizations. Enter			1
а	Gross income from members or shareholders			1
b	Gross income from other sources (Do not net amounts due or paid to other sources			1
	against amounts due or received from them )			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		Щ.
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year [12b]	_  ,	.	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		<u> </u>
	Note: See the instructions for additional information the organization must report on Schedule O		İ	
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans	4		
C	Enter the amount of reserves on hand	-		<del>,,</del>
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
_b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year	15		Х
	If "Yes," see instructions and file Form 4720, Schedule N			—
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If "Ves." complete Form 4720. Schedule O			

Form 990 (2019)

Part VI

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI

	Check it schedule of contains a response of note to any line in this Part VI				<u> </u>
Sect	ion A. Governing Body and Management				
1a	Enter the number of voting members of the governing body at the end of the tax year  If there are material differences in voting rights among members of the governing body, or  if the governing body delegated broad authority to an executive committee or similar  committee, explain on Schedule O	6		Yes	No
þ	Enter the number of voting members included on line 1a, above, who are independent  1b	6		:	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	9			
_	any other officer, director, trustee, or key employee?	F	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	<u></u>	4		$\hat{\mathbf{x}}$
5	Did the organization make any significant changes to its governing documents since the prior commoso was med.  Did the organization become aware during the year of a significant diversion of the organization's assets?		5		$\frac{\dot{x}}{x}$
6	Did the organization have members or stockholders?		6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint				
	one or more members of the governing body?		7a		Х
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		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during				
	the year by the following				
a	The governing body?	_	8a		X
ь 9	Each committee with authority to act on behalf of the governing body?  Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached	- <u>'</u>	8b		
9	at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	Ì	9		Х
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal Re		-	)	
				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,				
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	_	l0b		X
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the fo	rm?   1	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990				
12a b	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 conflict the conflict of interest policy? If "No," go to line 13		12a 12b	х	X
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	- F		^	
	describe in Schedule O how this was done	1	12c		Х
13	Did the organization have a written whistleblower policy?	<b>—</b>	13		
14	Did the organization have a written document retention and destruction policy?		14		Х
15	Did the process for determining compensation of the following persons include a review and approval by				
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision				
а	The organization's CEO, Executive Director, or top management official		15a		<u>X</u>
b	Other officers or key employees of the organization .	11	5b		<u> </u>
40-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	1	6a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its		0a		â
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard			-	
	the organization's exempt status with respect to such arrangements?	1	6b		
Sect	ion C. Disclosure	<u>`</u>			
17	List the states with which a copy of this Form 990 is required to be filed ▶				
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (	Section 50	1(c)		
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply				
40	Own website Another's website X Upon request Other (explain on School)				
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of int	erest policy	y,		
20	and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and rec	orde			
20	Debort Mexicon (204)06	59-5215			
	A26 Center Avenue, Weston, WW 26452	::-::::::::::::::::::::::::::::::::::::			

353750	_
353/50	Pane

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

Check if Schedule O contains a response or note to any line in this Part VII.

#### Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - · List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations See instructions for the order in which to list the persons above

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and title	(B) Average hours per week (list any hours for	box,	unles er an	Pos neck ss pe	rson	than one is both an or/trustee) Former employ		(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	related organizations below dotted line)	Individual trustee or director	Institutional trustee		nployee	Highest compensated employee				related organizations
(1) Eric Spelsberg	5 00									
President		X		X						
(2) Rose Ann Policano	5 00									
Vice President		X		Х						
(3) Julia Spelsberg	5 00					İ				
Secretary		Х	L.	X						
(4) Robert Workman	5 00								i	
Treasurer		Х	_	Х						
(5) Scott Duarte	5 00			ŀ						
Director		Х		ļ						_
	5 00									
Director		Х	<u> </u>				_			
(7) Peter Edgerton	5 00									
Director		X	<b> </b>				_			
(8)										
(0)			-				$\dashv$			
(9)										
(10)										
(11)										
(12)									=	
(13)									· · · · · · · · · · · · · · · · · · ·	
(14)										

