Return of Organization Exempt From Income Tax

2003

OMB No 1545-0047

Open to Public

Department of the Treasury

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

▶ The organization may have to use a copy of this return to satisfy state reporting requirements Inspection Internal Revenue Service JUNE 30,2004 JULY 1, 2003, and ending For the 2003 calendar year, or tax year beginning D Employer Identification number Please C Name of organization Check if applicable 13-3323045 WORLD MUSIC INSTITUTE, INC. Address change label or Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Room/suite print or Name chance 212-545type. 930 49 WEST 27TH STREET Initial return Specific City or town, state or country, and ZIP + 4 F Accounting method: Final return Instruc-NEW YORK NY 10001 Other (specify) > Amended return tions. H and I are not applicable to section 527 organizations Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable Application pending H(a) Is this a group return for affiliates? Yes WNo trusts must attach a completed Schedule A (Form 990 or 990-EZ). H(b) If "Yes." enter number of affiliates ▶ G Website ▶ H(c) Are all affiliates included? Organization type (check only one) ► 🗹 501(c)(3) ► (Insert no) 🗌 4947(a)(1) or 🔲 527 (If "No," attach a list See instructions) H(d) is this a separate return filed by an Check here ▶ ☐ if the organization's gross receipts are normally not more than \$25,000. The organization covered by a group ruling? 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. Group Exemption Number ▶ Check ► Use the organization is not required Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 2, 642, 612 to attach Sch B (Form 990, 990-EZ, or 990-PF) Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 18 of the instructions.) Contributions, gifts, grants, and similar amounts received: 646,099 a Direct public support. 1b 1c d Total (add lines 1a through 1c) (cash \$_____ 1d noncash \$ 2 Program service revenue including government fees and contracts (from Part VII, line 93) 3 Membership dues and assessments...... 4 Interest on savings and temporary cash investments 5 Dividends and interest from securities 6a c Net rental income or (loss) (subtract line 6b from line 6a) 7 Other investment income (describe (B) Other 8a Gross amount from sales of assets other 8a than inventory 8b **b** Less cost or other basis and sales expenses 8c c Gain or (loss) (attach schedule) 8d d Net gain or (loss) (combine line 8c, columns (A) and (B)). . . . Special events and activities (attach schedule) If any amount is from gaming, check here a Gross revenue (not including \$ _____ of 9b **b** Less direct expenses other than fundraising expenses . . . 9с 537 10c Other revenue (thom Part VII, line 103). 11 **Fotal revenue** (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11) 12 Program services (from line 44, column (B)) . . . 13 14 14 Management and general (from line 44, column (C)). 15 15 16 16 17 Total expenses (add lines 16 and 44, column (A)) 17 18 Assets 18 Excess or (deficit) for the year (subtract line 17 from line 12) 19 Net assets or fund balances at beginning of year (from line 73, column (A)) 19 20 20 Other changes in net assets or fund balances (attach explanation) Net Net assets or fund balances at end of year (combine lines 18, 19, and 20)

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2003)

