Form 990

OMB No 1545-0047

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung

2001

	Dep	artment o	of the Treasury enue Service	<i>'</i>			The organiza	be bet may bay	nefit trust or pr	ivate four	dation)) state repo	rtina requirements	_		Open to	
	A		e 2001 calen		r. or tax				<u> </u>	, and end			and redements				
	В		applicable	Please			organizatio			, v				Б	Emplo	yer ID numb	oer
	ĪГ	1	ess change	use IRS		21110 07	J. 9011-2000							-	-	055278	
	r	1	Name change label or print or JOHN C. CAMPBELL FOLK SCHOOL, INC.								E		hone numbe				
	F	1	return	type					mail is not delivere				Room/suite	-	•	-837-2	
	F	1	return	See				SCHOOL			,			F		nting method	
		1	dod roturn	Specific				r country a						X	Accrual		(specify)
		Applic	cation	Instruc- tions		•	STOWN			2890)2			•			(00000)
	_	J pëndi	ng c		_			ations and 4	947(a)(1) nonexer			nd I are r	ot applicable to se	ction 5	527 organ	nizations	
									dule A (Form 990	-	- 1		a group return for		_	Ye	s 🔀 N
	G	Web s	ite > ww	w.fo				•	,	·	- I		s enter no of affi		•	J	X N/A
			zation type								H(c	c) Are al	i affiliates included	17	X ı	N/A ∏ Ye	
		(check only one) ► \$\overline{\mathbb{X}}\$ 501(c) (3) < (insert no)											istr)	_	_	_	
	K	Check	here 🕨	if the	organiz	ation's	gross rece	epts are nor	mally not more t	han	H(c	d) is this	a separate return	filed b	y an		X N/A
		\$25,000 The organization need not file a return with the IRS, but if the organization organization covered by										a groi	up ruling?	? Ye	s N		
		received a Form 990 Package in the mail, it should file a return without financial data I Enter 4-digit GEN										>					
												e orga	nızatıor	n is not requi	red		
	<u>Ļ</u>	Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 3,383,761 to attach Sch B (For										orm 990, 990-EZ, or 990-PF)					
	P	art I	Reve	nue, E	xpens	es, ar	<u>id Chan</u>	ges in No	et Assets or	Fund Ba	alance	s (See	e Specific In:	struc	ctions	on page 1	<u> 6)</u>
		1	Contribution	ns, gifts,	, grants,	and sin	nılar amou	nts received	l						1		
~		a	Direct publi	c suppo	rt						1a		<u>264,88</u>	1			
5 2002		b	Indirect put	olic supp	ort						1b			_	,		
2		С	Governmer	nt control	butions (grants)		_			1c		123,50	<u> </u>	_		
2		d	267 006									_	d		3,381		
	ı	2	Program se	ervice re	venue ir	ncluding	governme	ent fees and	contracts (from	Part VII, lu	ne 93)			_2		2,245	5,554
冥		3	Membershi	•										3			
		4	Interest on	_				stments						4),566
SCANNED		5 ,	Dividends a		est from	secunt	ies				1 . 1		4 07	_ 5	- 	46	5, <u>4</u> 57
Z		6a l	Gro §:G@t		-{						6a		4,87	4			
$\boldsymbol{\xi}$		Ь	Less renta		- 1	/ -		(C-)			6b		_ .	┵	_	1	1 077
હ	ь	°	Other inves	-	•			rom line 6a)	,					7	ic		1,877
U)	R e	7 8a	Signs and		_ 1 '			1	(A) Secur		T		B) Other	 	_		
	e e	"	man invent			1 033613	Outer	ì	(A) Secui		8a		46,08	ก			
	n	Ь	22		hasis an	ıd sales	expenses				8b			4			
	0	c	Gan or (la		h sched	lule)	- I - I - I - I - I - I - I - I - I - I		-		8c		46,08	ᆔ			
		a	Net pain or				columns (, (A) and (B))				See	Stmt 1		ld	46	5,080
		9	Special \$4														
		a `	Gross reve					•	of								
			contribution	•		-					9a		58,44	2 .			
		b	Less direct	t expens	es othe	r than fu	ındraısıng	expenses			9b		12,26	5			
		C	Net income	or (loss) from s	pecial e	vents (sub	otract line 9b	from line 9a)					9	С	46	5,177
		10a	Gross sales	s of inve	ntory, le	ss retur	ns and allo	owances			10a		573,40	4			
		b	Less cost of	of goods	sold						10b		490,97	4			
		С	Gross profi	t or (los:	s) from s	ales of	inventory ((att sch)(s	ubtract line 10b t	from line 1	0a)		Stmt 2	10	lc_	82	2,430
		11	Other rever	nue (fror	n Part V	II, line 1	03)							1	1		
		12	Total rever	nue (ado	d lines 1	d, 2, 3,	4, 5, 6c, 7,	8d, 9c, 10c	, and 11)					1	2	2,880	
	Ē	13	Program se	rvices (from line	44, col	umn (B))							1	3	1,600	
	E x p	14	Manageme	nt and g	eneral (1	from line	e 44, colur	nn (C))						1	4		948
	n	15	Fundraising	(from li	ne 44, c	olumn (D))							1	5	14	1,247
	s e s	16	Payments t	o affiliat	es (attac	th sche	dule)							_	6		
		17	Total expe											1	7	2,424	
	A	18	Excess or (-	-								_	8		5,209
	N S	19				_		-	ne 73, column (A))				-	9	4,225	5,02 <u>2</u>
	e e t t		Other chan											2			
	S		Net assets	or fund	balances	at end	of year (c	ombine line	s 18 19 and 20) <u>. </u>				2	1	4,681	L <u>,231</u>