	Section A. Officers, Directors, Tru  (A)  Name and title	(B) Average hours	(do r box, office	not ch unles	Pos neck ss pe	C) sition more erson lirecte	than o	one n an	(D) Reportable compensation	(E) Reportabl compensati	e Estr	(F) mated amount of other
		per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from relate organizatio (W-2/1099-M	ns ISC) org	ompensation from the anization and ed organizations
(15)			!									
(16)												
(17)												
(18)												
(19)												
(20)				_								
(21)												
(22)												
(23)			_									
(24)												
(25)												
1b c	Subtotal  Total from continuation sheets to Part VII, Se  Total (add lines 1b and 1c)	ection A	<u> </u>	<u> </u>		<u> </u>	<u> </u>	<b>&gt; &gt; &gt;</b>				
2	Total number of individuals (including but not lir reportable compensation from the organization	nited to those lis	ted a	bov	e) v	vho	recei	ved	more than \$100	),000 of		
3	Did the organization list any <b>former</b> officer, dire employee on line 1a? <i>If "Yes," complete Sched.</i>				ee,	or h	ighes	st co	ompensated		3	Yes No
4	For any individual listed on line 1a, is the sum of the organization and related organizations great individual	•									4	X
5	Did any person listed on line 1a receive or accr for services rendered to the organization? If "Ye	-			-			_		vidual	5	X
Sec	tion B. Independent Contractors										•	
1	Complete this table for your five highest compe compensation from the organization. Report co											ear
	(A) Name and business addi	ress							(B) Description of ser	vices	(Compe	
2	Total number of independent contractors (include more than \$100,000 of compensation from the	-		tho	se l	ste	d abo	ve)	who received			

Form 990 (2019) West Virginia Jazz Society Inc Part VIII · Statement of Revenue

		Check if Schedule O co	ntains	a respon	se or	note to any line	in this Part VIII			
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
Ø 10	1a	Federated campaigns			1a					000000000000000000000000000000000000000
Contributions, Gifts, Grants and Other Similar Amounts	ь	Membership dues .			1b		7			
ဗ် ဦ	С	Fundraising events			1c		7			
ξī. Ā	d	Related organizations			1d		1			
<u>©</u> <u>₽</u>	e	Government grants (contrib	outions	s)	1e	18,10	5			
a, E	f	All other contributions, gifts					7			
er S		similar amounts not include		-	1f	10,10	2			
들 원	g	Noncash contributions inclu	uded ii	n			7			
a g		lines 1a-1f .			1g	\$				
O #	h	Total. Add lines 1a-1f				<b>&gt;</b>	28,207			
						Business Code				
<u>ic</u>	2a	Special Events				711300	16,221	16,221		
e S	b									
S L	С	***************************************					ļ			
Program Service Revenue	d							·		
go	е						<del></del> -			ļ
P	f	All other program service re	evenu	е			10.001			
	g	Total. Add lines 2a–2f			4		16,221	· <u></u>		
	3	Investment income (includir other similar amounts)	ng aiv	iaenas, in	teres	t, and				
	4	Income from investment of	tay a	cempt hor	d nro	oceads -				1
	5	Royalties .	lax-c/	cempt bor	iu pic	ceeus				<del></del>
	"	Noyalties .		(ı) Rea	al	(II) Personal	<del></del>			
	6a	Gross rents	6a	· · · · · · ·		· · · · · · · · · · · · · · · · · · ·				
	b	Less rental expenses	6b							
	c	Rental income or (loss)	6c				7			
	ď	Net rental income or (loss)				. •			4	
	7a	Gross amount from		(ı) Secur	ities	(II) Other				
		sales of assets								]
		other than inventory	7a							
ne	b	Less cost or other basis								
/en		and sales expenses	7b							
Revenue	С	Gain or (loss)	7c			<u> </u>				
-	d	Net gain or (loss)								
Oth	8a	Gross income from fundrais	sing							
		events (not including \$								
		of contributions reported or See Part IV, line 18	i line	IC)						
	h	Less direct expenses			8a 8b		$\dashv$			
	b C	Net income or (loss) from fu	ındraı	eina even		▶			<del></del>	<del></del>
		Gross income from gaming		_		1				
	Ja	See Part IV, line 19	activi	ues	9a		ı			
	b	Less direct expenses			9b		┪			
	c	Net income or (loss) from g	amino	activities		<u> </u>		<del></del>	<del>*** = ***** * * * * * * *</del>	
		Gross sales of inventory, le	_	,		[	-			·
		returns and allowances			10a		1			
	b	Less cost of goods sold			10b	· · ·	<u> </u>			
	C	Net income or (loss) from s	ales o	f inventor		<b>&gt;</b>				
5						Business Code				
eor re	11a									
ant	b				- <b>-</b> -		<u> </u>			
cellaneo Revenue	С	•••••					<del> </del>			
Miscellaneous Revenue	d	All other revenue				L	<del> </del>			
		Total. Add lines 11a-11d		<del></del>			<del> </del>			
	12	Total revenue, See instruct	tione			<b>-</b>	1 44 428	16 221		ı