Pa	Statement of All organizations multiple Functional Expenses and section 4947(a)	ust com)(1)non:	plete column (A) Columr exempt charitable trusts	is (B), (C), and (D) are re but optional for others (quired for section 501(c) See page 22 of the instri	i(3) and (4) organizations uctions)
	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 \$ noncash \$)	22				
23	Specific assistance to individuals (attach schedule)	23				
24	Benefits paid to or for members (attach schedule)	24				
25	Compensation of officers, directors, etc	25	72,000	14,400	57.600	
26	Other salaries and wages	26	295,009	59,002	236,007	
27	Pension plan contributions	27				
28	Other employee benefits	28	72,863	14,573	58,290	
29	Payroll taxes	29	29,940	5,988	23,952	
30	Professional fundraising fees	30				
31	Accounting fees	31				
32	Legal fees	32				
33	Supplies	33	5,887	1,177	4,710	
34	Telephone	34	18,262	3,652	14,610	
35	Postage and shipping	35	66,276	13,255	53,021	
36	Occupancy	36	554,907	493,857	61,050	
37	Equipment rental and maintenance	37	101,255	87,943	13, 312	
38	Printing and publications	38	51,946	51,946		
39	Travel	39	241,557	237, 335	4,222	
40	Conferences, conventions, and meetings	40				
41	Interest	41				
42	Depreciation, depletion, etc. (attach schedule)	42	505		505	
43	Other expenses not covered above (temize) a	43a				
b	SEE SCHEDULE ATTACHED	43b	1,120,766	1,035,129	85,637	
c		43c				
d		43d				
e		43e				
44	Total functional expenses (add lines 22 through 43) Organizations completing columns (B) - (D), carry these totals to lines 13 - 15	44	2631,173	2.018.257	612,916	
Are a If "Ye (iii) the	t Costs. Check if you are following SOP in yount costs from a combined educational campaignes," enter (i) the aggregate amount of these joint costs amount allocated to Management and general till Statement of Program Service Access	and fus \$	undraising solicitation , (ii) the , and (iv) the ishments (See p	e amount allocated e amount allocated age 25 of the in	to Program services to Fundraising \$ structions.)	
Wha	t is the organization's primary exempt purpose?	▶				Program Service
All o	ganizations must describe their exempt purpose ac ents served, publications issued, etc. Discuss achic nizations and 4947(a)(1) nonexempt charitable trusts	chieve eveme must	ments in a clear an ents that are not me also enter the amou	d concise manner easurable (Section nt of grants and allo	State the number 501(c)(3) and (4)	Expenses (Required for 501(c)(3) and (4) orgs , and 4947(a)(1) trusts, but optional for others)
a .	ARTISTS + TRADITIONAL .	νς c -	TRADITIONAL + DANC ONTEMPORAL and allocations	E BY VI	SITING YUSIC	
*	+ DANCE FROM AFRICA, AMERICA: TNOLUNES S	ALE	SIA, EUROJ	ECORDS, C	ASSETTES	W. W
	+ COMPACT DISCS OF	rants	HIS MUSIC and allocations HIL OPDE	\$	NEER/S	·
Χ.				······································		
- d .	(G	rants	and allocations	\$)	
e ~			and allocations	\$ \$)	
	otal of Program Service Expenses (should equ			*		
	Time tri regium corrido Expenses (snodia equ	- HITC	, , , , , , , , , , , , , , , , , , ,	g . a		

Part IV Balance Sheets (See page 25 of the instructions)

