2016 Exempt Org. Return prepared for:

ATLANTA MUSIC PROJECT INC. 390 NORTH MAIN STREET ALPHARETTA, GA 30009

MCINTEE FUSARO DEL CORRAL LLC 277 FAIRFIELD RD STE 300 FAIRFIELD, NJ 07004-1942

MCINTEE FUSARO DEL CORRAL LLC 277 FAIRFIELD RD STE 300 FAIRFIELD, NJ 07004-1942 973-882-0300

April 17, 2018

DANTES RAMEAU ATLANTA MUSIC PROJECT INC. 390 NORTH MAIN STREET ALPHARETTA, GA 30009

Dear DANTES:

Your 2016 Federal Return of Organization Exempt from Income Tax will be electronically filed with the Internal Revenue Service upon receipt of a signed Form 8879-EO - IRS e-file Signature Authorization. No tax is payable with the filing of this return.

Please be sure to call us if you have any questions.

Sincerely,

ISABEL DEL CORRAL

Form **8879-EO**

IRS e-file Signature Authorization for an Exempt Organization

For calendar year 2016, or fiscal year beginning 8/01, 2016, and ending 7/31, 20 2017

► Information about Form 8879-EO and its instructions is at www.irs.gov/form8879eo.

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Department of the Treasury Internal Revenue Service ► Do not send to the IRS. Keep for your records.

2016

OMB No. 1545-1878

Employer identification number 80-0557088 ATLANTA MUSIC PROJECT INC. DANTES RAMEAU EXECUTIVE DIR. Part I Type of Return and Return Information (Whole Dollars Only) Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than 1 line in Part I. 1 a Form 990 check here.... ► X b Total revenue, if any (Form 990, Part VIII, column (A), line 12)...... 1 b 2a Form 990-EZ check here b Total revenue, if any (Form 990-EZ, line 9)...... 2b Part II Declaration and Signature Authorization of Officer Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2016 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal. Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2016 Officer's PIN: check one box only MCINTEE FUSARO DEL CORRAL LLC to enter my PIN X I authorize as my signature Enter five numbers, but on the organization's tax year 2016 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen. As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2016 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. Officer's signature > Date ► Part III | Certification and Authentication **ERO's EFIN/PIN.** Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN..... 20882507087 I certify that the above numeric entry is my PIN, which is my signature on the 2016 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. ISABEL DEL CORRAL ERO's signature Date ▶ ERO Must Retain This Form — See Instructions Do Not Submit This Form To the IRS Unless Requested To Do So

BAA For Paperwork Reduction Act Notice, see instructions.

Form **8879-EO** (2016)

Form **990**

Return of Organization Exempt From Income Tax

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.

OMB No. 1545-0047

Open to Public

Depa	artment o nal Reve	of the Treasury enue Service		► Information	n about Form S	990 and its ins	tructions is at	www.irs.gov	form990.			Inspection	
Α	For th	ne 2016 calenda	r year, or ta	x year begir	ning 8/	01	, 201	6, and ending	7/3	31		, 2017	_
В	Check it	f applicable: C								D Employ	er ident	ification number	
	Ad			MUSIC PR		NC.				80-0	0557	088	
	Na			H MAIN S						E Telepho	ne num	ber	
	Init	tial return A.	LPHARE'I"	TA, GA 3	30009					(20	3) 8	87-5108	
	Fina	al return/terminated											
	Am	nended return								G Gross re		,	
	Ар	pplication pending F	Name and ad	Idress of principa	al officer: PH	ILIP JUI	RAVEL		、	a group retur			
		Si	AME AS (C ABOVE			, ,		H(b) Are all If 'No,'	subordinates attach a list.	include (see ins	d? Yes No)
<u> </u>	Tax-e	<u> </u>	501(c)(3)	501(c) (, ,	insert no.)	4947(a)(1)	or 527					
J	Web			MUSICPR	OJECT.OI	RG			• •	exemption nu			
K		5	Corporation	Trust	Association	Other ►		Year of formation	on: 2010) M s	State of I	legal domicile: GA	_
Pa	rt I	Summary	Alaa ayaaai	ationle mise		ai amifi a amt	a akir riki a a r m/	THORTO		A.T. (211A.)	NOT	DII DDOIITDING	_
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Governance	2	Check this box	► if the	e organizatio	n discontinu	ued its oper	ations or dis	sposed of mo	re than 2	5% of its	net as	 ssets.	_
ၓ		Number of votin									3	12	2
Activities &		Number of indep									4	12	
jŧ		Total number of Total number of									5	23	
Ę		Total unrelated									6 7a	3(
٩		Net unrelated by									7b	0	
						, ,				rior Year		Current Year	<u>.</u>
	8	Contributions ar	nd grants (F	Part VIII, line	: 1h)					740,6	571.	708,746	-
nue	9	Program service	e revenue (F	Part VIII, line	e 2g)					96,9		103,162	
Revenue		Investment inco	•		•	-				1	.52.	61	
Œ		Other revenue (
		Total revenue –								837,7	36.	811,969	•
		Grants and simi Benefits paid to											_
		Salaries, other								201 7		202 221	_
es										291,7	08.	393,231	•
Expenses		Professional fur											
х		Total fundraising		•		_		7,123.					
_		Other expenses	-			•				566,9		459,668	
		Total expenses.								858,6		852,899	
		Revenue less ex	xpenses. St	ubtract line i	18 from line	12				-20,9		-40,930	•
ts o	20	Total assets (Pa	art Y ling 1	6)						ng of Curren		End of Year	_
4sse Bala	21	Total liabilities (•						161,3 33,0		160,456 47,142	
Net Assets or Fund Balances	22	Net assets or fu	,	,						•		•	
	rt II	Signature		3. Subtract i	ine Zi nom	11116 20				128,3	30.	113,314	<u>-</u>
				vamined this ret	urn including a	companying se	shedules and sta	tements and to t	ne hest of m	v knowledge	and hel	ief it is true correct and	_
comp	olete. De	eclaration of preparer	(other than offi	cer) is based on	all information	of which prepar	er has any knov	vledge.	10 0031 01 111	ly Knowledge	and bei	ief, it is true, correct, and	
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		ı	F.V I K E	TELD N	T 07004-	- 1 4 4 7				Phone no.	u / ٦.	-882-0300	

May the IRS discuss this return with the preparer shown above? (see instructions).....