Secti	on 501(c)(3) and 501(c)(4) organizations must complete all		· <del>-</del>	omplete column (A)	
	Check if Schedule O contains a response or note	to any line in this Pa	rt IX		
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				1
	domestic governments See Part IV, line 21	1,400	1,400		
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22		·		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16			<del> </del>	
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	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)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions).				
9	Other employee benefits	1			
10	Payroll taxes				
11	Fees for services (nonemployees)				
a	Management	26	26		
b	Legal .	500		500	
C	Accounting	300		500	
d	Lobbying Professional fundraising services. See Part IV, line 17				
e f	Investment management fees.				
•	Other (If line 11g amount exceeds 10% of line 25, column	-			
g	· ·				
42	(A) amount, list line 11g expenses on Schedule O ) Advertising and promotion	2,379	2,379		
12	Office expenses	563	2,319	563	
13 14	Information technology	378	378		
15	Royalties	3,0	370		
16	Occupancy .	688	688		
17	Travel	5,025	5,025		
18	Payments of travel or entertainment expenses	0,020	5,020		
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings		·		
20	Interest .		·	<del></del>	· · · · · · · · · · · · · · · · · · ·
21	Payments to affiliates				<del></del>
22	Depreciation, depletion, and amortization	******			
23	Insurance				
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e If				
	line 24e amount exceeds 10% of line 25, column				1
	(A) amount, list line 24e expenses on Schedule O)				
а	Event Production Costs	31,547	31,547		
b	Printing	2,016	2,016		
С					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	44,522	43,459	1,063	
26	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs			İ	
	from a combined educational campaign and				
	fundraising solicitation Check here ► if				
	following SOP 98-2 (ASC 958-720)	1			

