

Return of Organization Exempt From Income Tax

2001

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

The organization may have to use a copy of this return to satisfy state reporting requirements

A For the 2001 calendar year, or tax year beginning 2001, and ending 2002

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return
 Amended return
 Application pending

C Name of organization: BLACKWOOD THEATER ORGAN SOCIETY
 Number and street (or P O box if mail is not delivered to street address) Room/suite: 118 BLACKWOOD LAVE
 City or town, state or country and ZIP + 4: HARRISVILLE, PA 16038

D Employer identification number: 25 1833591

E Telephone number: (412) 367-3239

F Accounting method: Cash Accrual
 Other (specify) _____

G Web site: _____

J Organization type (check only one): 501(c) (3) (insert no) 4947(a)(1) or 527

K Check here if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12: 0

H and **I** are not applicable to section 527 organizations.
H(a) Is this a group return for affiliates? Yes No
H(b) If "Yes," enter number of affiliates: N/A
H(c) Are all affiliates included? N/A Yes No (If "No," attach a list. See instructions.)
H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No
I Enter 4-digit GEN: N/A
M Check if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF)

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Specific Instructions on page 16)

Revenue	1	Contributions, gifts, grants, and similar amounts received				
	a	Direct public support	1a	110185		
	b	Indirect public support	1b	0		
	c	Government contributions (grants)	1c	0		
	d	Total (add lines 1a through 1c) (cash \$ <u>110185</u> noncash \$ <u>0</u>)	1d		110185	
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2		3165	
	3	Membership dues and assessments	3		0	
	4	Interest on savings and temporary cash investments	4		0	
	5	Dividends and interest from securities	5		0	
	6a	Gross rents	6a	0		
	b	Less rental expenses	6b	0		
	c	Net rental income or (loss) (subtract line 6b from line 6a)	6c		0	
7	Other investment income (describe _____)	7		0		
Revenue	8a	Gross amount from sales of assets other than inventory	(A) Securities		(B) Other	
	b	Less cost or other basis and sales expenses	8a	0	0	
	c	Gain or (loss) (attach schedule)	8b	0	0	
	d	Net gain or (loss) (combine line 8c, columns (A) and (B))	8c	0	0	
Revenue	9	Special events and activities (attach schedule)				
	a	Gross revenue (not including \$ <u>0</u> of contributions reported on line 1a)	9a	0		
	b	Less direct expenses other than fundraising expenses	9b	0		
c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c		0		
Revenue	10a	Gross sales of inventory, less returns and allowances	10a			
	b	Less cost of goods sold	10b			
	c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c		0	
11	Other revenue (from Part VII, line 103)	11		0		
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12		113350		
Expenses	13	Program services (from line 44, column (B))	13		7449	
	14	Management and general (from line 44, column (C))	14		294	
	15	Fundraising (from line 44, column (D))	15		0	
	16	Payments to affiliates (attach schedule)	16		0	
	17	Total expenses (add lines 13 and 14, column (A))	17		7743	
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 12)	18		105607	
	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19		1031	
	20	Other changes in net assets or fund balances (attach explanation)	20		0	
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21		106638	

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Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See Specific Instructions on page 21)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ <u>2000</u> noncash \$ _____)	22 2000	2000		
23	Specific assistance to individuals (attach schedule)	23 0	0		
24	Benefits paid to or for members (attach schedule)	24 0	0		
25	Compensation of officers, directors, etc	25 0	0	0	0
26	Other salaries and wages	26 0	0	0	0
27	Pension plan contributions	27 0	0	0	0
28	Other employee benefits	28 0	0	0	0
29	Payroll taxes	29 0	0	0	0
30	Professional fundraising fees	30 0	0	0	0
31	Accounting fees	31 0	0	0	0
32	Legal fees	32 0	0	0	0
33	Supplies	33 65	0	65	0
34	Telephone	34 0	0	0	0
35	Postage and shipping	35 296	67	229	0
36	Occupancy	36 0	0	0	0
37	Equipment rental and maintenance	37 0	0	0	0
38	Printing and publications	38 0	0	0	0
39	Travel	39 200	200	0	0
40	Conferences, conventions, and meetings	40 0	0	0	0
41	Interest	41 0	0	0	0
42	Depreciation, depletion, etc (attach schedule)	42 0	0	0	0
43	Other expenses not covered above (itemize) a	43a			
b	Professional Organists	43b 3300	3300	0	0
c	Silent film rentals	43c 400	400	0	0
d	REFRESHMENTS	43d 1482	1482	0	0
e		43e			
44	Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	44 7743	7449	294	0