X Yes

Part III Statement of Program Service Accomplishments Choke if Schedule Occanisates areapress on nets on any line in this Part III. 1 Birelty describe the organization's mission: 10 INSPIRE SOCIAL CHANGE BY PROVIDING ATLANTA'S UNDERSERVED YOUTH THE OPPORTUNITY TO LEARN AND PERFORM MUSIC IN ORCHESTRAS AND CHOIRS. 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 900 or 900-E27. 1 "Yes, identifie these new services on Schedule O. 3 Did the organization crease conducting, or make significant changes in how it conducts, any program services?	Form	1 990 (2016) ATLANTA MUSIC PROJECT INC.	80-0557088	Page 2
1 Briefly describe the organization's mission: TO INSPIRE SOCIAL CHANGE BY PROVIDING ATLANTA'S UNDERSERVED YOUTH THE OPPORTUNITY TO LEARN AND PERFORM MUSIC IN ORCHESTRAS AND CHOIRS. 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E2? 8 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E2? 8 If Yes, describe these new services in Schedule 0. 9 Did the organization program services on Schedule 0. 10 Every describe these changes on Schedule 0. 11 Pers, describe these changes on Schedule 0. 12 Describe the organizations program service accomplishments for each of its three largest program services, as measured by expenses. Section 501 (c)(d) and 301 (c)(Par			
TO INSPIRE SOCIAL. CHANCE BY PROVIDING ATLANTA'S UNDERSERVED YOUTH THE OPPORTUNITY TO LEARN AND PERFORM MUSIC IN ORCHESTRAS AND CHOIRS. 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E27. 3 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E27. 4 Describe the organization cease conducting, or make significant changes in how it conducts, any program services? 4 Pees No If Yes, 'describe these changes on Schedule O. 4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(cl) and 501(cl) organizations are required to report the amount of grants and affociations to others, the listed expenses, and revenue, if any, for each program service ecomplishments for each of its three largest program services. as measured by expenses, and revenue, if any, for each program service ecomplishments for each of its three largest program services. Because the value of the service in t		· · · · · · · · · · · · · · · · · · ·		
LEARN AND PERFORM MUSIC IN ORCHESTRAS AND CHOIRS. 2. Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E22. If Yes, describe these new services on Schedule O. If Yes, describe these changes on Schedule O. Describe the organizations program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for such program service reported. 4 a (Code:) (Expenses \$ 708, 755, including grants of \$) (Revenue \$) THE ORGANIZATION PROVIDES INTENSIVE MUSIC EDUCATION TO UNDERSERVED YOUTH IN THEIR MEIGHBORHOOD IN THE METROPOLITAN ATLANTA AREA, THEY CONDUCT ORGERETRA, CHORR, MUSICIANSHIP AND GROUP LESSONS AND AN AFRICAN DRIM AND DANCE WORKSHOP. PERFORMANCES. ARE HELD REGULARLY AND STUDENTS ATTEND CULTURAL EVENTS IN AND AROUND ATLANTA. 4 b (Code:) (Expenses \$	1	·	יט ייטי איי	יייע ייי
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Form 990 or 990-E27.		LEARN AND FERFORM MOSIC IN ORCHESTRAS AND CHOIRS.		
Form 990 or 990-E27.				
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Part IV | 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	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? <i>If 'Yes,' 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 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 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If 'Yes,' complete Schedule D, Part II</i>	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? <i>If 'Yes,' complete Schedule D, Part IV</i> .	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or 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, VII, VIII, IX, or X as applicable.			
	a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	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? <i>If 'Yes,' complete Schedule D, Part VII.</i>	11 b		Х
	c 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.	11 c		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.	11 d		Х
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Χ	
	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	11 f	Х	
12	a 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? <i>If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	12b		Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	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? <i>If 'Yes,' complete Schedule F, Parts I and IV</i>	14b		X
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 on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		Х
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

Form 990 (2016) ATLANTA MUSIC PROJECT INC. Part IV | Checklist of Required Schedules (continued)

			Yes	No
20 a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		Χ
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		Х
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		Х
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? <i>If 'Yes,' complete Schedule J.</i>	23		Х
24 a	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a	24a		Х
ŀ	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		
(d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	a 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		Х
ŀ	s 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		Х
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		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III.	27		Х
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):			
á	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
ŀ	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
(An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		Х
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		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If 'Yes,' complete Schedule R, Part I</i>	33		Х
	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		Х
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
ŀ	olf 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2.	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If 'Yes,' complete Schedule R, Part VI</i>	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Х	

Form 990 (2016) ATLANTA MUSIC PROJECT INC. Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V				. 🔲
	·			Yes	No
1 a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 61			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and r	eportable gaming			
	(gambling) winnings to prize winners?	 1	1 c	Х	
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 23			
h	If at least one is reported on line 2a, did the organization file all required federal employmen		2 b	Х	
L	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see in:		20	71	
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year	·	3 a		Х
	If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O		3 b		
	, , , , , , , , , , , , , , , , , , , ,				
	At any time during the calendar year, did the organization have an interest in, or a signature or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account ac	inancial account)?	4 a		X
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	· ·			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax	•	5 a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelt		5 b		X
C	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		5 c		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, a solicit any contributions that were not tax deductible as charitable contributions?	nd did the organization	6 a		Х
	If 'Yes,' did the organization include with every solicitation an express statement that such contribut not tax deductible?	ions or gifts were	6 h		
7	Organizations that may receive deductible contributions under section 170(c).		6 b		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and p	artly for goods and	7.		X
L	services provided to the payor?		7 a 7 b		Λ
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it v		7 0		
٠	Form 8282?	· · · · · · · · · · · · · · · · · · ·	7с		X
d	If 'Yes,' indicate the number of Forms 8282 filed during the year	7 d			
	$\label{eq:discrete_problem} \mbox{Did the organization receive any funds, directly or indirectly, to pay premiums on a personal}$		7 e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal ben		7 f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file f as required?	Form 8899	7 g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the Form 1098-C?	organization file a	7 h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the sponsoring			
	3 3 3		8		
9	Sponsoring organizations maintaining donor advised funds.				
	Did the sponsoring organization make any taxable distributions under section 4966?		9 a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related per	son?	9 b		
	Section 501(c)(7) organizations. Enter:	10 -			
	Initiation fees and capital contributions included on Part VIII, line 12	10a 10b			
	Section 501(c)(12) organizations. Enter:	וסטו			
	Gross income from members or shareholders.	11 a			
	Gross income from other sources (Do not net amounts due or paid to other sources				
12 a	against amounts due or received from them.)	11b	12a		
	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	ı			
	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note. See the instructions for additional information the organization must report on Schedul				
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.				
	· · · · · · · · · · · · · · · · · · ·	13b			
	Enter the amount of reserves on hand	13c	14-		v
	Did the organization receive any payments for indoor tanning services during the tax year?		14a		X
tΩΛΛ	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in S	Scriedule O	14b	990 (2016)