Form 990 (2001) JOHN C. CAMPBELL FOL	K SC	HOOL, INC.	56-0552780		Page 2
Part II Statement of All organizations	nust con	nplete column (A) Columns	(B) (C) and (D) are requi	red for section 501(c)(3) a	nd (4) organizations
Functional Expenses and section 4947	(a)(1) nor	nexempt chantable trusts b	ut optional for others (See	Specific Instructions on pa	ge 21)
Do not include amounts reported on line		(A) Total	(B) Program	(C) Management	(D) Fundraising
6b, 8b, 9b, 10b, or 16 of Part I			services	and general	
22 Grants and allocations (attach schedule)					
(cash \$)	22				
23 Specific assistance to individuals	23			i	
24 Benefits paid to or for members25 Compensation of officers, directors, etc	25	128,179		128,179	
26 Other salanes and wages	26	751,415	577,015	174,400	
27 Pension plan contributions	27	74,174	48,955	25,219	
28 Other employee benefits	28	183,429		62,366	
29 Payroll taxes	29	69,617	46,851	22,766	
30 Professional fundraising fees	30				
31 Accounting fees	31	7,200		7,200	
32 Legal fees	32	4,377		4,377	<u> </u>
33 Supplies	33	214,654	126,393	88,261	
34 Telephone	34	21,265	15,949	5,316	
35 Postage and shipping	35	19,360		4,840	
36 Occupancy	36	95,757	71,818	23,939	
37 Equipment rental and maintenance	37	12,753	152 706	12,753	14 047
38 Printing and publications	_38	167,973	153,726 112,377	7,861	14,247
39 Travel	39 40	120,238	112,311	1,001	
40 Conferences, conventions, and meetings 41 Interest	41	<u> </u>			
42 Depreciation, depletion, etc. (att. sch.)	42	141,873	·	141,873	
43 Other expenses not covered above (itemize) a	43a	141,075		141,0.5	
b See Statement 3	43b	412,049	311,451	100,598	
C	43c	<u> </u>			
d	43d	_			
e	43e				
44 Total functional expenses (add lines 22 43) Organizations					
completing columns (B)-(D), carry these totals to lines 13-15	44	2,424,313	1,600,118	809,948	14,247
Joint Costs Check ▶ ☐ if you are following SOP 98-2				. 🙃	
Are any joint costs from a combined educational campaign and fundraising	g solicitat				Yes 🔀 No
If "Yes," enter (i) the aggregate amount of these joint costs			amount allocated to Progr		
(Iii) the amount allocated to Management and general \$			amount allocated to Fund		
Part III Statement of Program Service Acc	ombili	snments (See Spi	ecine instructions	on page 24)	Program Service
What is the organization's primary exempt purpose? ▶ See Statement 4					Expenses
All organizations must describe their exempt purpose achievem					(Required for 501(c)(3) an (4) orgs , and 4947(a)(1)
of clients served, publications issued, etc. Discuss achievement organizations and 4947(a)(1) nonexempt chantable trusts must	is that a also en	re not measurable (Se ter the amount of grants	ction 501(c)(3) and (4) and allocations to other	ers)	trusts but optional for others)
a PROVIDING OVER 300 COURSES					- Viliei 3 /
4000 STUDENTS FROM ALL OVER	THE	UNITED STA	TES.		
		(Grants and all	ocations \$		1,600,118
b					
				ļ	
		(Grants and all	ocations \$)	
c					
		(0			
		(Grants and all	ocations \$	}	
d				ļ	
		(Grants and all	ocations \$,	
Other program services (attach schedule)		(Grants and all			
f Total of Program Service Expenses (should equal line 44	, colum				1,600,118
DAA		<u>,-,, -,, -,, -,, -,, -, -, -, -, -, -, -</u>		***************************************	Form 990 (2001)

Page 3

56-0552780 INC. JOHN C. CAMPBELL FOLK SCHOOL,

P	art IV	Balance Sheets (See Specific Instri	uctions on page 24)				
	Note	Where required, attached schedules and amounts	within the description		(A)		(B)
		column should be for end-of-year amounts only			Beginning of year	<u> </u>	End of year
,	45	Cash-non⊣nterest-bearing		Ĺ	-25,130		
	46	Savings and temporary cash investments		 	405,835	46	597,187
	47a	Accounts receivable	47a 6,	396			
	ь	Less allowance for doubtful accounts	47b		4,072	47c	<u>6,</u> 396
						ł	
	48a	Pledges receivable	48a			L	
	Ь	Less allowance for doubtful accounts	48b			48c	
	49	Grants receivable		}		49	
	50	Receivables from officers, directors, trustees, and	key employees			50	
A		(attach schedule)		H		30	
s s e t) 51a	Other notes and loans receivable (attach	545]			
		schedule) Less allowance for doubtful accounts	51a 51b			51c	
	52	Inventones for sale or use	[310]		111,724	52	137,139
	53	Prepaid expenses and deferred charges		Ì	24,073	-	46,388
	54	Investments-securities	▶ ∏ Cost ∏	FMV		54	
	55a	Investments-land, buildings, and				~	
		equipment basis	55a	ļ			
	Ь	Less accumulated depreciation (attach					
		schedule)	55b			55c	
	56	Investments-other (attach schedule)	See Stmt	5	1,493,190	56	1,723,571
	57a	Land, buildings, and equipment basis	57a 3,815,	252			
	ь	Less accumulated depreciation (attach		ŀ			
	 	schedule)	57b 1,284,	512	2,468,524		2,530,740
	58	Other assets (describe	<u>_6</u>)	-	11,951	58	25,062
	50	Total assets (add lines 45 through 58) (must equa	il lino 74)	l	4,494,239	59	5,074,722
_	59 60	Accounts payable and accrued expenses	<u> </u>		123,030		210,583
L	61	Grants payable		Ì		61	
ı a	62	Deferred revenue			146,187	62	182,908
b	63	Loans from officers, directors, trustees, and key er	nployees (attach	Ţ	•		
ļ.	"	schedule)				63	
	64a	Tax-exempt bond liabilities (attach schedule)				64a	
t	ь	Mortgages and other notes payable (attach schedu	ıle)	ļ		64b	
l e	65	Other liabilities (describe)	ļ		65	
S	66	Total liabilities (add lines 60 through 65)		İ	269,217	66	393,491
		inizations that follow SFAS 117, check here	and complete lines			, ,	
	0.3	67 through 69 and lines 73 and 74	6 ,				
NF	67	Unrestricted			4,187,217	67	<u>4,587,1</u> 88
e u	68	Temporarily restricted			9,376	68	64,857
t n d	69	Permanently restricted		į	28,429	69	29,186
A	Orga	inizations that do not follow SFAS 117, check he	re 🕨 🗌 and				
s B	 	complete lines 70 through 74					
s a	70	Capital stock, trust principal or current funds				70	
e I ta	71	Paid-in or capital surplus, or land, building, and eq		}		71	
s n	72	Retained earnings, endowment, accumulated inco		ļ		72	
С 0 е	73	Total net assets or fund balances (add lines 67	through 69 OR lines				
Гs		70 through 72,	and ban 040		4,225,022		4,681,231
ſS		column (A) must equal line 19, column (B) must e	ļ	4,225,022		5,074,722	
	74	Total liabilities and net assets / fund balances	-, -, -, 4, 2, 3	_ <u> </u>	<u> </u>		