Joint Costs Check if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ N/A, (ii) the amount allocated to Program services \$ _____, (iii) the amount allocated to Management and general \$ _____, and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments (See Specific Instructions on page 24)

What is the organization's primary exempt purpose? Preserving historic pipe organ and silent movies as scholarships to high school students pursuing music as career
 All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others)

Program Service Expenses	(Required for 501(c)(3) and (4) orgs. and 4947(a)(1) trusts but optional for others)
a. Silent movie "Mark of Zorro" with Douglas Fairbanks, Sr. (Chris Elliott organist) attended by 135. Programs described, film content, actors, and organist. Use of Theater Pipe Organ, 16mm Projector, and Home on Blackwood Lane provided. Grants and allocations \$1650	\$1650
b. Silent movie "Footprints" with Laurell K. Goddy (Robert Black organist) attended by 85... This was requested by Grove City College for drama students.	\$707
c. Not proceeds from Dinner-Concert with Walt Strong, Organist, will provide funds for two \$2500 music scholarships for yr. 2002	\$3025
d. Two \$1000 scholarships were awarded in 2001 (Recipients were Ashley Leight and Melissa Patten, both attending Carnegie Mellon Univ)	\$2067
e. MAKE-A-WISH FOUNDATION reported that 118 gifts, totalling \$15905 were received from The Annual M.A.W. concert in July, 2001... Ron Rudge was the theater organist. BTOS hosted the concert on the Blackwood Lane Pipe Organ.	\$15905
e Other program services (attach schedule) (Grants and allocations \$ _____)	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	\$7449

Part IV Balance Sheets (See Specific Instructions on page 24)

Note. Where required, attached schedules and amounts within the description column should be for end-of-year amounts only		(A) Beginning of year		(B) End of year
Assets	45 Cash—non-interest-bearing	3031	45	6247
	46 Savings and temporary cash investments	0	46	50000
	47a Accounts receivable	0	47c	0
	b Less allowance for doubtful accounts	0		
	48a Pledges receivable	0	48c	0
	b Less allowance for doubtful accounts	0		
	49 Grants receivable	0	49	0
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)	0	50	0
	51a Other notes and loans receivable (attach schedule)	0	51c	0
	b Less allowance for doubtful accounts	0		
	52 Inventories for sale or use	0	52	0
	53 Prepaid expenses and deferred charges	0	53	1490
	54 Investments—securities (attach schedule) ▶ <input type="checkbox"/> Cost <input type="checkbox"/> FMV	0	54	50000
	55a Investments—land, buildings, and equipment basis	0	55c	0
	b Less accumulated depreciation (attach schedule)	0		
56 Investments—other (attach schedule)	0	56	0	
57a Land, buildings, and equipment basis	0	57c	0	
b Less accumulated depreciation (attach schedule)	0			
58 Other assets (describe ▶ _____)	0	58	0	
59 Total assets (add lines 45 through 58) (must equal line 74)		3031	59	107737
Liabilities	60 Accounts payable and accrued expenses	0	60	0
	61 Grants payable	0	61	0
	62 Deferred revenue	0	62	0
	63 Loans from officers, directors, trustees, and key employees (attach schedule)	2000	63	1099
	64a Tax-exempt bond liabilities (attach schedule)	0	64a	0
	b Mortgages and other notes payable (attach schedule)	0	64b	0
	65 Other liabilities (describe ▶ _____)	0	65	0
66 Total liabilities (add lines 60 through 65)		2000	66	1099
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74		67	585
	67 Unrestricted	(1019)		
	68 Temporarily restricted	2050		
	69 Permanently restricted	0	69	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74		70	
	70 Capital stock, trust principal, or current funds		71	
	71 Paid-in or capital surplus, or land, building, and equipment fund		72	
	72 Retained earnings, endowment, accumulated income, or other funds			
73 Total net assets or fund balances (add lines 67 through 69 OR lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21)	1031	73	106638	
74 Total liabilities and net assets / fund balances (add lines 66 and 73)		3031	74	107737

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See Specific Instructions, page 26)