Part VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI. Section A. Governing Body and Management No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year. 12 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. **b** Enter the number of voting members included in line 1a, above, who are independent ... 12 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 Χ Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 Χ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Χ 4 X Did the organization become aware during the year of a significant diversion of the organization's assets?.... 5 Did the organization have members or stockholders?..... Χ 6 7 a 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?..... 7 a Χ **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... Χ 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?.... Χ 8 a X **b** Each committee with authority to act on behalf of the governing body?..... 8 b 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O..... 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10 a Did the organization have local chapters, branches, or affiliates?.... Χ 10 a 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? 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... Χ b Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O Χ 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13...... 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b Χ to conflicts?..... Χ 12c 13 Did the organization have a written whistleblower policy?..... 13 Χ 14 Did the organization have a written document retention and destruction policy?..... Χ 14 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? a The organization's CEO, Executive Director, or top management official.. SEE . SCHEDULE..Q...... 15 a Χ **b** Other officers or key employees of the organization..... 15 b X If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?..... Χ 16 a **b** If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its 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?. 16 b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed NONE 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 X Upon request Other (explain in Schedule O) Describe in Schedule 0 whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. SEE SCHEDULE O State the name, address, and telephone number of the person who possesses the organization's books and records:

ALPHARETTA GA 30009 (770) 475-9348

JURAVEL & COMPANY, LLC 390 N MAIN STREET

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.....

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

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

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

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

				(C)						
(A) Name and Title	(B) Average hours	Pos thar is	s both	an o	ot che unles fficer truste	eck moss personal and a see)	re	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) JOHN SPARROW	2									
TRUSTEE	0	Х						0.	0.	0.
(2) AISHA MOODY	40									
TRST/EXOFF/EMPL	0	Χ						60,067.	0.	0.
(3) JIM BARKSDALE	2									
TRUSTEE	0	Χ						0.	0.	0.
(4) DOUG HOOKER	2									
TRUSTEE	0	Χ						0.	0.	0.
(5) JOYCE MOORE	2							_		_
TRUSTEE	0	Χ						0.	0.	0.
(6) ALCIDES RODRIGUEZ	2							_		
TRUSTEE	0	Χ						0.	0.	0.
(7) STEVE WADLEY	2	ļ								
TRUSTEE	0	Χ						0.	0.	0.
(8) JAMES WATSON	2									•
TRUSTEE	0	Χ						0.	0.	0.
(9) SANDRA CHAMBERS	0	1,,						•	•	•
DIRECTOR	0	Χ						0.	0.	0.
(10) PHILIP JURAVEL	5			3.7				0	0	^
CHAIRMAN (11) DANIELG DANIELL	0			Χ				0.	0.	0.
(11) DANTES RAMEAU	$-\frac{40}{0}$	ł		3.7				70 400	0	0
EXEC DIR/SECTY	0	-		Χ				72,403.	0.	0.
<u>(12)</u> STEVE TYLER TREASURER	<u>5_</u> _			Х				0.	0	0
(13)	U			Λ				0.	0.	0.
(13)		ł								
(14)	1		\vdash							
22										

Part VII	Section A. Officers, Directors, Tru	1	Key	Em	ıplo	oye	es,	and	d Highest Com	pensated Emp	oloyee	S (conti	inued)
		(B)			((•							
	(A) Name and title	Average hours per week	box	, unle cer ar	ess pe nd a d	erson direct	than is both or/trus	h an tee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	amo	(F) stimated unt of ot	ther
		(list any hours for related organiza - tions below	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	or	rom the ganization of related	on ed
		dotted line)	èe	stee			nsated						
(15)													
(16)													
(17)													
(18)													
(19)													
(20)													
(21)													
(22)													
(23)													
(24)													
(25)													
1 b Sub-1	total							>	132,470.	0.			0.
	from continuation sheets to Part VII, Secti (add lines 1b and 1c)							>	0. 132,470.	0.			0.
2 Total	number of individuals (including but not limited							ved				n	
110111	the organization 0											Yes	No
3 Did the on lin	ne organization list any former officer, direct ne 1a? <i>If 'Yes,' complete Schedule J for suc</i>	tor, or tru h <i>individu</i>	stee, ıal	key	em	nploy	ee,	or h	nighest compensa	ted employee	3		Х
4 For a the o	ny individual listed on line 1a, is the sum of rganization and related organizations greate individual.	reportab r than \$1	le co 50,00	mpe 00?	ensa If '\	tion es,	and com	oth <i>ple</i>	er compensation te Schedule J for	from	4		X
5 Did a	iny person listed on line 1a receive or accruervices rendered to the organization? If 'Yes	e comper	satio	n fr	om	anv	unre	late	ed organization or	individual			X
	B. Independent Contractors						. 1	11	A	¢100 000 -f			
comp	plete this table for your five highest compen ensation from the organization. Report compen	sation for	the c	alen	dar <u>j</u>	year	endi	ng v	vith or within the or	ganization's tax yea			
	(A) Name and business add	ress							Description of	of services	Compe	C) ensatio	on
	number of independent contractors (including b,000 of compensation from the organization		ited to	o tho	se I	isted	d abo	ve)	who received more	than			