Part X Balance Sheet

		Check if Schedule O contains a response or note	e to any line in this Part X			
			(A) Beginning of year			(B) End of year
	1	Cash—non-interest-bearing		137	1	193
	2	Savings and temporary cash investments	· ·		2	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net .		150	4	
	5	Loans and other receivables from any current or form	ner officer, director,			
		trustee, key employee, creator or founder, substantia	al contributor, or 35%			
		controlled entity or family member of any of these pe	ersons		5	
	6	Loans and other receivables from other disqualified pe	ersons (as defined			
		under section 4958(f)(1)), and persons described in se	ection 4958(c)(3)(B)		6	
Assets	7	Notes and loans receivable, net			7	
SS1	8	Inventories for sale or use .			8	
⋖	9	Prepaid expenses and deferred charges .			9	
	10a	Land, buildings, and equipment cost or				
		other basis Complete Part VI of Schedule D 10	a			
	b	Less accumulated depreciation 10	b		10c	
	11	Investments—publicly traded securities		_	11	
	12	Investments—other securities See Part IV, line 11		_	12	
	13	Investments—program-related See Part IV, line 11			13	· · · · · · · · · · · · · · · · · · ·
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equal lin	e 33)	287	16	193
	17	Accounts payable and accrued expenses		_	17	
	18	Grants payable .		_	18	
	19	Deferred revenue		_	19	
	20	Tax-exempt bond liabilities .			20	
	21	Escrow or custodial account liability Complete Part			21	
Liabilities	22	Loans and other payables to any current or former of	• • • • • • • • • • • • • • • • • • •	İ		
ilit		trustee, key employee, creator or founder, substantia				
iat		controlled entity or family member of any of these pe		-	22	
_	23	Secured mortgages and notes payable to unrelated		$\dashv$	23	<del></del>
	24	Unsecured notes and loans payable to unrelated thin		$\dashv$	24	<del></del>
	25	Other liabilities (including federal income tax, payabl				
	1	parties, and other liabilities not included on lines 17-	-24) Complete	Ī		
		Part X of Schedule D		$\dashv$	25	
	26	Total liabilities. Add lines 17 through 25		$\dashv$	26	7
es		Organizations that follow FASB ASC 958, check h	nere ► X			
anc		and complete lines 27, 28, 32, and 33.				
3ali	27	Net assets without donor restrictions		287	27	193
d E	28	Net assets with donor restrictions			28	
'n		Organizations that do not follow FASB ASC 958,	check here ► L_			
۶r F		and complete lines 29 through 33.				
ts c	29	Capital stock or trust principal, or current funds	· • •		29	
se	30	Paid-in or capital surplus, or land, building, or equipr			30	
As	31	Retained earnings, endowment, accumulated incom	<del></del>		31	
Net Assets or Fund Balances	32	Total net assets or fund balances		287	32	193
	33	Total liabilities and net assets/fund balances		287	33	193

orm !	990 (2019) West Virginia Jazz Society Inc	27-	1353750	Pag	ge <b>12</b>
Part	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		44	1,428
2	Total expenses (must equal Part IX, column (A), line 25)	2		44	1,522
3	Revenue less expenses. Subtract line 2 from line 1	3		-	-94
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4			287
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10			193
Part	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				Ш_
1	Accounting method used to prepare the Form 990 X Cash Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," explain in  Schedule O	<del></del>	-	Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or			-	
	reviewed on a separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
h	Were the organization's financial statements audited by an independent accountant?		2b		X
b	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a		20		<del>  ^</del> -
	separate basis, consolidated basis, or both				
			İ		
	Separate basis Donsolidated basis Both consolidated and separate basis	_			l i
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of	f	-		الـــــا
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain on				
2-	Schedule O				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in		_		
<b>L</b>	the Single Audit Act and OMB Circular A-133?  If "Yes " did the ergenization undergo the required sudit or sudite? If the ergenization did not undergo the		3a		<b>—</b>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		26		
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	900	(2019)
			Form	ココリ	(2019)

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

## **Public Charity Status and Public Support**

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to www.irs.gov/Form990 for instructions and the latest information. Employer identification number