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 DAA

	•	<u> </u>			-	•	
	•				nents	with Ex	penses per
	tructions, page 26						
			•		_	 	
	2,626,6	06				a	2,424,313
ot on		Þ	Amounts include	ed on line a but not			
			on line 17, Form	990			i.
		(Donated service 	es and use			
			of facilities §			1 1	
ŀ		(Pnor year adjus	tments			÷ '
		1	reported on line	20,			"
	. '		Form 990 <u>\$</u>]	Home I have the
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_	* * *		Form 990 <u>\$</u>				۶ ۵ ۳ ۲ ۲ ۲ ۲ ۲ ۲ ۲ ۲ ۲ ۲ ۲ ۲ ۲ ۲ ۲ ۲ ۲ ۲
	,	(4) Other (specify)] ** 2 ~ :	Sales Maria Company
						~_,	
(4) 🕨 <u>b</u>	-253,9	16	<u>s</u>				
			Add amounts on	lines (1) through (4	I) >	b	
▶ _ c	2,880,5	22 c	Line a minus line	e b	>	c	2,424,313
١	10000000000000000000000000000000000000	d				الروسيون	Salata Res Line
j	With a state of		Form 990 but no	ot on line a		• •	ERRENCE.
	Copyr 1	_+ C	 Investment expended 	enses		· 4, 23	特特国家 (中心)
	× = 4,41 , = ~	- 1	not included on l	line 6b,			to the second
	The second second	*	Form 990 <u>\$</u>				
	he ,	(4	2) Other (specify)				- Ha
٠,	\$ 2. FA	,				3	x a 3 m 2 1 1 1
	, , , , , , , , , , , , , , , , , , , ,		<u>\$</u>				* *
▶ <u>d</u>	ļ		Add amounts on	lines (1) and (2)	•	d	
90		8	Total expenses	per line 17, Form 99	10		
<u>▶</u> e					<u> </u>	е	2,424,313
Directors, T	rustees, and Key	Emple	oyees (List each d	one even if not ∞m	pensate	d, see Spe	ecific
3)							
nd address		(B)	Title and average nours per week		employ	ontrib to ee benefit	(E) Expense account and other
		-		-0)	comp	ensalion	allowances
				آءِ ا		_	_
RT, CH	ARLOTTE, NC			0		0	
		l				_	_
BRASS'	OWN, NC			0		0	0
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	VN, NC					0	0
RASSTO		_					
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	mt 7 3,916 ot on d go percetors, T ind address RT, CH2 BRASSI	mt 7 3,916 ot on d 2,880,5 2,880,5 c 2,880,5 otrectors, Trustees, and Key ind address RT, CHARLOTTE, NC BRASSTOWN, NC	mt 7 3,916 c 2,880,522 d 2,880,522 c 2,880,522 d 3 prectors, Trustees, and Key Employed and address (B) (RT, CHARLOTTE, NC NOI BRASSTOWN, NC NOI BRAS	ements with Revenue per Specific Instructions, page 26) support a 2,626,606 b Amounts include on line 17, Form (1) Donated service of facilities \$ (2) Prior year adjust reported on line Form 990 \$ (3) Losses reported Form 990 \$ (4) Other (specify) a 2,880,522 c Line a minus line d Amounts or c Line a minus line d Amounts included Form 990 \$ (2) Other (specify) b c 2,880,522 c Line a minus line d Amounts or c Line a minus line d Amounts or c Line a minus line d Amounts or c Line a minus line d Amounts included on Form 990 \$ (2) Other (specify) b d Add amounts or c Line a minus line d Amounts included on Form 990 \$ (2) Other (specify) c a 2,880,522 c Line a minus line d Amounts or c Line a minus line d Amounts o	rements with Revenue per Specific Instructions, page 26) upport	rements with Revenue per Specific Instructions, page 26) upport a 2,626,606 ot on a 2,	rements with Revenue per specific Instructions, page 26) upport a 2,626,606 a a Total expenses and losses per audited financial statements b Amounts included on fine 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 c line a minus line b d 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) c line a minus line b d d amounts on lines (1) and (2) c line a minus line b d d amounts on line 6b, Form 990 \$ (2) Other (specify) Add amounts on lines (1) and (2) c line a minus line b d d amounts on line 6b, Form 990 \$ (2) Other (specify) Add amounts on lines (1) and (2) c line a minus line b d d amounts on lines (1) and (2) c line a minus line b d d amounts on lines (1) and (2) c line a minus line b d d amounts on lines (1) and (2) c line a minus line b d d amounts on lines (1) and (2) c line a minus line b d d amounts on lines (1) and (2) c line a minus line b d d amounts on lines (1) and (2) c line a minus line b d d amounts on lines (1) and (2) c line a minus line b d d amounts on lines (1) and (2) c line a minus line b d d amounts on lines (1) and (2) c line a minus line b d d amounts on lines (1) and (2) c line a minus line b d d amounts on lines (1) and (2) c line a minus line b d d amounts on lines (1) and (2) c line a minus line b d d amounts on lines (1) and (2) c line a minus line b d d amounts on lines (1) and (2) c line a minus line b d d amounts on lines (1) and (2) c line a minus line b d amounts on lines (1) and (2) c line a minus line b d amounts on lines (1) and (2) c line a minus line b d amounts on lines (1) and (2) c line a minus line b d amounts on lines (1) and (2) c line a minus line b d amounts on lines (1) and (2) c line a minus line b d amounts on lines (1) and (2) c line a min

Form	1 990 (2001) JOHN C. CAMPBELL FOLK SCHOOL, INC. 56-0552780		Pa	age 5
Pi	art VI Other Information (See Specific Instructions on page 27)	<u>,—</u>	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	76		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS?	77		X
	If "Yes " attach a conformed copy of the changes			
78a	Did the organization have unrelated business gross inc. of \$1,000 or more during the year covered by this return?	78a		х
ь	If "Yes," has it filed a tax return on Form 990-T for this year?	78b		X
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a			
	statement	79		x
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?	80a		X
ь	If "Yes," enter the name of the organization			
_	and check whether it is exempt OR nonexempt	l .		
81a	Enter direct or indirect political expenditures. See line 81 instr.	1		i
Ь	Did the organization file Form 1120-POL for this year?	81b		X
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge	0.5		
024	or at substantially less than fair rental value?	82a		x
ь	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue	JEG		
U	in Part I or as an expense in Part II (See instructions in Part III)			
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	х	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contributions		بدد	
	or gifts were not tax deductible?	84b	<u>" , " </u>	
85	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members? N/A	85a		
ь	Did the organization make only in-house lobbying expenditures of \$2,000 or less? N/A	85b		
_	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization	1	, ,	
	received a waiver for proxy tax owed for the pnor year		" ","	
С	Dues assessments, and similar amounts from members 85c		, 1	î
d	Section 162(e) lobbying and political expenditures 85d	1		1
8	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f	,	,	
g	Does the organization elect to pay the section 6033(e) tax on the amount in 85f? N/A	85g		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to its reasonable			
	estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? N/A	85h	1	
86	501(c)(7) orgs. Enter a Initiation fees and capital contributions included on line 12	•	٠ " ،	.33* - 1
b	Gross receipts, included on line 12 for public use of club facilities 86b] ,		
87	501(c)(12) orgs Enter a Gross income from members or shareholders 87a] .,	794 E	
b	Gross income from other sources (Do not net amounts due or paid to other			<i>(</i> *
	sources against amounts due or received from them)	. ,		
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	88		X
89a	501(c)(3) organizations. Enter Amount of tax imposed on the organization during the year under	-		1
	section 4911 ▶ 0 , section 4912 ▶ 0 , section 4955 ▶ 0			
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	89b		<u>X</u> _
C	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under			
	sections 4912, 4955, and 4958			0
d	Enter Amount of tax on line 89c, above, reimbursed by the organization		_	0
90a	List the states with which a copy of this return is filed NC	_	_	
b	Number of employees employed in the pay period that includes March 12, 2001 (See instructions) 90b	4:		
91	The books are in care of ▶ JOHN CAMPBELL FOLK SCHOOL Telephone no ▶ 828-	837	-27	75
_	Located at ► ONE FOLK SCHOOL ROAD, BRASSTOWN, NC ZIP+4 ► 28902			
92	Section 4947(a)(1) nonexempt chantable trusts filing Form 990 in lieu of Form 1041- Check here			▶ []
	and enter the amount of tax-exempt interest received or accrued during the tax year		25.5	
		Form	990	(2001)