		Check if Schedule O contains a response or note to a	ny line in this Part V	TIL		
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts		Federated campaigns 1 a				
Sra		Membership dues				
ts, (Fundraising events	_			
<u>ਕੂ</u>		Related organizations				
ins,		Government grants (contributions) 1 e 54,000	<u>. </u>			
Contributions, Gifts, Grants and Other Similar Amounts		All other contributions, gifts, grants, and similar amounts not included above 1f 654,746	<u></u>			
a st	_	Noncash contributions included in lines 1a-1f: \$				
<u>ತ್ತ </u>	h	Total. Add lines 1a-1f	708,746.			
Program Service Revenue	2 2		102 162	102 162		
ě	b	MUSIC PROGRAM	103,162.	103,162.		
Se F	c					
eΖ	d					
ΒS	е	' -				
gra	f	All other program service revenue				
Pro	g	Total. Add lines 2a-2f	103,162.			
	3	Investment income (including dividends, interest and				
	_	other similar amounts)	61.			61.
	4	Income from investment of tax-exempt bond proceeds	[
	5	Royalties				
	6 2	Gross rents	_			
		Less: rental expenses	_			
		Rental income or (loss)	_			
		Net rental income or (loss)	<u> </u>			
		Gross amount from sales of (i) Securities (ii) Other				
	/ a	assets other than inventory				
	b	Less: cost or other basis and sales expenses				
	С	Gain or (loss)				
	d	Net gain or (loss)	-			
Other Revenue	8 a	Gross income from fundraising events (not including \$				
Ķ		of contributions reported on line 1c).				
æ		See Part IV, line 18 a				
હ	b	Less: direct expenses b				
₹	С	Net income or (loss) from fundraising events				
	9 a	Gross income from gaming activities. See Part IV, line 19				
	b	Less: direct expenses				
	С	Net income or (loss) from gaming activities	-			
	10a	Gross sales of inventory, less returns				
		and allowances a				
		Less: cost of goods sold b				
	С	Net income or (loss) from sales of inventory				
	11 -	Miscellaneous Revenue Business Code				
	11 a		1			
	b					
	۲4 C	All other revenue	+			
			-			
		Total revenue. See instructions.	811,969.	103,162.	0.	61.
			011,000.	±00,±02.	0.	01.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Do	not include amounts reported on lines	(A) Total expenses	(B)	(C)	(D)
6b,	7b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundráising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
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				
4 5	Benefits paid to or for members				
6	trustees, and key employees	133,782.	82,147.	51,635.	0.
Ū	disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	218,700.	165,413.	53,287.	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	13,927.	9,749.	4,178.	
10	Payroll taxes	26,822.	18,775.	8,047.	
11	Fees for services (non-employees):				
ā	Management				
	Legal Legal	2,385.	2,385.		
	: Accounting	8,750.	8,750.		
	I Lobbying				
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0.)	875.	875.		
12	Advertising and promotion	7,562.	3,781.	3,781.	
13	Office expenses	6,038.		6,038.	
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	18,152.	18,152.		
23	Insurance	15,101.	12,836.	2,265.	
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.)				
a	TEACHERS' FEES	176,048.	176,048.		
	P EVALUATIONS	67,112.	67,112.		
(53,542.	53,542.		
(40,892.	40,892.		
	All other expenses	63,211.	48,298.	7,790.	7,123.
25	Total functional expenses. Add lines 1 through 24e	852,899.	708,755.	137,021.	7,123.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

		Check if Schedule O contains a response or note to	any line	in this Part $X \dots$			
					(A) Beginning of year		(B) End of year
	1	Cash — non-interest-bearing			19,445.	1	8,632.
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net			45,083.	3	35,000.
	4	Accounts receivable, net				4	
	5	Loans and other receivables from current and former trustees, key employees, and highest compensated et Part II of Schedule L	officers, omployees	directors, . Complete		5	
	6	Loans and other receivables from other disqualified posection 4958(f)(1)), persons described in section 4958(c)(comployers and sponsoring organizations of section 501(complete beneficiary organizations (see instructions).	ersons (a 3)(B), and (9) volunt Part II o	s defined under contributing ary employees' f Schedule L		6	
ţ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
Ä	9	Prepaid expenses and deferred charges				9	
	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	168,282.			
	b	Less: accumulated depreciation	10 b	54,629.	96,837.	10 c	113,653.
	11	Investments – publicly traded securities			30,0011	11	3,171.
	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 line	34)		161,365.	16	160,456.
	17	Accounts payable and accrued expenses			33,009.	17	43,450.
	18	Grants payable	·	18	·		
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities		<u> </u>		20	
es	21	Escrow or custodial account liability. Complete Part I				21	
Liabilities	22	Loans and other payables to current and former office key employees, highest compensated employees, and Complete Part II of Schedule L	ers, direct d disquali	ors, trustees, fied persons.		22	
\Box	23	Secured mortgages and notes payable to unrelated th		<u> </u>		23	
	24	Unsecured notes and loans payable to unrelated third		<u> </u>		24	
	25	·	•				
	26	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com Total liabilities. Add lines 17 through 25			22 000	25 26	3,692. 47,142.
	20	-			33,009.	20	47,142.
ces		Organizations that follow SFAS 117 (ASC 958), check he lines 27 through 29, and lines 33 and 34.	_	_			
<u>a</u>	27	Unrestricted net assets		-	92,755.	27	104,682.
Ba	28	Temporarily restricted net assets.		-	35,601.	28	8,632.
ē	29	Permanently restricted net assets				29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), ch and complete lines 30 through 34.	^				
35	30	Capital stock or trust principal, or current funds			30		
8	31	Paid-in or capital surplus, or land, building, or equipment	ent fund.			31	
As	32	Retained earnings, endowment, accumulated income,	or other	funds		32	
fet	33	Total net assets or fund balances		_	128,356.	33	113,314.
_	34	Total liabilities and net assets/fund balances			161,365.	34	160,456.