_		, , , , , , , , , , , , , , , , , , , ,	· · · · · · · · · · · · · · · · · · ·		,	
١	loter	Where required, attached schedules and amounts column should be for end-of-year amounts only	within the description	(A) Beginning of year		(B) End of year
	45	Cash — non-interest-bearing		141,032	45	214,608
	46	Savings and temporary cash investments			46	
	'	ournings and temperary such accomments to				
	470	A conjunta ranguja bla	47a			
		Accounts receivable	47b		47c	13,651
	D	Less allowance for doubtful accounts .				
		5	48a			
	1	Pledges receivable	48b		48c	
	ľ	Less: allowance for doubtful accounts		10,000	49	2,000
	49				1	
	50	Receivables from officers, directors, truste			50	
		(attach schedule)				
w	51a	Other notes and loans receivable (attach	51a			
šet	١.	schedule)	51b		51c	
Assets	1	Less allowance for doubtful accounts		46 827	52	43,315
	52			100,790	53	66,769
	53	Prepaid expenses and deferred charges		, - , , , , , .	54	
	54	investments — securities (attach schedule)	····► LJCost LJFMV		- 3-	· · · · · · · · · · · · · · · · · · ·
	55a	Investments — land, buildings, and	55a			
		equipment basis	334			
	b	Less: accumulated depreciation (attach	55b		55c	
		schedule)	3301		56	
	56		57a		30	
	ì	Land, buildings, and equipment: basis	57a			
	b	Less accumulated depreciation (attach	57b	504	57c	
		other assets (describe ► LENT D	EPOSIT	4,225	58	4,225
	58	Other assets (describe	,	1)0.03	30	1)203
	59	Total assets (add lines 45 through 58) (must	equal line 74)	303,378	59	344,568
				14.904	60	26835
	60	Accounts payable and accrued expenses			61	2010 33
	61	Grants payable		261,210	62	279,030
s	62	Deferred revenue		001) 01-	02	<u> </u>
tie	63	Loans from officers, directors, trustees, and			63	
iabilities	C 4 -	schedule)			64a	
Lia		Tax-exempt bond liabilities (attach schedule)			64b	
	65	Mortgages and other notes payable (attach s Other liabilities (describe ►	schedule)		65	
	03	Other habilities (describe	/		- 00	
	66	Total liabilities (add lines 60 through 65)		276,114	66	305,865
	Orac	nizations that follow SFAS 117, check here ▶				
	Orga	67 through 69 and lines 73 and 74.	and complete lines			
Ses	67	Unrestricted	i	27, 264	67	38,703
au		Temporarily restricted			68	
Bal		Permanently restricted		·-	69	
٦		nizations that do not follow SFAS 117, check				
֖֓֞֞֞֞֜֞֡֞֞֜֞֜֡֞֡		complete lines 70 through 74.	mere > E una			
5		Capital stock, trust principal, or current funds			70	
Net Assets or Fund Balances		Paid-in or capital surplus, or land, building, a			71	
sse		Retained earnings, endowment, accumulated	• •		72	
۲		Total net assets or fund balances (add line	i i			
اۊ		70 through 72;	5 57 Milougii 50 01 Milos			
- ,		column (A) must equal line 19; column (B) m	uet aqual line 21)	27, 264	73	38, 703
j		column (A) must equal mie 13, column (D) m	ustequal fille 21)	<u> </u>	13	
_		Total liabilities and net assets / fund balanc		303,378	74	344,568

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 Financial Statements with Return (See page 27 of the	Revenue	per	Fi	econciliation o inancial Staten eturn		
a Total revenue, gains, and other support per audited financial statements. ▶ 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)	b c		audited fin b Amounts in on line 17, (1) Donated and use of (2) Prior year ad reported on Form 990 (3) Losses rep line 20, For (4) Other (spe Add amount c Line a minit d Amounts ir Form 990 (1) Investment of not included 6b, Form 99 (2) Other (spe	facilities \$ justments line 20,	a but not a but not but not and (2) ▶ Form 990 but not define the process of the process	
the instructions.) (A) Name and address		(B) Title a	nd average hours per	(C) Compensation (If not paid, enter	(D) Contributions to employee benefit plans &	(E) Expense
ROBERT BROWNING		EXE	evoted to position CUTIVE + TICDIRECTOR	·0·.)	Z, 160	allowances NONE
SEE	5	Sc	CHEDULE	= A7	TACHE	D
	<u></u>					
75 Did any officer, director, trustee, or key emp organization and all related organizations, of If "Yes," attach schedule — see page 28	which more	than \$10				☐ Yes X No

	330 (2003)		134	
Pa	rt VI Other Information (See page 28 of the instructions.)	Т	Yes	
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76	<u> </u>	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		78a	44	X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	78b	N	X
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	 	
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
b	If "Yes," enter the name of the organization ►			
	Enter direct and indirect political expenditures. See line 81 instructions . [81a]	ا ۱		
	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 or at substantially less than fair rental value?	82a	×	
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.)		J	
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a		<u> </u>
	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X	L
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		A / /	A
	or gifts were not tax deductible?	84b	M/	X
85	501(c)(4),(5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a		×
þ	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b		
	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.			
С	Dues, assessments, and similar amounts from members	_		
d	Section 162(e) lobbying and political expenditures	4	İ]
е	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	-		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	ا م		X
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g		<u> </u>
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	85h		~
	year?	0011		X
86	507(c)(7)07g3 Ellief. a miniation lees and capital contributions moladed on line 12	-		,
	Gross receipts, included on line 12, for public use of club facilities	1		
87	Service Control of Service Contr	1		
b	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			l
	partnership, or an entity disregarded as separate from the organization under Regulations sections	88		×
00-	301.7701-2 and 301.7701-3? If "Yes," complete Part IX	100		<u> </u>
вуа	501(c)(3) organizations Enter: Amount of tax imposed on the organization during the year under. section 4911 ▶; section 4912 ▶; section 4955 ▶			
h	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction	1		
	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	89Ь	}	×
С	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under		/^	
_	sections 4912, 4955, and 4958		/A	
ď	Enter. Amount of tax on line 89c, above, reimbursed by the organization	N	/A	
90a	, ,			
b	Number of employees employed in the pay period that includes March 12, 2003 (See instructions.)			 .
91	The books are in care of \triangleright ROBERT Browning Telephone no. \triangleright 212-	545	5	236
	Located at \$\infty 49 W. 27TH STREET, RM 930, NEW YORK ZIP + 4 \$\infty 10001	- 		
92	Section 4947(a)(1) honexempt charitable trusts himly Form 990 in hed of Form 1041 — Check here		1	▶ ∐
	and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 92		000	(2002)
		Enra	4411	120031