Part VII	Part VII						9 32)	Page 6
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Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See Specific Instructions on page 33.) Name, address and EIN of corporation, partnership, or disregarded entity N/A Percentage of ownership interest N/A N/A Part X Information Regarding Tran Sociated with Personal Benefit Contracts (See Specific Instructions on pg. 33.) (a) Did the organization, during the year receive on the contract of the organization, during the year, of promiums, directly or indirectly, on a personal benefit contract? Ves X No Note If "Yes" to (b), file Form 8870 and Form 4720 (see instructions) Under penalties of perjury I decorp that I have examined this return, including accompanying schedules and statements and to the best of my knowledge of than officer) is based on all information of which preparer has any knowledge					SIODENIS I	17 A G Ti	ONG	<u> </u>
Name, address and EIN of corporation, partnership, or disregarded entity N/A Percentage of ownership interest N/A 96 Part X Information Regarding Tran 30 Did the organization, during the year receive on 12, c city or indirectly, to pay premiums on a personal benefit contract? (b) Did the organization, during the year, promiums, directly or indirectly, on a personal benefit contract? Ves X No Note If "Yes" to (b), file Form 8870 and Form 4720 (see instructions) Under penalties of perjury 1 decima that I have examined this return, including accompanying schedules and statements and to the best of my knowledge or than officer) is based on all information of which preparer has any knowledge Than officer) is based on all information of which preparer has any knowledge Than officer) is based on all information of which preparer has any knowledge		DISTANCES PROM 1	HE SCHOOL.	<u> </u>				
Name, address and EIN of corporation, partnership, or disregarded entity N/A Percentage of ownership interest N/A 96 Part X Information Regarding Tran 30 Did the organization, during the year receive on 12, c city or indirectly, to pay premiums on a personal benefit contract? (b) Did the organization, during the year, promiums, directly or indirectly, on a personal benefit contract? Ves X No Note If "Yes" to (b), file Form 8870 and Form 4720 (see instructions) Under penalties of perjury 1 decima that I have examined this return, including accompanying schedules and statements and to the best of my knowledge or than officer) is based on all information of which preparer has any knowledge Than officer) is based on all information of which preparer has any knowledge Than officer) is based on all information of which preparer has any knowledge	Post IV	Information Begarding T	eveble Subordia	sion and Di	responded Estat		.	
Name, address and EIN of corporation, partnership, or disregarded entity N/A Part X Information Regarding Tran Sociated with Personal Benefit Contracts (See Specific Instructions on pg. 33.) (a) Did the organization, during the year receivors of the programment of the organization, during the year, promums, directly or indirectly, to pay premiums 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 december that I have examined this return, including accompanying schedules and statements and to the best of my knowledge or than officer) is based on all information of which preparer has any knowledge	Parcix)	(A)	(B)	Ties and Dis		1 83 (See S		
N/A % Part X Information Regarding Tran Sociated with Personal Benefit Contracts (See Specific Instructions on pg. 33.) (a) Did the organization, during the year receive contract, and the organization, during the year, promiums, directly, to pay premiums on a personal benefit contract? Yes No Note if "Yes" to (b), file Form 8870 and Form 4720 (see instructions) Under penalties of perjury 1 declaration that 1 have examined this return, including accompanying schedules and statements and to the best of my knowledge or than officer) is based on all information of which preparer has any knowledge Than officer) is based on all information of which preparer has any knowledge							Total income	End-of-year
Part X Information Regarding Transis Sociated with Personal Benefit Contracts (See Specific Instructions on pg. 33.) (a) Did the organization, during the year receive contracts of the contract of the organization, during the year, promiums, directly, to pay premiums on a personal benefit contract? (b) Did the organization, during the year, promiums, directly or indirectly, on a personal benefit contract? (b) Note If "Yes" to (b), file Form 8870 and Form 4720 (see instructions) Under penalties of perjury 1 declars that I have examined this return, including accompanying schedules and statements and to the best of my knowledge or than officer) is based on all information of which preparer has any knowledge			Ownership interes					assets
Note If "Yes" to (b), file Form 8870 and Form 4720 (see instructions) Under penalties of perjury I declars that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge in than officer) is based on all information of which preparer has any knowledge 5 8 2								
Note If "Yes" to (b), file Form 8870 and Form 4720 (see instructions) Under penalties of perjury I declars that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge in than officer) is based on all information of which preparer has any knowledge 5 8 2	<u>-</u>			79				
Note If "Yes" to (b), file Form 8870 and Form 4720 (see instructions) Under penalties of perjury I declars that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge in than officer) is based on all information of which preparer has any knowledge 5 8 2			- C. C.				-	
Note If "Yes" to (b), file Form 8870 and Form 4720 (see instructions) Under penalties of perjury I decizro that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge or than officer) is based on all information of which preparer has any knowledge 5 8 2-	Part Y	Information Pegarding To	ran-304 (300)	ated with B	erconal Bonofit	Contrac	E (See Specific Instruc	tono on no 22 \
Note If "Yes" to (b), file Form 8870 and Form 4720 (see instructions) Under penalties of perjury I decizro that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge or than officer) is based on all information of which preparer has any knowledge 5 8 2-		ha organization during the upon market	anti-					
Note If "Yes" to (b), file Form 8870 and Form 4720 (see instructions) Under penalties of perjury I decizro that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge or than officer) is based on all information of which preparer has any knowledge 5 8 2-		the organization, during the year receive	Commune directly				ır	
Under penalties of perjury I decizro that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge or than officer) is based on all information of which preparer has any knowledge 5 8 2		ere organization, during the year, pr	4730 (see preference		n a personal benefit i	onitad,		∐ tes 75 Mo
ir than officer) is based on all information of which preparer has any knowledge	14019 11 1				noomoon are school de		ante and to the heat of	
582		Civiler behaviors or beilight 1 dectars to	ri i risto evenimen niiz i					
					,			•
					-			

Form 990 (2001) JOHN C. CAMPBELL FOLK SCHOOL, INC. 56-0552780

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 Supplementary Information-(See separate instructions)

OMB No 1545-0047

Employer identification number

2001

Department of the Treasury Internal Revenue Service Name of the organization

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

TOWN C	CAMPBELL FOLK SCHOOL, IN	ic		56-055278	0
Part I	Compensation of the Five Highest Paid		n Officers, Direc		
	(See page 1 of the instructions List each				
(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 ben plans & deferred compensation	(e) Expense account and other allowances
None					
_					
	<u> </u>				
Fotal number of	of other employees paid over		~	, x ,	
50,000	<u>\</u>		***		* * * * * * * * * * * * * * * * * * * *
Part II	Compensation of the Five Highest Paid (See page 2 of the instr. List each one (one ")
 -	(a) Name and address of each independent contractor paid	more than \$ 50,000	(b) Type	of service	(c) Compensation
None					
-					
				- .	
					-
Fotal number o professional se	of others receiving over \$50,000 for envices			*	