BAA Form **990** (2016)

Pai	t XI	Reconciliation of Net Assets				
		Check if Schedule O contains a response or note to any line in this Part XI.				. X
1	Total	revenue (must equal Part VIII, column (A), line 12)	1	8	11,9	969.
2	Total	expenses (must equal Part IX, column (A), line 25)	2	8	52,8	399.
3	Rever	nue less expenses. Subtract line 2 from line 1	3	_	40,9	930.
4	Net as	ssets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1	28,3	356.
5	Net u	nrealized gains (losses) on investments	5			
6	Donat	ed services and use of facilities	6			
7	Invest	ment expenses	7			
8	Prior	period adjustments	8			
9	Other	changes in net assets or fund balances (explain in Schedule O). SEE SCHEDULE O	9		25,8	388.
10	Net as	sets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, n (B))	10	1	13,3	314.
Pai	t XII	Financial Statements and Reporting	•			
		Check if Schedule O contains a response or note to any line in this Part XII				. \square
					Yes	No
1	Accou	inting method used to prepare the Form 990: Cash X Accrual Other				
	If the in Sch	organization changed its method of accounting from a prior year or checked 'Other,' explain nedule O.				
2 8	a Were	the organization's financial statements compiled or reviewed by an independent accountant?		2 a		X
	s <u>ep</u> ar	s,' check a box below to indicate whether the financial statements for the year were compiled or reviewe ate basis, consolidated basis, or both: Separate basis	d on a			
ŀ	W ere	the organization's financial statements audited by an independent accountant?		2 b	Χ	
	If 'Yes	s,' check a box below to indicate whether the financial statements for the year were audited on a separa consolidated basis, or both:	te			
	X	Separate basis Consolidated basis Both consolidated and separate basis				
(If 'Yes reviev	' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, v, or compilation of its financial statements and selection of an independent accountant?		2 c	X	
	in Sch	organization changed either its oversight process or selection process during the tax year, explain nedule O.				
3 a	As a r Audit	esult of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Act and OMB Circular A-133?		3 a		Х
ŀ		,' did the organization undergo the required audit or audits? If the organization did not undergo the required auditis, explain why in Schedule O and describe any steps taken to undergo such audits		3 b		
BAA	1			Form	990	(2016)

TEEA0112L 11/16/16

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047 **2016**

Open to Public

Inspection

Department of the Treasury Internal Revenue Service Name of the organization Employer identification number ATLANTA MUSIC PROJECT INC. 80-0557088

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

THE C	organization is not a private iount				•	•					
1	A church, convention of church					i).					
2	A school described in section		•			174:::2					
3 4	A hospital or a cooperative h					• • •	mtor the beautifulle				
4	name, city, and state:	illon operated in con	ijunction with a nospital	uescribe	a iii sec	:uon 170(b)(1)(A)(III). ⊏	inter the nospital's				
5	An organization operated for section 170(b)(1)(A)(iv). (Co	the benefit of a col	ege or university owned	or oper	ated by	a governmental unit de	scribed in				
6	A federal, state, or local gov	•	antal unit described in s	oction 1	170/h\/1\	ΛΑ Υ(Δ)					
7	An organization that normally	receives a substantial					olic described				
8	in section 170(b)(1)(A)(vi). (A community trust described		(A)(vi). (Complete Part	11.5							
9											
3	or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:										
10	An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)										
11	An organization organized a		·	ety. See	section	ı 509(a)(4).					
12											
а	a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.										
b	b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C.										
С	Type III functionally integrated organization(s) (see instruction		ation operated in connection	n with, a	nd function	onally integrated with, its	supported				
d		rated. A supporting or organization general	rganization operated in co ly must satisfy a distribu	nnection							
е	· ·	ation received a wri	tten determination from	the IRS	that it is	a Type I, Type II, Type	e III functionally				
f											
g	Provide the following information	n about the supporte	ed organization(s).								
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	organizat	Is the tion listed governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)				
				Yes	No						
(A)											
(B)											
(B)											
(C)											
(D)											
(E)											
Total											

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support				•		
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						
Sec	tion B. Total Support			_			
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activ	ities, etc. (see ins	structions)			12	
13	First five years. If the Form 990 is organization, check this box and	for the organization stop here	n's first, second, th	nird, fourth, or fifth	tax year as a sectio	on 501(c)(3)	
Sec	tion C. Computation of Pul	olic Support P	ercentage				
14	Public support percentage for 20	16 (line 6, colum	n (f) divided by li	ne 11, column (f))	D	14	%
15	Public support percentage from 2	2015 Schedule A,	Part II, line 14.				%
16a	33-1/3% support test—2016. If the and stop here. The organization	ne organization di qualifies as a pul	id not check the lolicly supported o	oox on line 13, an organization	d line 14 is 33-1/3	3% or more, check	this box
b	33-1/3% support test—2015. If th and stop here. The organization	e organization did qualifies as a pu	d not check a box blicly supported o	on line 13 or 16a organization	a, and line 15 is 3	3-1/3% or more, ch	neck this box
17a	10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts	meets the 'facts-a	and-circumstance	s' test, check this	box and stop her	e. Explain in Part '	VI how
	10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-and	meets the 'facts-ad-circumstances'	and-circumstance test. The organiz	s' test, check this ation qualifies as	box and stop her a publicly support	re. Explain in Part 'ed organization	VI how the►
18	Private foundation. If the organiz	zation did not che	ck a box on line	13, 16a, 16b, 17a	, or 17b, check th	is box and see inst	ructions ►

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	tion A. Public Support						
Calend	ar year (or fiscal year beginning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	318,217.	314,182.	396,407.	740,641.	708,745.	2,478,192.
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.	323, 22	021,2021	550, 10	,		0.
3	Gross receipts from activities that are not an unrelated trade or business under section 513.						0.
-	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons	318,217.	314,182.	396,407.	740,641.	708,745.	2,478,192.
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.	0.	0.	0.	0.	0.	0.
_	Add lines 7a and 7b	0.	0.	0.	0.	0.	0.
	Public support. (Subtract line 7c from line 6.)	0.	0.	0.	0.	0.	2,478,192.
Sec	tion B. Total Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6	318,217.	314,182.	396,407.	740,641.	708,745.	2,478,192.
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	96.	20.	12.	152.	61.	341.
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0.
	Add lines 10a and 10b	96.	20.	12.	152.	61.	341.
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0.
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						0.
	Total support. (Add lines 9, 10c, 11, and 12.)	318,313.	314,202.	396,419.	740,793.	708,806.	2,478,533.
	First five years. If the Form 990 organization, check this box and	stop here					
	tion C. Computation of Pul			- 10 - 1 - 20:		1 1	
	Public support percentage for 20	•	``				99.99 %
	Public support percentage from 2					16	99.98 %
	tion D. Computation of Inv				(0)	1 1	
	Investment income percentage for					 	0.01 %
	Investment income percentage fi						0.02 %
	33-1/3% support tests—2016. If t is not more than 33-1/3%, check 33-1/3% support tests— 2015 . If t	this box and stop	here. The organi	zation qualifies a	s a publicly suppo	orted organization	► <u>X</u>
	33-1/3% support tests—2015. If t line 18 is not more than 33-1/3% Private foundation. If the organization	, check this box a	nd stop here. The	e organization qua	alifies as a publicl	y supported orgai	nization ►
20	riivate iouiiuation. Ii tile organiz	Lation uld Hot Chec	n a bux un nne l	4, 13a, 01 13b, C	HECK LITTS DOX AND	SEE ITISH UCHOIRS.	····· <u> </u>