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 page 34 of the institute No. Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the act of the organization's exempt purposes (other than by providing funds for such purposes)	(E) Related or
Program service revenue is a Program service is a debt-inanced property inventory in not debt-inanced property invent	exempt funct
CONCERT FEES C HEADLY + BODICS d DONATED SERVICES e I Medicare/Medicaid payments g Fees and contracts from government agencies 94 Membership dues and assessments 95 Interest on savings and temporary cash investments 96 Dividends and interest from securities 97 Net rental income or (loss) from real estate: 4 debt-financed property inventory 4 b not debt-financed property 98 Netrental income or (loss) from personal property 100 Gain or (loss) from sales of assets other than inventory 101 Net income or (loss) from securities 102 Gross profit or (loss) from sales of inventory 103 Other revenue: a 104 Sublotal (add columns (B), (D), and (E)) 105 Total (add line 104, columns (B), (D), and (E)) 106 Total (add line 104, columns (B), (D), and (E)) 107 Total (add line 104, columns (B), (D), and (E)) 108 Sublotal (add columns (B), (D), and (E)) 109 Total (add line 104, columns (B), (D), and (E)) 109 Total (add line 104, columns (B), (D), and (E)) 100 Total (add line 104, columns (B), (D), and (E)) 101 Total (add line 104, columns (B), (D), and (E)) 102 Gross profit or (loss) from sales of inventory 103 Other revenue: a 104 Sublotal (add columns (B), (D), and (E)) 105 Total (add line 104, columns (B), (D), and (E)) 106 Explain how each activity for which income is reported in column (E) of Pert VII contributed importantly to the activity of which income is reported in column (E) of Pert VII contributed importantly to the activity of which income is reported in column (E) of Pert VII contributed importantly to the activity of which income is reported in column (E) of Pert VII contributed importantly to the activity of which income is reported in column (E) of Pert VII contributed importantly to the activity of line of the contributed importantly to the activity of line of the contributed importantly to the activity of line of the contributed importantly to the activity of line of the contributed importantly to the activity of line of activities of the activity of line of activities of the line of line of the line of act	1 374.5
Medicare/Medicaid payments g Fees and contracts from government agencies 4 Membership dues and assessments	307,8
Medicare/Medicaid payments Fees and contracts from government agencies	69,63
Medicare/Medicard payments General Services Membership dues and assessments General Services Gener	16.7
Medicare/Medicard payments g Feesand contracts from government agencies 94 Membership dues and assessments 95 Interest on savings and temporary cash investments 96 Dividends and interest from securities 97 Net rental income or (loss) from real estate: a debt-financed property inventory 98 Netrental income or (loss) from personal property 99 Other investment income 00 Gain or (loss) from special events 00 00 00 00 00 00 00	
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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.)