N/A

a Total revenue, gains, and other support per audited financial statements ▶ **a** *N/A*

b Amounts included on line a but not on line 12, Form 990

(1) Net unrealized gains on investments \$ _____

(2) Donated services and use of facilities \$ _____

(3) Recoveries of prior year grants \$ _____

(4) Other (specify) _____

\$ _____

Add amounts on lines (1) through (4) ▶ **b**

c Line a minus line b ▶ **c**

d Amounts included on line 12, Form 990 but not on line a:

(1) Investment expenses not included on line 6b, Form 990 \$ _____

(2) Other (specify) _____

\$ _____

Add amounts on lines (1) and (2) ▶ **d**

e Total revenue per line 12, Form 990 (line c plus line d) ▶ **e**

Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return *N/A*

a Total expenses and losses per audited financial statements ▶ **a** *N/A*

b Amounts included on line a but not on line 17, Form 990

(1) Donated services and use of facilities \$ _____

(2) Prior year adjustments reported on line 20, Form 990 \$ _____

(3) Losses reported on line 20, Form 990 \$ _____

(4) Other (specify) _____

\$ _____

Add amounts on lines (1) through (4) ▶ **b**

c Line a minus line b ▶ **c**

d Amounts included on line 17, Form 990 but not on line a:

(1) Investment expenses not included on line 6b, Form 990 \$ _____

(2) Other (specify) _____

\$ _____

Add amounts on lines (1) and (2) ▶ **d**

e Total expenses per line 17, Form 990 (line c plus line d) ▶ **e**

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated, see Specific Instructions on page 26)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
BENJAMIN ROBERTSON 118 BLACKWOOD LN, HARRISVILLE PA 16038	PRESIDENT	7 HRS 0	0	0
DRUARD FINK 118 BLACKWOOD LN, HARRISVILLE PA 16038	VICE PRESIDENT	1 HRS 0	0	0
MARNA BOENAR 139 PETERS DR, GLENSHAW, PA 15116	SECRETARY	3 HRS 0	0	0
ANNA ELIZABETH DIGBY 2428 HUNTINGTON DR, PITTSBURGH, PA 15241	TREASURER	14 HRS 0	0	0
.....				
.....				
.....				
.....				
.....				
.....				

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? Yes No

If "Yes," attach schedule—see Specific Instructions on page 27

Part VI Other Information (See Specific Instructions on page 27)

		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		<input checked="" type="checkbox"/>
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		<input checked="" type="checkbox"/>
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		<input checked="" type="checkbox"/>
b	If "Yes," has it filed a tax return on Form 990-T for this year? <i>N/A</i>		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement		<input checked="" type="checkbox"/>
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?		<input checked="" type="checkbox"/>
b	If "Yes," enter the name of the organization <i>N/A</i> and check whether it is <input type="checkbox"/> exempt OR <input type="checkbox"/> nonexempt		
81a	Enter direct or indirect political expenditures See line 81 instructions 81a <i>0</i>		
b	Did the organization file Form 1120-POL for this year?		<input checked="" type="checkbox"/>
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	<input checked="" type="checkbox"/>	
b	If "Yes," you may indicate the value of these items here Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III) 82b		
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	<input checked="" type="checkbox"/>	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	<input checked="" type="checkbox"/>	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?		<input checked="" type="checkbox"/>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? <i>N/A</i>		<input checked="" type="checkbox"/>
85	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members? <i>N/A</i>		<input checked="" type="checkbox"/>
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? <i>N/A</i> If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year		<input checked="" type="checkbox"/>
c	Dues, assessments, and similar amounts from members 85c <i>N/A</i>		
d	Section 162(e) lobbying and political expenditures 85d <i>N/A</i>		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e <i>N/A</i>		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f <i>N/A</i>		
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		<input checked="" type="checkbox"/>
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?		<input checked="" type="checkbox"/>
86	501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12 86a <i>N/A</i>		
b	Gross receipts, included on line 12, for public use of club facilities 86b <i>N/A</i>		
87	501(c)(12) orgs Enter a Gross income from members or shareholders 87a <i>N/A</i>		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 87b <i>N/A</i>		
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX		<input checked="" type="checkbox"/>
89a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 <i>0</i> , section 4912 <i>0</i> , section 4955 <i>0</i>		
b	501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction		<input checked="" type="checkbox"/>
c	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 <i>0</i>		
d	Enter Amount of tax on line 89c, above, reimbursed by the organization <i>0</i>		
90a	List the states with which a copy of this return is filed <i>PA</i>		
b	Number of employees employed in the pay period that includes March 12, 2001 (See instructions) 90b <i>0</i>		
91	The books are in care of <i>ANNA ELIZABETH DIGBY</i> Telephone no <i>(412) 835-8056</i> Located at <i>2428 HUNTINGTON DR, PITTSBURGH, PA</i> ZIP + 4 <i>15241-2531</i>		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here <i>N/A</i> <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year 92 <i>N/A</i>		