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. All Supporting Organizations

			Yes	No
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.	1		
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			
2-	described in section 509(a)(1) or (2). Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b)	2		
	and (c) below.	3a		
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.	3b		
С	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.	3с		
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		
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.	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 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 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 (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).	7		
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).	8		
9a	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 .	9a		
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 .	9b		
c	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 .	9с		
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.	10a		
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.)	10b		

Pai	rt IV	Supporting Organizations (continued)			
				Yes	No
		the organization accepted a gift or contribution from any of the following persons? son who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			
	gover	rning body of a supported organization?	11a		
		nily member of a person described in (a) above?	11b		
(C A 359	% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.	11c		
Sec	tion I	B. Type I Supporting Organizations			
_				Yes	No
1	or ele Part If the direct	ne directors, trustees, or membership of one or more supported organizations have the power to regularly appoint act at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. The organization had more than one supported organization, describe how the powers to appoint and/or remove tors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, ed to such powers during the tax year.	1		
2		,			
2	that o	the organization operate for the benefit of any supported organization other than the supported organization(s) operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such fit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the orting organization.	2		
Sec	tion (C. Type II Supporting Organizations			
				Yes	No
1	of ea	a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees ch of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the orting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Sec	tion I	D. All Type III Supporting Organizations			
				Yes	No
1	Did th	he organization provide to each of its supported organizations, by the last day of the fifth month of the nization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year,	(ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	-		
	organ	nization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were	any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	orgar the o	nization(s) or (ii) serving on the governing body of a supported organization? <i>If 'No,' explain in Part VI how</i> organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	voice	eason of the relationship described in (2), did the organization's supported organizations have a significant in the organization's investment policies and in directing the use of the organization's income or assets at mes during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played			
		ines duffing the tax year? It res, describe in Fart VI the role the organization's supported organizations played is regard.	3		
Sec	tion I	E. Type III Functionally Integrated Supporting Organizations			
1	Check	k the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
i	а∏⊤	The organization satisfied the Activities Test. Complete line 2 below.			
	=	The organization is the parent of each of its supported organizations. Complete line 3 below.			
	吕	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	actruo	tions)	
,	c [] I	The organization supported a governmental entity. Describe in Fait VI now you supported a government entity (see in	istiuc	110115).	•
2	Activi	ities Test. Answer (a) and (b) below.		Yes	No
á	suppo orgai	substantially all of the organization's activities during the tax year directly further the exempt purposes of the orted organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported **nizations and explain how these activities directly furthered their exempt purposes, how the organization was consive to those supported organizations, and how the organization determined that these activities constituted			
		tantially all of its activities.	2a		
I	the o	the activities described in (a) constitute activities that, but for the organization's involvement, one or more of rganization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for organization's position that its supported organization(s) would have engaged in these activities but for the			
		nization's involvement.	2b		
		nt of Supported Organizations. Answer (a) and (b) below.			
ä		the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of of the supported organizations? <i>Provide details in Part VI.</i>	3a		
I		ne organization exercise a substantial degree of direction over the policies, programs, and activities of each of its orted organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard.	3b		

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	janizati	ions	
1	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organization	ist on No ons mus	v. 20, 1970 (explain in t complete Sections A	n Part VI). See through E.
Sec	tion 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		
Sec	tion B — Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for shor tax year or assets held for part of year):	t		
	Average monthly value of securities	1a		
I	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	d Total (add lines 1a, 1b, and 1c)	1d		
-	Discount claimed for blockage or other factors (explain in detail in Part VI):			
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 (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		
Sec	tion 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 in (see instructions).	tegrated	Type III supporting or	ganization

Schedule A (Form 990 or 990-EZ) 2016

Pai	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)					
Sec	tion D - Distributions	Current Year				
1	Amounts paid to supported organizations to accomplish exempt purposes					
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity					
3	Administrative expenses paid to accomplish exempt purposes of supported organizations					
4	Amounts paid to acquire exempt-use assets					
5	Qualified set-aside amounts (prior IRS approval required)					
6	Other distributions (describe in Part VI). See instructions.					
7	Total annual distributions. Add lines 1 through 6.					
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.					
9	Distributable amount for 2016 from Section C, line 6					
10	Line 8 amount divided by Line 9 amount					

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1 Distributable amount for 2016 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2016 (reasonable cause required — explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2016:			
a			
b			
c From 2013			
d From 2014			
e From 2015			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2016 distributable amount			
i Carryover from 2011 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2016 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2016 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2016, 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 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2017. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a			
b Excess from 2013			
c Excess from 2014			
d Excess from 2015			
e Excess from 2016			
PAA		Schodulo A (Eo	rm 990 or 990 E7) 2016

BAA

Schedule A (Form 990 or 990-EZ) 2016

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.) Part VI

SCHEDULE D (Form 990)