2003

OMB No 1545-0047

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

2003

Employer identification number

WORLD MUSIC LINSTITUTE	, /NC.		13-332	
Compensation of the Five High (See page 1 of the instructions. L	est Paid Employees Ot ist each one. If there are	her Than Office e none, enter "N	ers, Directors, a one.")	nd Trustees
(a) Name and address of each employee paid more than \$50,000	(b) Tille and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
	NONE			
Total number of other employees paid over \$50,000 ►				
Compensation of the Five Higher (See page 2 of the instructions. Lis	est Paid Independent C t each one (whether indiv	contractors for iduals or firms).	Professional Se f there are none,	rvices enter "None.")
(a) Name and address of each independent contractor	paid more than \$50,000	(b) Type	of service	(c) Compensation
Ν	ONE			
Total number of others receiving over \$50,000 for professional services				

Pa	rt III	Statements About Activities (See page 2 of the instructions.)		Yes	No
1	atten or in	ng the year, has the organization attempted to influence national, state, or local legislation, including any npt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid curred in connection with the lobbying activities \$\Bigsim \\$ \qu	1		×
	Orga orga	nizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other nizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of obbying activities	! !		-
2	subs with owne	ing the year, has the organization, either directly or indirectly, engaged in any of the following acts with any tantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or any taxable organization with which any such person is affiliated as an officer, director, trustee, majority er, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the factions)			
а		exchange, or leasing of property?	2a		X
b		ing of money or other extension of credit?	2b 2c		X
C		ishing of goods, services, or facilities?	2d		X X
d		nent of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2e		X
e		sfer of any part of its income or assets?			
3a		determine that recipients qualify to receive payments)	3a		×
b	•	ou have a section 403(b) annuity plan for your employees?	3b	X	
4	Did y	rou maintain any separate account for participating donors where donors have the right to provide advice e use or distribution of funds?	4		X
Pai	t IV	Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)			
The 5	_	zation is not a private foundation because it is (Please check only ONE applicable box) church, convention of churches, or association of churches. Section 170(b)(1)(A)(i)			
6		school Section 170(b)(1)(A)(ii) (Also complete Part V)			
7		hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(III).			
8		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 hospind state ►			
10	_ (/	n organization operated for the benefit of a college or university owned or operated by a governmental unit. Section Also complete the Support Schedule in Part IV-A)			
11a	_ s	n organization that normally receives a substantial part of its support from a governmental unit or from the ection 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)	ie gen	eral p	ublic
11b 12	A re	community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.) in organization that normally receives. (1) more than 331/3% of its support from contributions, membership receipts from activities related to its charitable, etc., functions — subject to certain exceptions, and (2) no most support from gross investment income and unrelated business taxable income (less section 511 tax) from buy the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part I	re tha siness	n 331	/3% of
13	☐ A	n organization that is not controlled by any disqualified persons (other than foundation managers) and supplescribed 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)(3))	orts or		
	_	Provide the following information about the supported organizations (See page 5 of the instructions.)		_	
		(a) Name(s) of supported organization(s) (b) Line from	numbe above	r _	
	_			_	
				_	
4	A	n organization organized and operated to test for public safety. Section 509(a)(4) (See page 6 of the instruction			