Part VII Analysis of Income-Producing Activities (See Specific Instructions on page 32)

Note: Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512 513 or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue					
a SILENT MOVIE - "ZORRO"					2,400
b SILENT MOVIE - "TWO TARS"					765
c					
d					
e					
f Medicare/Medicaid payments					0
g Fees and contracts from government agencies					0
94 Membership dues and assessments					0
95 Interest on savings and temporary cash investments					0
96 Dividends and interest from securities					0
97 Net rental income or (loss) from real estate					
a debt-financed property					0
b not debt-financed property					0
98 Net rental income or (loss) from personal property					0
99 Other investment income					0
100 Gain or (loss) from sales of assets other than inventory					0
101 Net income or (loss) from special events					0
102 Gross profit or (loss) from sales of inventory					0
103 Other revenue					0
a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))					3,165
105 Total (add line 104, columns (B), (D), and (E))					3,165

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See Specific Instructions on page 32)

Line No	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
a	155 PERSONS VIEWED ONE OF THE GREATEST SILENT MOVIES AND SILENT FILM ACTORS AND HEARD THEATER PIPE ORGAN PLAYED BY AN OUTSTANDING ORGANIST.
b	80 COLLEGE STUDENTS WERE EXPOSED TO ACTING TECHNIQUES USED BY SILENT FILM STARS AND ORGAN TECHNIQUES TO ACCOMPANY FILM ACTION.

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See Specific Instructions on page 33)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See Specific Instructions on page 33)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions)

Under penalties of perjury I declare that I have examined this return including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Date 11-8-2002

PREPARED

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

OMB No 1545-0047

2001

Department of the Treasury
Internal Revenue Service

Supplementary Information—(See separate instructions.)

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization

BLACKWOOD THEATER ORGAN SOCIETY

Employer identification number

25 1833591

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions List each one If there are none, enter "None ")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
<i>NONE</i>				
Total number of other employees paid over \$50,000 ▶				

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions List each one (whether individuals or firms) If there are none, enter "None ")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
<i>NONE</i>		
Total number of others receiving over \$50,000 for professional services ▶		

Part III Statements About Activities (See page 2 of the instructions)

	Yes	No
<p>1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ► \$ _____ (Must equal amounts on line 38, Part VI-A, or line 1 of Part VI-B)</p> <p>Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.</p>		✓
2		
<p>2a Sale, exchange, or leasing of property?</p>		✓
<p>2b Lending of money or other extension of credit?</p>		✓
<p>2c Furnishing of goods, services, or facilities?</p>		✓
<p>2d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?</p>		✓
<p>2e Transfer of any part of its income or assets?</p>		✓
<p>3 Does the organization make grants for scholarships, fellowships, student loans, etc.? (See Note below)</p>	✓	
<p>4 Do you have a section 403(b) annuity plan for your employees? <i>N/A = NO EMPLOYEES</i></p>		✓
<p>Note Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments</p>		

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions)

The organization is not a private foundation because it is (Please check only **ONE** applicable box.)

- 5** A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)
- 6** A school Section 170(b)(1)(A)(ii) (Also complete Part V)
- 7** A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
- 8** A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)
- 9** A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state ►
- 10** An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A)
- 11a** An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
- 11b** A community trust Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
- 12** 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 charitable, etc., 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) (Also complete the **Support Schedule** in Part IV-A)
- 13** An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in **(1)** lines 5 through 12 above, or **(2)** section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3))

Provide the following information about the supported organizations (See page 5 of the instructions)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14** An organization organized and operated to test for public safety Section 509(a)(4) (See page 6 of the instructions)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) *Use cash method of accounting*