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.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

m990. Open to Public Inspection
Employer identification number

	ATLANTA MUSIC PROJECT INC.	80-0557088
Pai	rt Organizations Maintaining Donor Advised Funds or Other Similar Fund	s or Accounts.
	Complete if the organization answered 'Yes' on Form 990, Part IV, line 6	
	(a) Donor advised funds	(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	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor are the organization's property, subject to the organization's exclusive legal control?	or advised funds
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds for charitable purposes and not for the benefit of the donor or donor advisor, or for any other primpermissible private benefit?	can be used only urpose conferring
Dai	rt II Conservation Easements.	
Га	Complete if the organization answered 'Yes' on Form 990, Part IV, line 7	
1	·	·
•		a historically important land area
		a certified historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form	of a conservation easement on the
	last day of the tax year.	
		Held at the End of the Tax Year
	a Total number of conservation easements	
	b Total acreage restricted by conservation easements.	
(c Number of conservation easements on a certified historic structure included in (a)	. 2c
(d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic	2 d
3	structure listed in the National Register	
3	tax year	organization daring the
4	Number of states where property subject to conservation easement is located ►	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, hand	ling of violations,
	and enforcement of the conservation easements it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing const	ervation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservat ►\$	tion easements during the year
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section and section 170(h)(4)(B)(ii)?	
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense include, if applicable, the text of the footnote to the organization's financial statements that desconservation easements.	statement, and balance sheet, and scribes the organization's accounting for
Pai	Organizations Maintaining Collections of Art, Historical Treasures, or Complete if the organization answered 'Yes' on Form 990, Part IV, line 8	Other Similar Assets.
1:	a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenu	a statement and halance sheet works of
	art, historical treasures, or other similar assets held for public exhibition, education, or research in furth in Part XIII, the text of the footnote to its financial statements that describes these items.	herance of public service, provide,
ı	b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue st historical treasures, or other similar assets held for public exhibition, education, or research in furthera following amounts relating to these items:	atement and balance sheet works of art, nce of public service, provide the
	(i) Revenue included on Form 990, Part VIII, line 1.	
	(ii) Assets included in Form 990, Part X	
2	If the organization received or held works of art, historical treasures, or other similar assets for financial amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	al gain, provide the following
i	a Revenue included on Form 990, Part VIII, line 1.	▶\$
ı	b Assets included in Form 990, Part X	▶\$

Part III Organizations Mainta	illing Colle	CHOIIS OF AIL,	HISTORIC	ai ireasures, or	Other Similar Ass	ets (COITIII	iueu)
3 Using the organization's acquisition items (check all that apply):	, accession, ar	nd other records,	,	ŭ	a significant use of its	collection	
a Public exhibition		d	Loan or ex	kchange programs			
b Scholarly research		е	Other				
c Preservation for future gener	ations		<u> </u>				
4 Provide a description of the organiz Part XIII.	ation's collection	ons and explain h	low they furt	her the organization's	exempt purpose in		
5 During the year, did the organiza to be sold to raise funds rather the	nan to be maii	ntained as part	of the orgar	nization's collection?		Yes	No
Part IV Escrow and Custodia line 9, or reported an	l Arrangem amount on	ents. Comple Form 990, Pa	ete if the art X, line	organization ans 21.	wered 'Yes' on Fo	m 990, Pa	art IV,
1 a Is the organization an agent, trus on Form 990, Part X?	stee, custodia	n or other interm	nediary for o	contributions or other	assets not included	Yes	□No
b If 'Yes,' explain the arrangement							□
2 ii ree, explain the arrangement		ina complete the				Amount	
c Beginning balance						inount	
d Additions during the year							
e Distributions during the year							
f Ending balance							
2a Did the organization include an a						Yes	No
b If 'Yes,' explain the arrangement					- L		HNO
b ii res, explain the arrangement	III Part AIII. C	THECK HERE II THE	е ехріапаціо	iii iias beeii provided	OII Part Alli		
Bort V Fredomment Funds C	ا عندادددد	ha araani-at	ion onou	arad Waal on Far	000 Dort I\/ lim	. 10	
Part V Endowment Funds. C	•	ĭ					
1 - Designing of year belongs	(a) Current	year (b)	Prior year	(c) Two years back	(d) Three years back	(e) Four ye	ars dack
1 a Beginning of year balance							
b Contributions							
c Net investment earnings, gains, and losses							
d Grants or scholarships							
Other expenditures for facilities and programs							
f Administrative expenses							
g End of year balance							
2 Provide the estimated percentage	e of the currer	nt year end bala	nce (line 1g	g, column (a)) held a	s:		
a Board designated or quasi-endowm	ent ►	%					
b Permanent endowment ►	%						
c Temporarily restricted endowmer	nt ►	%					
The percentages on lines 2a, 2b, ar	nd 2c should ed	qual 100%.					
3 a Are there endowment funds not in torganization by:	he possession	of the organization	on that are h	eld and administered f	or the	Yes	No
(i) unrelated organizations						3a(i)	
(ii) related organizations						3a(ii)	
b If 'Yes' on line 3a(ii), are the rela						3b	
4 Describe in Part XIII the intended	-		•				
Part VI Land, Buildings, and		_					
Complete if the organi			n Form 9	90, Part IV, line	11a. See Form 99	D, Part X,	line 10.
Description of property		(a) Cost or other (investmen		b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book	value
1 a Land							
b Buildings							
c Leasehold improvements							
d Equipment				168,282.	54,629.	11	3,653.
e Other					,		.,
Total. Add lines 1a through 1e. (Column		ual Form 990. F	Part X, colui	mn (B), line 10c.)		11	3,653.
BAA	.,	, -	, 			le D (Form 9	

Schedule **D** (Form 990) 2016

Part VII Investments – Other Securities.	IV1 F 00	N/A	/ Ii 10
		0, Part IV, line 11b. See Form 990, Part X	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market va	alue
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D) (E)			
(F)			
(G)			
(H)			
(l)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)			
Part VIII Investments — Program Related.		N/A	
Complete if the organization answered		0, Part IV, line 11c. See Form 990, Part X	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year mark	ket value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9) (10)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) ▶			
Part IX Other Assets.	N/A	A.	
Complete if the organization answered	'Yes' on Form 99	0, Part IV, line 11d. See Form 990, Part X	
•	scription	(b) Book	value
(1)			
<u>(2)</u> (3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)	D. // 15.		
Total. (Column (b) must equal Form 990, Part X, column (E	3) line 15.)	>	
Part X Other Liabilities. Complete if the organization answered 'Yes' on Fi	orm 990 Part IV line 1	11e or 11f See Form 990 Part X line 25	
(a) Description of liability	(b) Book value		
(1) Federal income taxes	<u> </u>		
(2) CASH OVERDRAFT	3,69	92.	
(3)			
(4)			
(5)			
(6) (7)			
(8)			
(9)			
(10)			
(11)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)	3,69	92.	
2 Habita famous asis as a sixture to Dealville and 3 to 1 to 50 f		Consider the formation of the formation of the formation of the first	

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.