NI - :	rt IV-A Support Schedule (Complete only	for converting for	a box on line 10,	11, or 12) Use (casn meth	o a o t ntina	accounting.
_	e: You may use the worksheet in the instructions endar year (or fiscal year beginning in)	(a) 2002	(b) 2001	(c) 2000	(d) 19		(e) Total
		(a) 2002	(b) 2001	(0) 2000	(4) 13		(6) 10.21
15	Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	947,094	1118415	896339	767,	303	3,729,151
16	Membership fees received	01,440	81040	26100	47.	191	273,30/
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	1,716,674	1692790	1362657	11369	79	5,909,100
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	886	686	1770	2	23	3,565
19	Net income from unrelated business activities not included in line 18.						
20	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						
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						
22	Other income Attach a schedule Do not						
	include gain or (loss) from sale of capital assets		.000071	057/007	10 //0	<u> </u>	0 505 116
23	Total of lines 15 through 22	2,726,094			1747	<u>140</u>	7,885,145
24	Line 23 minus line 17	1,009,420		954217	8121	01	3,976,045
25	Enter 1% of line 23	27,261	28929	23/69	194	T*	79.521
26	Organizations described on lines 10 or 11:	a Enter 2% of a	amount in columi	n (e), line 24 .	▶	26a	11,501
b	Prepare a list for your records to show the nam governmental unit or publicly supported organiz amount shown in line 26a. Do not file this list wi	ation) whose tota	gifts for 1999 th	rough 2002 excee	eded the	26b	1,437,598
C	Total support for section 509(a)(1)test Enter III				▶	26c	3,976,043
d	Add. Amounts from column (e) for lines: 18	3,565	19 26b 1,437,5	98	>	26d	
e f	Public support (line 26c minus line 26d total) Public support percentage (line 26e (numera	tor) divided by II		nator))	>	26e 26f	2.534,882 63.8%
27	Organizations described on line 12: a For person," prepare alist for your records to show t Do not file this list with your return. Enter the	he name of, and t	otal amounts rec	eived in each yea	ere receiv ir from, ea	ed froi ch "dis	m a "disqualified qualified person "
	(2002) NONE (2001) N	IONE	(2000) N	ONE	(1999)	No	NE
b	For any amount included in line 17 that was received show the name of, and amount received for each y (Include in the list organizations described in lines the difference between the amount received and amounts) for each year	ved from each personer, that was more through 11, as we the larger amount CHEDULE	son (other than "de than the larger of the l	isqualified persons of (1) the amount of Do not file this list or (2), enter the su	s"), prepare on line 25 f st with you im of these	a list f or the y r retur e differe	for your records to year or (2) \$5,000. in. After computing ences (the excess
	(2002) (2001)		. (2000)		(1999)		
С	Add Amounts from column (e) for lines 15 .		16 21		, . >	27c	
d		and line 27b total			>	27d	
e	Public support (line 27c total minus line 27d tot	al) , ,			•	27e	
	Total support for section 509(a)(2) test. Enter as	mount from line 2	3, column (e)	▶ 27f] [
f					_	107-	
f g h	Public support percentage (line 27e (numera investment income percentage (line 18, colu					27g 27h	<u>%</u> %

Sche	dule A (Form 990 or 990-EZ) 2003		P	age 4
Pa	rt 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)		1	
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?	29	Yes	No
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?	30		
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		
32 a	Does the organization maintain the following Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory	32b		
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing	32c		:
d	with student admissions, programs, and scholarships?	32d		
	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			
а	Students' rights or privileges?	33a		
b	Admissions policies?	33b		
С	Employment of faculty or administrative staff?	33c		
đ	Scholarships or other financial assistance?	33d		
е	Educational policies?	33e		
f	Use of facilities?	33f		
g	Athletic programs?	33g		
h	Other extracurricular activities?	33h		
	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?	34a		
b	Has the organization's right to such aid ever been revoked or suspended?	34b		
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		

