

Form **990**
 Department of the Treasury
 Internal Revenue Service

Return of Organization Exempt From Income Tax
 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

OMB No 1545-0047
2005
Open to Public Inspection

A For the 2005 calendar year, or tax year beginning 08-01-2005 and ending 07-31-2006

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

C Name of organization
 WINCHESTER COMMUNITY MUSIC SCHOOL TRUST

Number and street (or P O box if mail is not delivered to street address) Room/suite
 407 HIGHLAND AVENUE

City or town, state or country, and ZIP + 4
 WINCHESTER, MA 01890

D Employer identification number
 04-6510295

E Telephone number
 (781) 721-2950

F Accounting method Cash Accrual
 Other (specify) _____

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Web site: WINCHESTERMUSICORG

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

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

H and I are not applicable to section 527 organizations

H(a) Is this a group return for affiliates? Yes No

H(b) If "Yes" enter number of affiliates: _____

H(c) Are all affiliates included? Yes No (If "No," attach a list. See instructions.)

H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No

I Group Exemption Number: _____

M Check if the organization is **not** required to attach Sch. B (Form 990, 990-EZ, or 990-PF)

L Gross receipts. Add lines 6b, 8b, 9b, and 10b to line 12: 1,351,061

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)

Revenue					
1	Contributions, gifts, grants, and similar amounts received				
a	Direct public support	1a	109,487		
b	Indirect public support	1b	11,150		
c	Government contributions (grants)	1c			
d	Total (add lines 1a through 1c) (cash \$ 116,228 noncash \$ 4,409)	1d		120,637	
2	Program service revenue including government fees and contracts (from Part VII, line 93)	2		1,021,434	
3	Membership dues and assessments	3			
4	Interest on savings and temporary cash investments	4		648	
5	Dividends and interest from securities	5		61,669	
6a	Gross rents	6a			
b	Less rental expenses	6b			
c	Net rental income or (loss) (subtract line 6b from line 6a)	6c			
7	Other investment income (describe _____)	7			
8a	Gross amount from sales of assets other than inventory	(A) Securities	79,272	(B) Other	
b	Less cost or other basis and sales expenses	8a		8b	
c	Gain or (loss) (attach schedule)	8b	56,948	8c	
d	Net gain or (loss) (combine line 8c, columns (A) and (B))	8c	22,324	8d	22,324
9	Special events and activities (attach schedule) If any amount is from gaming, check here <input type="checkbox"/>				
a	Gross revenue (not including \$ _____ of contributions reported on line 1a)	9a	67,401		
b	Less direct expenses other than fundraising expenses	9b	37,164		
c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c		30,237	
10a	Gross sales of inventory, less returns and allowances	10a			
b	Less cost of goods sold	10b			
c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c			
11	Other revenue (from Part VII, line 103)	11			
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12		1,256,949	
13	Program services (from line 44, column (B))	13		865,139	
14	Management and general (from line 44, column (C))	14		331,739	
15	Fundraising (from line 44, column (D))	15		50,095	
16	Payments to affiliates (attach schedule)	16			
17	Total expenses (add lines 16 and 44, column (A))	17		1,246,973	
18	Excess or (deficit) for the year (subtract line 17 from line 12)	18		9,976	
19	Net assets or fund balances at beginning of year (from line 73, column (A))	19		4,919,011	
20	Other changes in net assets or fund balances (attach explanation)	20		113,493	
21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21		5,042,480	

Part II Statement of Functional Expenses

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

<i>Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.</i>		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	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	75,140	17,282	29,305
26	Other salaries and wages	26	765,951	585,250	168,328
27	Pension plan contributions	27			
28	Other employee benefits	28	9,945	1,155	7,820
29	Payroll taxes	29	79,832	58,924	17,321
30	Professional fundraising fees	30			
31	Accounting fees	31	9,400		9,400
32	Legal fees	32	3,610		3,610
33	Supplies	33			
34	Telephone	34			
35	Postage and shipping	35			
36	Occupancy	36			
37	Equipment rental and maintenance	37			
38	Printing and publications	38			
39	Travel	39			
40	Conferences, conventions, and meetings	40			
41	Interest	41			
42	Depreciation, depletion, etc (attach schedule) <input checked="" type="checkbox"/>	42	97,227	67,087	30,140
43	Other expenses not covered above (itemize)				
a	See Additional Data Table	43a			
b		43b			
c		43c			
d		43d			
e		43e			
f		43f			
g		43g			
44	Total functional expenses. Add lines 22 through 43 (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44	1,246,973	865,139	331,739
					50,095

Joint Costs. Check if you are following SOP 98-2

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

Part III Statement of Program Service Accomplishments (See the instructions.)