For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ

Schedule A (Form 990 or 990-EZ) 2001

Sch	edule	A (Form 990 or 990-EZ) 2001 JOHN C. CAMPBELL FOLK SCHOOL, INC. 56-0552780	1	P	age 2
P	art I	Statements About Activities (See page 2 of the instructions)		Yes	No
1	Du	iring the year, has the organization attempted to influence national, state, or local legislation, including any			
	atte	empt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid	1	<u> </u>	X
		incurred in connection with the lobbying activities			
		rt VI-A, or line i of Part VI-B)			
		ganizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other		1	
	_	ganizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of be lobbying activities]
2		iring the year, has the organization, either directly or indirectly, engaged in any of the following acts with any		İ	1
		bstantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or			
	wit	h any taxable organization with which any such person is affiliated as an officer, director trustee, majority		Ì	
	ow	mer, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the		۱,	
		nsactions)			
а	Sal	le, exchange, or leasing of property?	2a		X
b	Lei	nding of money or other extension of credit?	2b		X
С	Fu	mishing of goods, services, or facilities?	2c		x
d	Day	yment of compensation (or payment or reimbursement of exp. if more than \$1 000)?	2d		Х
•		yment of compensation to payment of remodisement of exp. If more than \$1,000%	- Zu		-
0	Tra	ensfer of any part of its income or assets?	2е		X
3	Do	es the organization make grants for scholarships, fellowships, student loans, etc ? (See Note below)	3		x
4		you have a section 403(b) annuity plan for your employees?	4		X
Note		ach a statement to explain how the organization determines that individuals or organizations receiving grants		,	٤.
or lo	ans f	from it in furtherance of its chantable programs "qualify" to receive payments			
Pa	art l	Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions)			
The	orgai	nization 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	X	A school Section 170(b)(1)(A)(ii) (Also complete Part V)			
7	Н	A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(III)			
8 9	Н	A Federal state, or local government or governmental unit Section 170(b)(1)(A)(v) A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city,			
3		A medical research organization operated in conjunction with a nospital Section 170(b) (1/A) in the the nospital s name, city,			
	_	and state >			
10	Ц	An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(ive) (Also complete the Support Schedule in Part IV-A))		
11a	П	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			
13	П	by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.) An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations.			
13	П	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)	Line ni		-
		(1)	from a	bove	
					
14_	П	An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instructions.)			

1039	04/24/2002 3 31 PM							
	4 to 4 (5 cm 000 mon 57) 0004	COUNT C CAME	DELL BOLK	CHOOT THE	E6_0EE	270		
		OHN C. CAMP					<u>. </u>	Page 3
	art IV-A Support Schedule (Cor	• •		•		ung		
	You may use the worksheet in the instruc				1			
	ndar year (or fiscal year beginning in)	(a) 2000	(b) 1999	(c) 1998	(d) 1997		(e) To	tal
15	Gifts, grants, and contributions						ł	
	received (Do not include unusual			İ				
	grants See line 28)				 		<u> </u>	
16	Membership fees received						<u></u>	
17	Gross receipts from admissions merchandise							
	sold or services performed, or furnishing of				1	i	1	
	facilities in any activity that is related to			}	1		ĺ	
	the organization's chantable_etc_purpose				<u> </u>			
18	Gross inc. from int. dividends amounts							
	received from pymt on securities							
	loans (section 512(a)(5)) rents, royalties, &		•					
	unrelated busin taxable inc. (less sec 511 taxes) from businesses acquired]		ĺ	
	by the organization after June 30 1975				1			
19	Net income from unrelated business			1				
	activities not included in line 18							
20	Tax revn levied for the organization's ben		-		† · ·			
	& either paid to it or expended on its behalf						ļ	
21	The value of serv or fact furnished to the			· -	 			
•	org by a governmental unit without charge			İ				
	Do not incl. the value of serv or fac gen-							
22	erally furnished to the public without charge Other income Attach a schedule Do not						·	
	include gain or (loss) from sale of cap assets						l	
23	Total of lines 15 through 22	-			 			
24	Line 23 minus line 17		•	 -	 			
				 	<u> </u>			
25	Enter 1% of line 23	44 - 5-4 00/-		\ i== 04		00-	 	
26	Organizations described on lines 10 or	11 a Enter 2% (of amount in column (e), une 24		26a		
_	Description of the first control of the character of the control o	same of and amount a		(ather thee e		ł		
0	Prepare a list for your records to show the		• ,	•				
	governmental unit or publicly supported or	•	•					
	amount shown in line 26a Do not file this	•	Enter the total of all th	ese excess amounts		26b	 -	
	Total support for section 509(a)(1) test Er				•	26c		
d	Add Amounts from column (e) for lines	18	19			\vdash		
		22	26b		.	26d		
e	Public support (line 26c minus line 26d tot	•			.	26e		
<u>f</u>	Public support percentage (line 26e (nu	•				26f		%
27	Organizations described on line 12	a For amounts includ			•			
	person," prepare a list for your records to			d in each year from, ea	ch *disqualified p	erson "	,	•
	Do not file this list with your return Ent	ter the sum of such amo	ounts for each year					N/A
	(2000) (1:	999)	(1998)	(199	97)		
b	For any amount included in line 17 that wa	is received from each p	erson (other than "disc	qualified persons"), pre	pare a list for you	r recor	ds to	
	show the name of, and amount received for	or each year that was r	more than the larger of	f (1) the amount on line	25 for the year o	r (2) \$	5,000	
	(Include in the list organizations described	in lines 5 through 11, a	as well as individuals)	Do not file this list wi	th your return #	After co	mputing	
	the difference between the amount receive	ed and the larger amou	nt described in (1) or (2	2), enter the sum of the	ese differences (th	ne exce	ess	
	amounts) for each year							N/A
	(2000) (19	999)	(1998))	(199	97)		
С	Add Amounts from column (e) for lines	15	16		•			
	17	20	21		•	27c		
d	Add Line 27a total	and line 27			•	27d		
е	Public support (line 27c total minus line 27				•	27e		
f	Total support for section 509(a)(2) test Er		column (e)	▶ 27f	-			

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.

g Public support percentage (line 27e (numerator) divided by line 27f (denominator))

h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))