Open to Public Inspection

Name of the organization Employer identification number						
Vest Virginia Jazz Society Inc 27-1353750						
Part I Reason for Public Cha						
The organization is not a private founda  1 A church, convention of church						$\wedge \alpha$
2 A school described in section	170(b)(1)(A)(ii). (Att	ach Schedule E (Form	990 or 99	90-EZ))	(	
3 A hospital or a cooperative hos	spital service organiz	zation described in <b>sec</b>	tion 170(	b)(1)(A)(ii	i).	•
4 A medical research organization hospital's name, city, and state		nction with a hospital d	lescribed i	n <b>section</b>	170(b)(1)(A)(iii). Er	nter the
5 An organization operated for the section 170(b)(1)(A)(iv). (Con		ge or university owned	or operate	ed by a go	vernmental unit desc	cribed in
6 A federal, state, or local gover	nment or governmer	ntal unit described in <b>s</b> e	ection 170	)(b)(1)(A)(	(v).	
7 An organization that normally described in section 170(b)(1			m a gove	rnmental ı	unit or from the gene	ral public
8 A community trust described in	section 170(b)(1)(	A)(vi). (Complete Part	II )			
9 An agricultural research organ or university or a non-land-grauniversity						
10 X An organization that normally receipts from activities related support from gross investment acquired by the organization a	to its exempt function to its exempt function to its exempt function to its exempt function in the its	ons—subject to certain led business taxable in	exception come (les	s, and (2) s section :	no more than 33 1/3 511 tax) from busine	3% of its
11 An organization organized and	d operated exclusive	ly to test for public safe	ety See se	ection 509	9(a)(4).	
12 An organization organized and of one or more publicly support Check the box in lines 12a three.	rted organizations de	escribed in section 509	(a)(1) or	section 50	09(a)(2). See section	n 509(a)(3).
a Type I. A supporting organithe supported organization organization You must co	zation operated, sup (s) the power to regumplete Part IV, Sect	pervised, or controlled but all arly appoint or elect a tions A and B.	oy its supp majority (	orted orga of the dire	anization(s), typically ctors or trustees of th	y by giving he supporting
b Type II. A supporting organ control or management of t organization(s) You must	he supporting organ complete Part IV, S	ization vested in the sa ections A and C.	ıme perso	ns that co	ntrol or manage the	supported
c Type III functionally integrits supported organization(s						rated with,
d Type III non-functionally i that is not functionally integ	ntegrated. A suppor	ting organization operation generally must sati	ated in cor	nnection with	rith its supported org quirement and an att	
requirement (see instruction e Check this box if the organic	•	· ·				ا ا ا
functionally integrated, or T					, , , , , , , , , , , , , , , , , , ,	O 111
f Enter the number of supported						
g Provide the following information  (i) Name of supported organization	on about the support		(ne) to the c	coopization	(v) Amount of manatany	(vi) Amount of
(i) Name of supported organization	(11) 21N	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in you	organization or governing ment?	(v) Amount of monetary support (see instructions)	other support (see instructions)
			Yes	No		
(A)			100	-110		
(B)						
(C)						
(D)					-	
(E)						
Total						

-	Fublic Support percentage	ioi zo ia (iine c	Committee by	y line 11, column (1))
_			/	