Note You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting

Calendar year (or fiscal year beginning in)	(a) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total		
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28)	7195	0	0	0	7195		
16 Membership fees received	0	0	0	0	0		
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	1710	1350	0	0	3060		
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	0	0	0	0	0		
19 Net income from unrelated business activities not included in line 18	0	0	0	0	0		
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf	0	0	0	0	0		
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.	0	0	0	0	0		
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets.	0	0	0	0	0		
23 Total of lines 15 through 22	8905	1350	0	0	10255		
24 Line 23 minus line 17	7195	0	0	0	7195		
25 Enter 1% of line 23	89	14	0	0			
26 Organizations described on lines 10 or 11	a Enter 2% of amount in column (e), line 24				26a		
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1997 through 2000 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b		
c Total support for section 509(a)(1) test. Enter line 24, column (e)					26c		
d Add Amounts from column (e) for lines 18 _____ 19 _____ 22 _____ 26b _____					26d		
e Public support (line 26c minus line 26d total)					26e		
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f %		
27 Organizations described on line 12.	a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year.						
(2000)	2075	(1999)	0	(1998)	0	(1997)	0
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year.							
(2000)	0	(1999)	0	(1998)	0	(1997)	0
c Add Amounts from column (e) for lines 15 <u>7195</u> 16 <u>0</u> 17 <u>3060</u> 20 <u>0</u> 21 <u>0</u>					27c	10255	
d Add Line 27a total <u>2075</u> and line 27b total <u>0</u>					27d	2075	
e Public support (line 27c total minus line 27d total)					27e	8180	
f Total support for section 509(a)(2) test. Enter amount from line 23, column (e)	27f				10255		
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g	79.8%	
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h	0%	
28 Unusual Grants. For an organization described in line 10, 11, or 12 that received any unusual grants during 1997 through 2000, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.							

Part V Private School Questionnaire (See page 7 of the instructions)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

N/A

	Yes	No
29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes " please describe, if "No," please explain (If you need more space, attach a separate statement)		
32 Does the organization maintain the following		
a Records indicating the racial composition of the student body, faculty, and administrative staff?		
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)		
33 Does the organization discriminate by race in any way with respect to		
a Students' rights or privileges?		
b Admissions policies?		
c Employment of faculty or administrative staff?		
d Scholarships or other financial assistance?		
e Educational policies?		
f Use of facilities?		
g Athletic programs?		
h Other extracurricular activities? If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)		
34a Does the organization receive any financial aid or assistance from a governmental agency?		
b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement		
35 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev. Proc. 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions)
 (To be completed **ONLY** by an eligible organization that filed Form 5768)

Check **a** if the organization belongs to an affiliated group Check **b** if you checked "a" and "limited control" provisions apply

Limits on Lobbying Expenditures		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
(The term "expenditures" means amounts paid or incurred)			
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	N/A
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
41	Lobbying nontaxable amount Enter the amount from the following table— If the amount on line 40 is— The lobbying nontaxable amount is— Not over \$500,000 20% of the amount on line 40 Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 \$1,000,000	41	
42	Grassroots nontaxable amount (enter 25% of line 41)	42	
43	Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43	
44	Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44	
Caution If there is an amount on either line 43 or line 44, you must file Form 4720			

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below
 See the instructions for lines 45 through 50 on page 11 of the instructions)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
45 Lobbying nontaxable amount					N/A
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities
 (For reporting only by organizations that did not complete Part VI-A) (See page 12 of the instructions)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	Yes	No	Amount
a Volunteers		✓	
b Paid staff or management (Include compensation in expenses reported on lines c through h)		✓	
c Media advertisements		✓	
d Mailings to members, legislators, or the public		/	
e Publications, or published or broadcast statements		/	
f Grants to other organizations for lobbying purposes		/	
g Direct contact with legislators, their staffs, government officials, or a legislative body		✓	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means		✓	
i Total lobbying expenditures (Add lines c through h)			0
If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities			

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Supplementary Information for
line 1 of Form 990, 990-EZ and 990-PF (see instructions)

OMB No 1545-0047

2001

Name of organization

BLACKWOOD THEATER OCEAN SOCIETY

Employer identification number

25 1833591

Organization type (check one)

Filers of

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust not treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General rule** or a **Special rule**. (Note: Only a section 501(c)(7), (8), or (10) organization can check box(es) for both the General rule and a Special rule—see instructions)

General Rule—

- For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor (Complete Parts I and II)

Special Rules—

- For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms (Complete Parts I and II)
- For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals (Complete Parts I, II, and III)
- For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc , purposes, but these contributions did not aggregate to more than \$1,000 (if this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc , purpose Do not complete any of the Parts unless the General rule applies to this organization because it received nonexclusively religious, charitable, etc , contributions of \$5,000 or more during the year) ▶ \$ _____