27g

27h

Sche	edule A (Form 990 or 990-EZ) 2001 JOHN C. CAMPBELL FOLK SCHOOL, INC. 56-0552780		ρ	age 4
$\overline{}$	art V Private School Questionnaire (See page 7 of the instructions)		<u> </u>	uge 4
	(To be completed ONLY by schools that checked the box on line 6 in Part IV)			
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws,		Yes	No
	other governing instrument, or in a resolution of its governing body?	29	X	
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its	1	1	
	brochures, catalogues, and other written communications with the public dealing with student admissions,	-		-
24	programs, and scholarships?	30	X	-
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?	31	x	-
	If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)	J.	-	
	THE RACIALLY NONDISCRIMINATORY POLICY FOR JOHN C. CAMPBELL FOLK			
	SCHOOL, INC. IS PUBILICIZED ANNUALLY IN THE COURSE CATLOG.			<u> </u>
	·	'	•	
				Į į
32	Does the organization maintain the following			
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	<u> </u>	X
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory			
	basis?	32b	X	<u> </u>
С	Copies of all catalogues, brochures announcements and other written communications to the public dealing			
	with student admissions, programs, and scholarships?	_32c	X	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d	X	
	16 cent and while the control of the characteristic (16 cent and control of the characteristic)		۱.	
	If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement) See Statement 9	*	Ì	1 1
	bee beatement b			
33	Does the organization discriminate by race in any way with respect to		,	
-	2000 the diganization allowinimate by 1000 in any many support to		•	
а	Students' rights or privileges?	33a		X
b	Admissions policies?	33Ь		X
C	Employment of faculty or administrative staff?	33c		X
		,	l	l
d	Scholarships or other financial assistance?	33d		X
_	Educational actions 2			
е	Educational policies?	33e		X
f	Use of facilities?	33f		x
•	ose of lactities:	331		
9	Athletic programs?	33g		x
3	F. G			
h	Other extracumcular activities?	33h		х
		-		
	If you answered "Yes" to any of the above please explain (If you need more space, attach a separate statement)			
• 4				
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		<u> </u>
L	Has the exceptration's path to ever had ever been equalled as every			v
D	Has the organization's right to such aid ever been revoked or suspended? If you are wered "You" to either 245 or burlesse explain using an attached statement.	34 <u>b</u>		X
	If you answered "Yes" to either 34a or b, please explain using an attached statement	1		
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	35	x	

Schedule A (Form 990 or 990-EZ) 2001 JOHN C. CAMPBELL FOLK SCHO			56-0		/80 r	Page 5
Part VI-A Lobbying Expenditures by Electing Public Charities (See pa	_		ruction N/A			
					ol" provisions appl	у
Limits on Lobbying Expenditures		+	(a) group tota		(b) To be complete for ALL electing organizations	ad
(The term "expenditures" means amounts paid or incurred) 6 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36			_	v.g	
7 Total lobbying experientures to influence a legislative body (direct lobbying)	37		-		•	
88 Total lobbying experiences (add lines 36 and 37)	38			-		
9 Other exempt purpose expenditures	39		-			
10 Total exempt purpose expenditures (add lines 38 and 39)	40			•	_	
11 Lobbying nontaxable amount Enter the amount from the following table-		w w		,	•	
If the amount on line 40 is- The lobbying nontaxable amount is-					~ 4	
Not over \$500,000 20% of the amount on line 40	7 †			ŀ		
Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000	- "	×4				
Over \$1,000,000 but not over \$1 500,000 \$175,000 plus 10% of the excess over \$1,000,000	41					
Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500 000	, ,	, ,	Ž11			,,
Over \$17 000,000 \$1 000,000	ـــــا ل					.4
I2 Grassroots nontaxable amount (enter 25% of line 41)	42					
3 Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43					
4 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		<u> </u>			·	* *
4-Year Averaging Period Under Section	-	-				
(Some organizations that made a section 501(h) election do not have to comp		of the five co	lumns be	elow		
See the instructions for lines 45 through 50 on page 11 of the instru	ictions)				 	
Lobbying Expenditures	During	4-Year Ave	ragıng F	Period		
Calendar year (or (a) (b)	(c)		(d)		(e)	
fiscal year beginning in) ▶ 2001 2000 15	999		1998		Total	
15 Labburg and suble and suble				1		
15 Lobbying nontaxable amount 16 Lobbying ceiling amount (150% of	1, * 4					
		* * * * * * * * * * * * * * * * * * *	£ .			
line 45(e))		` 	· · · - · · · · · · · · · · · · · · · ·			
17 Total lobbying expenditures				1		
8 Grassroots nontaxable amount						
9 Grassroots ceiling amount (150% of	s ⁶					
Ine 48(e))		, ,	*			
GO Grassroots lobbying expenditures						
Part VI-B Lobbying Activity by Nonelecting Public Charities (For reporting only by organizations that did not complete Part	→ \ // ∧) /Saa na	ao 12	of tha	inetr \	N/I
During the year, did the organization attempt to influence national, state or local legislation, including) (See pa	ge iz		ii isti j	14/ 5
strempt to influence public opinion on a legislative matter or referendum, through the use of	arry		Yes	No	Amount	
			-		*	
 Paid staff or management (include compensation in expenses reported on lines c through h) Media advertisements 						
				 		
			—			
d Mailings to members, legislators, or the public						
 d Mailings to members, legislators, or the public e Publications, or published or broadcast statements 						
 d Mailings to members, legislators, or the public e Publications, or published or broadcast statements f Grants to other organizations for lobbying purposes 						
 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 						
 d Mailings to members, legislators, or the public e Publications, or published or broadcast statements f Grants to other organizations for lobbying purposes 						

Schedule A (Form	n 990 or 990-EZ) 2001	JOH	<u>1 C.</u>	CAMPBEL	L FOLK	SCHOOL,	INC.	<u> 56-055278</u>	0	P	age 6
Part VII	Information Rega						nships V	/ith Noncharitab	le		
E4 Doddhaaa	Exempt Organiza										
	orting organization directive Code (other than sections)										
	rom the reporting organi		-				n gunization	3.		Yes	No
(ı) Cash			0,10,10,10	and one mpt of gr					51a(ı)	1 30	X
• • •	r assets								a(II)		X
b Other trans	actions										
(ı) Sales	s or exchanges of asset	s with a none	chantable	exempt organiz	zation				b(ı)	<u> </u>	X
(n) Purci	hases of assets from a r	nonchantable	exempt	organization					b(II)		X
` '	al of facilities, equipmen	•	sets						b (m)	<u> </u>	X
	bursement arrangemen	its							b(1V)	 	X
-	s or loan guarantees								b(v)	-	X
	ormance of services or n								_b(vı)		X
	facilities, equipment, ma					(b) aboutd about	a abaw tha f	ing market value of the	<u> </u>	l	X
	er to any of the above is er assets, or services giv								e		
-	or sharing arrangement	•	-	_	_			-			
(a)	(b)	1	(0)_	(c)	90000, 00.0	, 4000,0, 0, 00, 11	<u> </u>	(d)	•		
Line no	Amount involved	Name o	f nonchari	table exempt orga	nization	Description	n of transfers	transactions, and shanny	q arrangem	ents	
N/A						<u> </u>					
					\longrightarrow						
		ļ									
		 									
		 									
.	-										
	:										
		 			-						
	<u> </u>	-						· · · · · · · · · · · · · · · · · · ·			
		1	_								
•											
							·		-		
52a Is the organ	nization directly or indire	ctly affiliated	with, or	related to, one o	or more tax-e	xempt organizati	ons				
	n section 501(c) of the C	-	han secti	on 501(c)(3)) or	in section 5	27?		•	∐ Y.	es X	No
b If "Yes," cor	mplete the following sch	edule			 -						
	(a)			(b)	İ			(c)			
N/A	Name of organization		 	Type of organizat	10n		Desc	enption of relationship			
11/21			 								
_								· - · - · · · · · · · · · · · · · · · ·			
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		- · - ·	 - -			<u>-</u>	<u> </u>				
			 								

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of organization

Schedule of Contributors

Supplementary Information for line 1 of Form 990, 990-EZ and 990-PF (see instructions) OMB No 1545-0047