177

5 Public support percentage from 2018 Schedule A, Part II, line 14

15

- 16a 33 1/3% support test—2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization
  - b 33 1/3% support test—2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization
- 17a 10%-facts-and-circumstances test—2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 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 supported organization.
  - b 10%-facts-and-circumstances test—2018. 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 supported organization.
- 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received (Do not include any "unusual grants ")	14,350	42,930	75,664	56,497	28,207	217,648
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	41,752	9,104	16,684	11,861	16,221	95,622
3	Gross receipts from activities that are not an						<del></del>
	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 .	56,102	52,034	92,348	68,358	44,428	313,270
7a	Amounts included on lines 1, 2, and 3						<u> </u>
	received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year		•				
c	Add lines 7a and 7b			•			********
8	Public support (Subtract line 7c from						
·	line 6)						313,270
Sec	ction B. Total Support		<del></del>	<u></u>		<u></u> -	010,270
	endar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6	56,102	52,034	92,348	68,358	44,428	313,270
	Gross income from interest, dividends,		02,007	02,010	00,000	11,120	010,210
100	payments received on securities loans, rents,						
	royalties, and income from similar sources						
h	Unrelated business taxable income (less						
D	section 511 taxes) from businesses						
	acquired after June 30, 1975		İ				
_	Add lines 10a and 10b						
11	Net income from unrelated business			i			
	activities not included in line 10b, whether						
40	or not the business is regularly carried on			-			
12	-						
	loss from the sale of capital assets		1				
4.0	(Explain in Part VI )			-			
13	Total support. (Add lines 9, 10c, 11,	50 400	50.00	20 242	22 25-	44.55	040 0=0
	and 12 )	56,102	52,034	92,348	68,358	44,428	313,270
14	First five years. If the Form 990 is for the or	ganization's first, se	econa, thira, tourth	, or fiπh tax year as	s a section 501(c)(	3)	
	organization, check this box and stop here					<del></del> .	
Sec	ction C. Computation of Public Sur						
15	Public support percentage for 2019 (line 8, co	• • •	-	f))		15	100 00%
<u>16</u>	Public support percentage from 2018 Schedu					16	100 00%
Sec	ction D. Computation of Investmen						
17	Investment income percentage for 2019 (line			olumn (f))		17	
18	Investment income percentage from 2018 Sc				Į	18	
19a	33 1/3% support tests—2019. If the organiz					and line 17 is	<del></del>
	not more than 33 1/3%, check this box and s	-					<b>▶</b> [X
b	33 1/3% support tests—2018. If the organization					•	. <del></del>
	line 18 is not more than 33 1/3%, check this l						▶ <u> </u>
20	Private foundation. If the organization did n	of check a boy on I	ine 14 192 or 194	check this how an	d see instructions		<u>►</u> I

### 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. D. and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V)

Section A. Al	l Supporting	Organizations
---------------	--------------	---------------

Sect	ion A. All Supporting Organizations			1
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing			
	documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by	-		
_	class or purpose, describe the designation If historic and continuing relationship, explain	1		<del>                                     </del>
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 <b>Part VI</b> how the organization determined that the supported	<del></del> -		
	organization was described in section 509(a)(1) or (2)	2	ļ	<u> </u>
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer	<u> </u>		<b> </b> -
	(b) and (c) below	3a		<b></b> -
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	<del></del>		
	organization made the determination	3b_		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)	<u> </u>		<del></del> -
	(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3c		<u> </u>
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	4a		-
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	4b		
С	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)	<del></del>		
_	purposes	4c		
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	<del></del>		
	was accomplished (such as by amendment to the organizing document)	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already	<del></del>		
	designated in the organization's organizing document?	5b		
C	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
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? <i>If "Yes," provide detail in Part VI.</i>	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			
	(as 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)	<del></del>		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?	7		
0	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more			
Ja	disqualified persons as defined in section 4946 (other than foundation managers and organizations described			
		<del></del>		
b	In section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .	9a		
D	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 <b>Part VI</b> .	Qb.		
_	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit	9b		1
С	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI</b> .			
100	· · · · · · · · · · · · · · · · · · ·	9c		
10a	g			
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated	102	—	

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 )

Schedu	le A (Form 990 or 990-EZ) 2019 West Virginia Jazz Society Inc	27-1353750	P	age 5
Part	Supporting Organizations (continued)			1
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	ļ,		
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	110	<del>                                     </del>	<u> </u>
<b>h</b>	below, the governing body of a supported organization?  A family member of a person described in (a) above?	11a 11b	<del> </del>	-
b	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Pa		<b>-</b>	-
Secti	on B. Type I Supporting Organizations	11 VI. [110	l	1
0000	on b. type reappoining organizations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	e	ļ	
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised,	i i	ľ	
	controlled the organization's activities if the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the support	ted		
	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			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Personal Controlled the supporting organization?	art		
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,		<u> </u>	
	supervised, or controlled the supporting organization	2	<u> </u>	L
Secti	on C. Type II Supporting Organizations			,
		<del></del>	Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the director		1	l ,
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or manage		<del> </del>	
Cook	the supported organization(s)	1		
Secti	on 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		162	NO
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of			
	organization's governing documents in effect on the date of notification, to the extent not previously provide		<del>                                     </del>	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the support			
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part \	l.		
	the organization maintained a close and continuous working relationship with the supported organization(			
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard	3		
Secti	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the ye	ar ( <b>see instruction</b>	s)	
а	The organization satisfied the Activities Test Complete line 2 below			
b	The organization is the parent of each of its supported organizations. Complete line 3 below			
С	The organization supported a governmental entity Describe in Part VI how you supported a governmental	nt entity (see instruc	tions)	
2	Activities Test Answer (a) and (b) below.	• •	Yes	No
ے a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes	of	162	NO
a	the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify</b>			
	those supported organizations and explain how these activities directly furthered their exempt purpos			
	how the organization was responsive to those supported organizations, and how the organization determine	· .		
	that these activities constituted substantially all of its activities	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or m			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI to			
	reasons for the organization's position that its supported organization(s) would have engaged in these	<u>}</u>		
	activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			]
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of	f each		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this rega			