Caution Organizations that are not covered by the General rule and/or the Special rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they **must** check the box in the heading of their Form 990, Form 990-EZ, or on line 1 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization

BLACKWOOD THEATER ORGAN SOCIETY

Employer identification number

25-1833591

Part I Contributors (See Specific Instructions)

(a) No	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>1</u>		\$ <u>100,000</u> ...	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
—		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
—		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
—		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
—		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
—		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)

Name of organization

Employer identification number

Part I Contributors (See Specific Instructions)

(a) No.	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
—	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
—	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
—	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
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—	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
—	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)

Name of organization **BLACKWOOD THEATER ORGAN SOCIETY** Employer identification number **25-1833591**

Part II Noncash Property (See Specific Instructions)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	NONE	N/A	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

Name of organization

Employer identification number

Part II Noncash Property (See Specific Instructions)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
—	\$ /... /... ..
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
—	\$ /... /... ..
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
—	\$ /... /... ..
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
—	\$ /... /... ..
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
—	\$ /... /... ..
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
—	\$ /... /... ..

BLACKWOOD THEATRE ORGAN SOCIETY – EIN 25-1833591

Form 990 – Year 2001

Page 2, Part II – Statement of Functional Expenses

Line 22 – GRANTS – CASH \$2,000

- (1) (a) \$1,000 scholarship for study of music at Carnegie Mellon Univ
- (b) Ashley Leight
1493 Oak Avenue
Glenshaw, PA 15116
- (c) Not related directly or indirectly to any officer, director or member of selection committee

- (2) (a) \$1,000 scholarship for study of music at Carnegie Mellon Univ
- (b) Melissa Palichat
2001 Broad Hill Farms
Moon Township, PA 15108
- (c) Not related directly or indirectly to any officer, director or member of selection committee

Page 3, Part IV – Balance Sheet

Line 54 – ASSETS

\$25,000	GMAC Smartnotes, due 12/15/03, 4 4 % annual interest
\$25,000	Caterpillar Financial Services Corp , Pownotes, due 15/15/05, 4 7 % annual interest

Line 63 – LIABILITIES

\$ 1,109	Balance of start-up loan from Ben Robertson, President – no interest
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Schedule A – Page 2, Part III, Line 3 – GRANTS FOR SCHOLARSHIPS

Please see items 1, 5, 11, and 12 on attached Guidelines for BTOS Scholarships. In addition, scholarship recipients are contacted near the end of their freshman year to inquire about scholastic and intent to continue study in field of music.

BLACKWOOD THEATER ORGAN SOCIETY - EIN 25-1833591
SCHEDULE A, PAGE 2, PART III, LINE 3

GUIDELINES FOR THE BTOS SCHOLARSHIP
FOR HIGH SCHOOL STUDENTS WISHING TO
PURSUE A CAREER IN MUSICOLOGY

- * 1 The BTOS Scholarship is designated to be awarded to a high school student wishing to pursue a career in musicology, chosen on the basis of
 - (a) Musical talent
 - (b) Academic proficiency
 - (c) Motivation
 - (d) Financial need
 - (e) 300-word essay
 - (f) Recommendation of High School Principal
 - (g) Recommendations of personal acquaintance and music instructor
- 2 Awards will be made to the educational institution in the name of the recipient Validation of acceptance to a certified educational program is necessary
- 3 Scholarships will be awarded only to non-profit institutions that are classified as tax-exempt under Section 501(c)(3) of the Internal Revenue Code This includes most schools, colleges, and universities
- 4 The scholarship will be advertised for a minimum of two months through the school guidance department, in national scholarship books, and on the Internet
- * 5 Judging will be done by a committee of three independent persons, at least one of whom should be proficient in music and one an educator
- 6 There will be no restrictions or limitations in the selection procedures based upon race, color or national or ethnic origin or the employment status of any prospective recipient or any relative of any prospective recipient
- 7 Anyone directly or indirectly related to any officer, director, or member of the Selection Committee will not be eligible for a scholarship
- 8 The monetary value of the award will be \$1000
- 9 Applications should be received by April 1
- 10 The selected recipient of the award will be notified no later than July 15 of the year submitted
- * 11 The scholarship will become void if the recipient does not enter a certified educational institution within one year of the date of the grant
- * 12 If within one year of the date of the grant the recipient changes his college major to the effect that he will not pursue a career in musicology, the amount of the scholarship must be returned to the Scholarship Fund of BTOS