Pa	rt VI-A Lobbying Expenditures by E (To be completed ONLY by a	lecting Public n eligible organ	Charities (See	page 9 of t Form 5768	he instructions. 3))
Che	ck → a if the organization belongs to an affil		eck ► b if y	ou checked "a	" and "limited contr	ol" provisions apply
	Limits on Lobby (The term "expenditures" me	-	1.	V/A	(a) Affiliated group totals	(b) To be completed for ALL electing organizations
36	Total lobbying expenditures to influence public			3	16	
37	Total lobbying expenditures to influence a leg			. 3	7	
38	Total lobbying expenditures (add lines 36 and			3	8	
39	Other exempt purpose expenditures			3	9	
40	Total exempt purpose expenditures (add lines			4	0	
41	Lobbying nontaxable amount Enter the amou		ing table —			
	If the amount on line 40 is — The	lobbying nontax	able amount is —	ļ		
		of the amount or) l		
			the excess over \$50			
	Over \$1,000,000 but not over \$1,500,000 \$175			30,000	1	
		•	e excess over \$1,50	00,000		1
40	• •	00,000 .		4	2	
42 43	Grassroots nontaxable amount (enter 25% of Subtract line 42 from line 36. Enter -0- if line		ne 36	· · · · -	3	
44	Subtract line 41 from line 38. Enter -0- if line				4	
77						
	Caution: If there is an amount on either line 4					
			d Under Section			
	(Some organizations that made a section See the instructions					
		Lol	bying Expenditu	res During 4-	Year Averaging	Period
	Calendar year (or fiscal year beginning in) ►	(a) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
	,		2002			
45	Lobbying nontaxable amount			· · · · · · · · · · · · · · · · · · ·		
46	Lobbying ceiling amount (150% of line 45(e))					
	Lobbying centing amount (130% of time 43(e))		1 1 1 1			
47	Total lobbying expenditures		IV/A			
48	Grassroots nontaxable amount					
49	Grassroots ceiling amount (150% of line 48(e))	 				
	_					
50	Grassroots lobbying expenditures					
Pa	rt VI-B Lobbying Activity by Nonele (For reporting only by organize			art VI-A) (90	o nago 12 of t	ha instructions \
	ng the year, did the organization attempt to infl				^{any} Yes No	Amount
	npt to influence public opinion on a legislative i	matter of reference	ium, mrough me u	50 OI.		
a b	Volunteers Paid staff or management (Include compensat		enorted on lines c	through h)	· · · · 	7
c	Media advertisements	ion in expenses i	eponed on lines C	/ A		7
d	Mailings to members, legislators, or the public		Λ	1.1.4.		
е	Publications, or published or broadcast statem					
f	Grants to other organizations for lobbying purp			<i>1</i>		
g	Direct contact with legislators, their staffs, gov		or a legislative bo	dy .	<u> </u>	
h	Rallies, demonstrations, seminars, conventions		res, or any other r	neans		-
i	Total lobbying expenditures (Add lines c throu	gh h.)	otailad dasaentiss	of the labbin		
	If "Yes" to any of the above, also attach a sta	ternent giving a di	etaneu description	or the lobbyth	ny activities.	

Sche	dule A	A (Form 990 or 990-EZ)	2003					Page 6
Pai	rt V	Information Exempt Or	n Regarding rganizations (Se	Fransfers To and ee page 12 of the II	Transac	ctions and Relationships Wit	h Noncha	ritable
51						following with any other organization on 527, relating to political organization		section
2		• •		to a noncharitable ex				s No
a				to a nonchamadic ex	ompt orga	1112411011 01	51a(i)	X
	٠,,						a(li)	X
	• •	Other assets .						
D		ner transactions.					b(i)	1 🗙
	٠,	•		noncharitable exemp	-			 X
	(ii)	Purchases of ass	ets from a noncha	ritable exempt organiz	ation		b(ii)	10
	(111)	Rental of facilities	s, equipment, or ot	her assets			b(III)	
	(iv)	Reimbursement a	rrangements		, ,		b(iv)	X X X X
		Loans or loan gua	=				b(v)	$\perp X$
		-		ship or fundraising sol	icitations		b(vi)	<u> </u>
c	• •					yees	С	X
	if th	ne answer to any of ds, other assets, o	the above is "Yes, r services given by	complete the following the reporting organize	schedule ation If th	Column (b) should always show the fa ne organization received less than fair s, other assets, or services received:	ır market valı market valu	ue of the e in any
(i	a) no	(b) Amount involved	Name of non	(c) charitable exempt organiza	tion	(d) Description of transfers, transactions, and	sharing arrangi	ements
				, , , , , , , , , , , , , , , , , , ,				
		 						
								
			· · · · · · · · · ·					
								
 2a						e or more tax-exempt organizations		———
b		cribed in section 50 (es," complete the	• •	•	(c)(3)) or i	n section 527?	☐ Yes	No 🔀
		(a)		(b)		(c)		
		Name of organiz	ation	Type of organizati	on	Description of relationsh	ıp	
			 					