2001

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2001)

	MPBELL FOLK SCHOOL, INC.	56-0552780			
Organization type (che	eck 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 chantable trust treated as a private foundation	n			
	501(c)(3) taxable private foundation				
• •	tion is covered by the General rule or a Special rule (Note Only a section 501(c)) box(es) for both the General rule and a Special rule-see instructions)	(7), (8), or (10)			
General Rule-					
_	ons filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or mo any one contributor. (Complete Parts I and II.)	re (in money or			
Special Rules-					
under sections	601(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% supposed $509(a)(1)/170(b)(1)(A)(v)$ and received from any one contributor, during the year, a 00 or 2% of the amount on line 1 of these forms. (Complete Parts I and II.)				
during the year	i01(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from aggregate contributions or bequests of more than \$1 000 for use exclusively for receive, or educational purposes, or the prevention of cruelty to children or animals. (Cor	eligious, chantable,			
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.)					
990-EZ, or 990-PF), but	s that are not covered by the General rule and/or the Special rules do not file Sched t they must check the box in the heading of their Form 990, Form 990-EZ, or on line they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-P	e 1 of their Form			

Page 1 to 2 of Part I

	_		
lame o	of organiza	ation	

JOHN C. CAMPBELL FOLK SCHOOL, INC.

Employer identification number 56-0552780

Part I	Contributors (See Specific Instructions)		
(a) No	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1		\$ 58,725	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) N o		(c) Aggregate contributions	(d) Type of contribution
2		s 120,000	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No		(c) Aggregate contributions	(d) Type of contribution
4		s 25,000	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No		(c) Aggregate contributions	(d) Type of contribution
5		\$ 10,000	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No		(c) Aggregate contributions	(d) Type of contribution
6		\$ 40,000	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No		(c) Aggregate contributions	(d) Type of contribution
8	,	s 25,000	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)

Schedule B (Form 990, 990-EZ, or 990-PF) (2001) to 2 of Part I Employer identification number Name of organization JOHN C. CAMPBELL FOLK SCHOOL, INC. 56-0552780 Part I Contributors (See Specific Instructions) (b) (c) (d) (a) Name, address and ZIP + 4 Aggregate contributions Type of contribution No 9_ Person Payroll 10,576 Noncash (Complete Part II if there is a noncash contribution) (b) (c) (d) (a) Name, address and ZIP + 4 Aggregate contributions Type of contribution No Person **Payroll** Noncash (Complete Part II if there is a noncash contribution) (b) (c) (d) (a) Name, address and ZIP + 4 Type of contribution No Aggregate contributions Person **Payroll** Noncash (Complete Part II if there is a noncash contribution) (c) (a) (b) (d) No Name, address and ZIP + 4 Aggregate contributions Type of contribution Person Payroll Noncash (Complete Part II if there is a noncash contribution) (a) (b) (c) (d) Name, address and ZIP + 4 Aggregate contributions Type of contribution No Person **Payroll** \$ Noncash (Complete Part II if there is a noncash contribution) (c) (d) (a) Name, address and ZIP + 4 No Aggregate contributions Type of contribution Person Payroll \$ Noncash

(Complete Part II if there is a noncash contribution)

Schedule B (Form 990 990-EZ, or 990-PF) (2001) to 1 of Part II Employer identification number Name of organization JOHN C. CAMPBELL FOLK SCHOOL, INC. 56-0552780 Part II Noncash Property (See Specific Instructions) (a) No (c) (d) (b) FMV (or estimate) from Description of noncash property given Date received Part I (see instructions) 200 SHARES OF MERRIL LYNCH & CO, 9_ INC. STOCK 10,576 7/31/01 \$ (c) (a) No (b) (d) from FMV (or estimate) Date received Description of noncash property given (see instructions) Part I \$ (a) No (c) (b) (d) FMV (or estimate) from Description of noncash property given Date received Part I (see instructions) \$ (a) No (c) (b) (d) FMV (or estimate) from Description of noncash property given Date received Part I (see instructions) \$ (a) No (c) (b) (d) FMV (or estimate) from Description of noncash property given Date received Part I (see instructions) \$ (a) No (c) (b) (d) FMV (or estimate) from Description of noncash property given Date received Part I (see instructions) \$

		Spe	cial Events Sch	edule		2001
Form 99						
me	For calend	dar year 2001 or tax year beg	ginning	, and endir		entification Numbe
JOHN C.	. CAMPBELL	FOLK SCHOOL, 1	INC.		56-055	2780
		(A)	(B)	(C)	Others	Total
Gross rec	eipts	41,174	17,268	0	0	58,44
_ess cont	ributions	0	0	0	0	
Gross revo	enue	41,174	17,268	0	0	58,44
ess direc	ct expenses	12,265	0	0	0	12,26
Net incom	ie (loss)	28,909	17,268	0	0	46,17
escriptio A) B)	ons <u>FALL FES</u> <u>CRAFT AU</u>					
A) B)	FALL FES					
A) B) C)	FALL FES					
A) B)	FALL FES					
A) B) C)	FALL FES					
A) B) C)	FALL FES					
A) B) C)	FALL FES					
A) B) C)	FALL FES					
A) B) C)	FALL FES					
B) C)	FALL FES					
A) B) C)	FALL FES					
A) B) C)	FALL FES					

Department of the Treasury Internal Revenue Service

4562 Form

Depreciation and Amortization

See separate instructions

(Including Information on Listed Property)

Attach this form to your return

OMB No 1545-0172

2001

Attachment Sequence No

JOHN C. CAMPBELL FOLK SCHOOL, INC. Name(s) shown on return Identifying number 56-0552780 Business or activity to which this form relates Indirect Depreciation Election To Expense Certain Tangible Property Under Section 179 Part I Note: If you have any "listed property," complete Part V before you complete Part I \$24,000 Maximum dollar limitation. If an enterprise zone business, see page 2 of the instructions 1 Total cost of section 179 property placed in service (see page 2 of the instructions) 2 3 \$200,000 Threshold cost of section 179 property before reduction in limitation Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-4 Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If marned filing separately, see page 2 of the instructions 5 (c) Elected cost (b) Cost (business use only) (a) Description of property 7 Listed property. Enter amount from line 27 Total elected cost of section 179 property. Add amounts in column (c) lines 6 and 7 8 Tentative deduction. Enter the smaller of line 5 or line 8. 9 10 Carryover of disallowed deduction from 2000 (see page 3 of the instructions) 10 11 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2002 Add lines 9 and 10, less line 12 Note Do not use Part II or Part III below for listed property (automobiles certain other vehicles, cellular telephones, certain computers, or property used for entertainment, recreation, or amusement). Instead, use Part V for listed property MACRS Depreciation for Assets Placed in Service Only During Your 2001 Tax Year (Do not include listed property) Part II Section A-General Asset Account Election If you are making the election under section 168(i)(4) to group any assets placed in service during the tax year into one or more general asset accounts, check this box. See page 3 of the instructions Section B-General Depreciation System (GDS) (See page 3 of the instructions) (c) Basis for depreciation (b) Month and year placed in (d) Recovery (e) Convention (f) Method (g) Depreciation deduction (a) Classification of property (business/Investment use period service only-sea instructions) 3-year property b 5-year property 7-year property d 10-year property 15-year property 20-year property 25-year property 25 yrs S/L S/L h Residential rental 27 5 yrs MM ММ S/L property 27 5 yrs Nonresidential real MM 39 vrs S/L property MM S/L Section C-Alternative Depreciation System (ADS) (See page 5 of the instructions) 16a Class life S/L 12 yrs b 12-year S/L 40-vear 40 vrs Other Depreciation (Do not include listed property) (See instructions beginning on page 5 Part III 29,416 17 GDS and ADS deductions for assets placed in service in tax years beginning before 2001 17 18 Property subject to section 168(f)(1) election 18 112,457 19 ACRS and other depreciation 19 Part IV Summary (See page 6 of the instructions) 20 Listed property Enter amount from line 26 20 21 Total Add deductions from line 12, lines 15 and 16 in column (g), and lines 17 through 20. Enter 141,873 here and on the appropriate lines of your return. Partnerships and S corporations-see instructions 21 22 For assets shown above and placed in service during the current year,