Part XI Reconciliation of Revenue per Audited Financial Statement	-	eturn.	
Complete if the organization answered 'Yes' on Form 990, Page 1	art IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements		1	837,857.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a Net unrealized gains (losses) on investments	2 a		
b Donated services and use of facilities	2b 25,500.		
c Recoveries of prior year grants			
c Recoveries of prior year grants	2d 388.		
e Add lines 2a through 2d		2 e	25,888.
3 Subtract line 2e from line 1		3	811,969.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIII.)	4 b		
c Add lines 4a and 4b.		4 c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).		5	811,969.
Part XII Reconciliation of Expenses per Audited Financial Statemen	nts With Expenses per	Return.	
Part XII Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered 'Yes' on Form 990, Part XII		Return.	
	art IV, line 12a.	Return.	852,899.
Complete if the organization answered 'Yes' on Form 990, Page 1	art IV, line 12a.		852,899.
Complete if the organization answered 'Yes' on Form 990, Part Total expenses and losses per audited financial statements	art IV, line 12a.		852,899.
Complete if the organization answered 'Yes' on Form 990, Portion 1 Total expenses and losses per audited financial statements	art IV, line 12a.		852,899.
Complete if the organization answered 'Yes' on Form 990, Port of Total expenses and losses per audited financial statements	art IV, line 12a. 2a 2b		852,899.
Complete if the organization answered 'Yes' on Form 990, P. 1 Total expenses and losses per audited financial statements	2a 2b 2c		852,899.
Complete if the organization answered 'Yes' on Form 990, P. 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses.	art IV, line 12a. 2a 2b 2c 2d		852,899.
Complete if the organization answered 'Yes' on Form 990, P. 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.)	2a 2b 2c 2d	1	
Complete if the organization answered 'Yes' on Form 990, Port 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d.	2a 2b 2c 2d	1 2 e	852,899. 852,899.
Complete if the organization answered 'Yes' on Form 990, Port 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1.	art IV, line 12a. 2a 2b 2c 2d	1 2 e	
Complete if the organization answered 'Yes' on Form 990, Port 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	art IV, line 12a. 2a 2b 2c 2d	1 2 e	
Complete if the organization answered 'Yes' on Form 990, Port 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. b Other (Describe in Part XIII.) c Add lines 4a and 4b.	2a	2e 3	
Complete if the organization answered 'Yes' on Form 990, Port 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. b Other (Describe in Part XIII.)	2a	2e 3	·

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

PART X - FIN 48 FOOTNOTE

THE ORGANIZATION WAS INCORPORATED AS A NOT-FOR-PROFIT CORPORATION UNDER THE LAWS OF THE STATE OF GEORGIA AND IS EXEMPT FROM INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. THEREFORE, THERE IS NO PROVISION FOR INCOME TAXES. THE ORGANIZATION QUALIFIES FOR THE CHARITABLE CONTRIBUTION DEDUCTION UNDER SECTION 170(B)(1)(A) AND HAS BEEN CLASSIFIED AS AN ORGANIZATION OTHER THAN A PRIVATE FOUNDATION UNDER SECTION 509(A)(2).

BAA Schedule **D** (Form 990) 2016

Part XIII Supplemental Information (continued)

PART X - FIN 48 FOOTNOTE (CONTINUED)

THE ORGANIZATION'S EVALUATION ON JULY 31, 2017 REVEALED NO UNCERTAIN TAX POSITIONS
THAT WOULD HAVE A MATERIAL IMPACT ON THE FINANCIAL STATEMENTS. THE 2013 THROUGH 2015
TAX YEARS REMAIN SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE. THE
ORGANIZATION DOES NOT BELIEVE THAT ANY REASONABLE POSSIBLE CHANGES WILL OCCUR WITHIN
THE NEXT TWELVE MONTHS THAT WILL HAVE AN IMPACT ON THE FINANCIAL STATEMENTS.

SCHEDULE D, PART XI, LINE 2D OTHER REVENUE INCLUDED IN F/S BUT NOT INCLUDED ON FORM 990

UNREALIZED GAIN ON INVESTMENTS	\$ 388.
TOTAL	\$ 388.

BAA TEEA3305L 08/15/16 Schedule **D** (Form 990) 2016

SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury 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.

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

OMB No. 1545-0047 2016

Open to Public Inspection

Name of the organization ATLANTA MUSIC PROJECT INC Employer identification number

80-0557088

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

THE 990 WAS SENT TO AND REVIEWED BY THE EXECUTIVE DIRECTOR, CHAIR AND TREASURER, WHO IS ALSO THE CHAIR OF THE FINANCE COMMITTEE, PRIOR TO FILING. THE TAX PREPARER DISCUSSED THE 990 WITH THEM AND ADDRESSED ALL QUESTIONS AND/OR COMMENTS. THEY HAVE THE AUTHORITY TO REVIEW AND ACCEPT THE 990, WHICH WAS REPORTED TO THE FULL BOARD OF DIRECTORS.

FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS

MANAGEMENT AND THE BOARD OF DIRECTORS MONITOR TRANSACTIONS ON A CONTINUING BASIS. ANY POTENTIAL NON-COMPLIANCE WITH THE CONFLICT OF INTERST POLICY IS DEALT WITH AT THE BOARD OF DIRECTORS MEETINGS. THE CONFLICT OF INTEREST DISCLOSURE FORMS ARE EXECUTED ON AN ANNUAL BASIS.

FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS - CEO & TOP MANAGEMENT

THE BOARD OF DIRECTORS SETS THE COMPENSATION FOR THE EXECUTIVE DIRECTOR. CONTRACT AND PERFORMANCE IS REVIEWED, VOTED UPON AND APPROVED BY THE BOARD.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

THE ORGANIZATION MAKES THESE DOCUMENTS AVAILABLE TO THE PUBLIC UPON REOUEST.

FORM 990, PART XI, LINE 9 OTHER CHANGES IN NET ASSETS OR FUND BALANCES

IN KIND CONTRIBUTIONSUNREALIZED GAIN ON INVESTMENTS	\$ 25,500. 388.
TOTAL	\$ 25,888.