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 qualifyin			
instructions. All other Type III non-functionally integrated supporting organ	nizatio	ns must complete Section	ons A through E
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries 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	,	··- · · · · · · · · · · · · · · · ·	1 4
instructions for short tax year or assets held for part of year)			<u> </u>
a 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		•	
factors (explain in detail in Part VI)			
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 (subtract line 4 from line 3)	5		
6 Multiply line 5 by 035	6		
7 Recoveries of prior-year distributions	7		
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-functional	ly inte	grated Type III supportin	g organization (see
instructions)	•		- <b>-</b> `

27-1353750

Part	y · Type III Non-Functionally Integrated 509(a)(3	Supporting Organi	zations (continued)	
Section	nn D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes		
2	Amounts paid to perform activity that directly furthers exem			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpos	ses of supported organization	ations	
4	Amounts paid to acquire exempt-use assets	···	<u> </u>	<u> </u>
5	Qualified set-aside amounts (prior IRS approval required)	=-		
	Other distributions (describe in Part VI) See instructions			
7	Total annual distributions. Add lines 1 through 6		<u> </u>	
8	Distributions to attentive supported organizations to which t	he organization is respoi	nsive	
	(provide details in Part VI) See instructions	·	<del></del>	
9	Distributable amount for 2019 from Section C, line 6		<del> </del>	
10	Line 8 amount divided by line 9 amount	<del>,</del>		0 000
8	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019			
	(reasonable cause required—explain in Part VI) See			
	ınstructions			
3	Excess distributions carryover, if any, to 2019			
а	From 2014			
	From 2015			
	From 2016			
	From 2017			
	From 2018 .			
	Total of lines 3a through e			
	Applied to underdistributions of prior years		***************************************	
<u>h</u>	Applied to 2019 distributable amount			
<u>i</u> _	Carryover from 2014 not applied (see instructions)			
	Remainder Subtract lines 3g, 3h, and 3i from 3f		·	***************************************
4	Distributions for 2019 from			
	Section D, line 7 \$			
	Applied to underdistributions of prior years			٠ و.
	Applied to 2019 distributable amount			
	Remainder Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2019, if			
	any Subtract lines 3g and 4a from line 2 For result			
	greater than zero, explain in Part VI. See instructions			
6	Remaining underdistributions for 2019 Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI See instructions			
7	Excess distributions carryover to 2020. Add lines 3j			
	and 4c			<del></del>
8	Breakdown of line 7		<del></del>	
<u>а</u>	Excess from 2015			
<u>b</u>	Excess from 2016			
<u>C</u>	Excess from 2017			
<u>d</u> _	Excess from 2018			
е	Excess from 2019	į l		

### **SCHEDULE O** (Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

Internal Revenue Service

### 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.



Open to Public Inspection

Employer identification number

West Virginia Jazz Society Inc	27-1353750
Form 990, Part VI, Section B, Line 11B Form 990 distributed at board meeting subject to open	
discussion	
Form 990, Part VI, Section C, Line 19 All documents are made available to the public upon	
reguest	
·································	