								
_								
		<u> </u>						
				· · · · · · · · · · · · · · · · · · ·				
								
_						· · · · · · · · · · · · · · · · · · ·		

National Brand 45-605 Eye-Ease WORLD MUSIC INSTITUTE, INC.
45-305 2-Pack JUNE 30, 2004 Approved By 13-3323045 A B PARTI TOTAL" PROGRAM SUS MGMT FUNDRAISING LINE 43 - OTHER EXPENSES ARTIST FEES ADVERTISING DONATED SERVICES 8625-8100-PROFESSIONAL + CONSUL RECORD + TAPES
DUES + SUBSCRIPTIONS 3600 -MISCELLANGOUS 2/60-3430-INSURANCE OFFICE EXPENSE CREDIT CARD FEES 42710-4/27/0-,16 PART IV ASSETS ACCUMPLATED DE PRECIATION LINE 57.13 ALLUM. DEPRECIATION EQUIPMENT 56/86



49 WEST 27TH STREET SUITE 930 NEW YORK, NY 10001-6936 TEL: 212-545-7536

FAX: 212-889-2771

WMI@WORLDMUSICINSTITUTE.ORG WWW.WORLDMUSICINSTITUTE.ORG

BOARD OF DIRECTORS:

as of September 2004

<u>Name</u>	Profession	<u>Term</u>
Muhal Richard Abrams	Composer/Musician	Honorary
Cindy Byram	Public Relations	2 years
Robert H. Browning	Executive and Artistic Director, World Music Institute	2 years
Thomas W. Buckner	President, Mutable Music	2 years
Zette Emmons Secretary	Manager, Touring Exhibits The Newark Museum	2 years
Andrew Faulkner	Partner, Skadden Arps Slate Meagher Flom	2 years
Philip Glass	Composer/Musician	Honorary
Daisy Paradis	Board of Directors, Howard Bayne Fund Musician, Teacher	2 years
Zeyba Rahman Chairwoman	Co-Producer, Jungli-Billi Productions Cultural Producer: Festival of World Sacred Music, Fes, Morocco	2 years
Ravi Shankar	Composer/Musician	Honorary

Form **8868** (December 2000).

Department of the Treasury Internal Revenue Service

Applic ion for Extension of Time To ile an Exempt Organization Return

► File a separate application for each return

OMB No 1545-1709

-	ling for an Automatic 3-Month Extension, complete only Part I and check this box	
•	ling for an Additional (not automatic) 3-Month Extension, complete only Part II (on	•
Form 8868.	t complete Part II unless you have already been granted an automatic 3-month exte	
Part I Automatic 3-Month Extension of Time — Only submit original (no copies needed)		
Note: Form 990-T corporations requesting an automatic 6-month extension — check this box and complete Part I only ▶		
All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns.		
Partnerships,	REMICs and trusts must use Form 8736 to request an extension of time to file Form 10	
Type or	Name of Exempt Organization	Employer identification number
print	WORLD MUSIC INSTITUTE, INC.	13-3323045
File by the due date for	Number, street, and room or suite no. If a P.O. box, see instructions	
tiling your 49 WESI 271H STREET, ROOM 930		
return See instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions	
Check type of return to be filed (file a separate application for each return).		
• •	· · · · · · · · · · · · · · · · · · ·	□ Form 4700
X Form 990	Form 990-T (corporation)	Form 4720
Form 990		Form 5227
Form 990		Form 6069
Form 990-		Form 8870
•	ization does not have an office or place of business in the United States, check this box	
• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is		
	group, check this box ▶ □. If it is for part of the group, check this box ▶ □ and attacken bers the extension will cover.	1 a list with the names and
	t an automatic 3-month (6-month, for 990-T corporation) extension of time until	
	e exempt organization return for the organization named above. The extension is for the	organization's return for.
	alendar year 20 or	
► X ta	ax year beginningJULY 1, 20 03 , and endingJU	NE 30 , 20 <u>04</u>
2 If this tax	x year is for less than 12 months, check reason: Initial return Final return	Change in accounting period
3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any		
	dable credits. See instructions	
 b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit		
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit		
with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See		
instructio	ons ,	<u></u>
	Signature and Verification	
Under penallies of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare his form		
	1151 - 201	
Signature 🕨 🔪	Title > CPA	Date > 11/4/04
For Paperwork1	Reduction Act Notice, see Instruction	Form 8868 (12-2000)