1039 JOHN C CAMPBELL FOLK SCHOOL, INC

56-0552780

Federal Statements

FYE: 12/31/2001

Statement 1 - Form 990, Part I, Line 8c - Sale of Assets Other Than Inventory - Other

	Desc				How Rec'd		Whom Sold		
	Date Acquired	Date Sold		Sale Price	Cost & Expense	_	Deprec		Gaın/ -Loss
SPINNING WHEEL				Pui	rchase				
	5/13/86	4/16/01	\$	1,606	\$	\$;	\$	1,606
KILN				Pui	rchase				
	7/01/88	4/13/01		1,406					1,406
UNITED STATES TRUST	OF N.Y.								
				42,946					42,946
REST. SHOLARSHIP IN	VESTMENTS								
				122					122
Total			\$_	46,080	\$ 0	\$_	0	\$ <u></u>	46,080

Statement 2 - Form 990, Line 10c - Sales of Inventory

Description	Gross Sales	cogs	Gross Profit
CRAFT SHOP & DINING HALL	\$ 573,404	\$ 490,974	\$ 82,430
Total	\$ 573,404	\$ 490,974	\$ 82,430

4/24/2002 3 31 PM

1039 JOHN C CAMPBELL FOLK SCHOOL, INC.

Federal Statements

FYE 12/31/2001

56-0552780

Statement 3 - Form 990, Part II, Line 43 - Other Functional Expenses

Description	Total Expenses	Program Service	Mgt & General	Fund- Raising
	\$	\$	\$	\$
Expenses				
BANK CHARGES	1,278		1,278	
CREDIT CARD FEES	28,404		28,404	
HOST SUBSIDY	4,150		4,150	
INSTRUCTION	296,816	296,816	·	
INSURANCE	54,614		54,614	
INVESTMENT EXPENSES	8,005		8,005	
TAXES & LICENSES	3,326		3,326	
MISCELLANEOUS	821		821	
STUDENT TRANSPORTATION	14,635	14,635		
Total	\$ 412,049	\$ 311,451	\$ 100,598	\$ 0

Statement 4 - Form 990, Part III - Organization's Primary Exempt Purpose

THE JOHN C CAMPBELL FOLK SCHOOL, INC. STRIVES TO ENCOURAGE INDIVIDUAL TALENT AND COMMUNITY LIFE THROUGH THE DEVELOPMENT OF CREATIVE EXPRESSION AND LEARNING BY DOING. ROOTED AS IT IS IN THE HISTORY AND CULTURE OF THE REGION, THE FOLK SCHOOL FOSTERS KNOWLEDGE AND APPRECIATION OF NATURE, MUSIC, DANCE, FOLKLORE, TRADITIONAL AND CONTEMPORARY CRAFTS THROUGH EDUCATION, MARKETING, RESEARCH, ARCHIVING, COMMUNITY SERVICE AND PUBLIC PROGRAMMING.

4/24/2002 3 31 PM

• 1039 JOHN C CAMPBELL FOLK SCHOOL, INC 56-0552780 Federal S

Federal Statements

FYE 12/31/2001

Statement 5 - Form 990, Part IV, Line 56 - Other Investments

Description	Beginning of Year	End of Year	Basis of Valuation
UNITED STATES TRUST COMPANY OF N.Y.	\$ 1,493,190	\$ 1,723,571	
Total	\$ 1,493,190	\$ 1,723,571	

Statement 6 - Form 990, Part IV, Line 58 - Other Assets

Description	eginning of Year	End of Year
CONSTRUCTION IN PROGRESS	 \$ 3,726	\$ 16,837
UTILITY DEPOSIT	50	50
MUSEUM COLLECTION EXHIBITS	8,175	 8,175
Total	\$ 11,951	\$ 25,062

1039 JOHN C CAMPBELL FOLK SCHOOL, INC

56-0552780

Federal Statements

FYE: 12/31/2001

4/24/2002 3 31 PM

Statement 7 - Form 990, Part IV-A - Other Revenue Included in Financial Statements

Description	Amount
UNREALIZED LOSSES ON INVESTMENTS	\$ -253,916
Total	\$ -253,916

Statement 8 - Form 990, Part V - List of Officers, Directors, Trustees, and Key Employees

_Name		Address
	Title	Average Hours Compensation Benefits Expenses
JILL RUANE	-	413 MOUNTAINDALE RD, CHATTANOOGA, TN
	DIRECTOR	NONE
TIM RYAN		P.O. BOX 39, BRASSTOWN, NC
	DIRECTOR	NONE
CLAY SPENCER		934 PARTRIDGE LN, MURPHY,NC
	DIRECTOR	NONE
PHIL MATTOX		P O. BOX 556, MURPHY, NC
	DIRECTOR	NONE
ANN H. TAAFFEE		P.O. BOX 9, MURPHY, NC
	TREASURER	NONE
JOHN A. DAVIDSON		P O. BOX 157, BRASSTOWN, NC
	CEO	40 72,976 5,341
MARIANNE O. HATCHETT		695 CHATUGE VILLAGE, HAYESVILLE, NC
	BUS MANAGER	• • • • • • • • • • • • • • • • • • • •
JACK SHULTZ		1905 CRESCENT DR, HIAWASSEE, GA
	DIRECTOR	NONE

. 4039 JOHN C CAMPBELL FOLK SCHOOL, INC.

Federal Statements

FYE 12/31/2001

56-0552780

4/24/2002 3 31 PM

Schedule A, Part V, Line 31 - Publication of Nondiscriminatory Policy

THE RACIALLY NONDISCRIMINATORY POLICY FOR JOHN C. CAMPBELL FOLK SCHOOL, INC IS PUBLICIZED ANNUALLY IN THE COURSE CATLOG.

Statement 9 - Schedule A, Part V, Line 32d - Records Maintenance Explanation

ALL STUDENTS ARE ACCEPTED ON A FIRST COME FIRST SERVE BASIS CLASSES LAST A WEEK OR TWO AND INSTRUCTORS ARE HIRED ON A TEMPORARY BASIS