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.

What is the organization's primary exempt purpose? ► WINCHESTER COMMUNITY MUSIC SCHOOL PROVIDES THE CONTINUENCE OF MUSIC EDUCATION AND LESSONS TO STUDENTS All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	Program Service Expenses (Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others.)
a WINCHESTER COMMUNITY MUSIC SCHOOL TRUST PROVIDES MUSIC LESSONS AND INSRUCTIONS THE EXPENSES REPORTED IN PART II ABOVE DIRECTLY RELATE TO THE PERFORMANCE OF PROGRAM SERVICES (Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	865,139
b (Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
c (Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
d (Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
e Other program services (attach schedule) (Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
f Total of Program Service Expenses (should equal line 44, column (B), Program services) ►	865,139

Part IV Balance Sheets (See the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A)		(B)		
		Beginning of year		End of year		
Assets	45 Cash—non-interest-bearing		45		-1	
	46 Savings and temporary cash investments		184,719	46	222,302	
	47a Accounts receivable	47a	138			
	b Less allowance for doubtful accounts	47b		102	47c	138
	48a Pledges receivable	48a	9,408			
	b Less allowance for doubtful accounts	48b	205	9,959	48c	9,203
	49 Grants receivable				49	
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)				50	
	51a Other notes and loans receivable (attach schedule)	51a	895			
	b Less allowance for doubtful accounts	51b		4,250	51c	895
	52 Inventories for sale or use				52	
	53 Prepaid expenses and deferred charges			23,253	53	16,614
	54 Investments—securities (attach schedule)	<input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV		2,018,414	54	2,206,654
	55a Investments—land, buildings, and equipment basis	55a				
	b Less accumulated depreciation (attach schedule)	55b			55c	
	56 Investments—other (attach schedule)				56	
	57a Land, buildings, and equipment basis	57a	3,472,311			
	b Less accumulated depreciation (attach schedule)	57b	680,373	2,833,063	57c	2,791,938
	58 Other assets (describe <input type="checkbox"/> _____)			2,000	58	2,000
59 Total assets (must equal line 74) Add lines 45 through 58			5,075,760	59	5,249,743	
Liabilities	60 Accounts payable and accrued expenses		43,828	60	74,957	
	61 Grants payable			61		
	62 Deferred revenue		2,000	62		
	63 Loans from officers, directors, trustees, and key employees (attach schedule)				63	
	64a Tax-exempt bond liabilities (attach schedule)				64a	
	b Mortgages and other notes payable (attach schedule)				64b	
	65 Other liabilities (describe <input type="checkbox"/> _____)			110,921	65	132,306
66 Total liabilities Add lines 60 through 65			156,749	66	207,263	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74					
	67 Unrestricted		4,905,033	67		5,027,443
	68 Temporarily restricted		3,978	68		5,037
	69 Permanently restricted		10,000	69		10,000
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74					
	70 Capital stock, trust principal, or current funds				70	
	71 Paid-in or capital surplus, or land, building, and equipment fund				71	
	72 Retained earnings, endowment, accumulated income, or other funds				72	
	73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21)			4,919,011	73	5,042,480
	74 Total liabilities and net assets / fund balances Add lines 66 and 73			5,075,760	74	5,249,743

Part VI Other Information (continued)

Yes No

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?
82b 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) 22,606
83a Did the organization comply with the public inspection requirements for returns and exemption applications?
83b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?
84a Did the organization solicit any contributions or gifts that were not tax deductible?
84b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?
85 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?
85b Did the organization make only in-house lobbying expenditures of \$2,000 or less?
85c Dues assessments, and similar amounts from members
85d Section 162(e) lobbying and political expenditures
85e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices
85f Taxable amount of lobbying and political expenditures (line 85d less 85e)
85g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?
85h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?
86 501(c)(7) orgs. Enter a Initiation fees and capital contributions included on line 12
86b Gross receipts, included on line 12, for public use of club facilities
87 501(c)(12) orgs. Enter a Gross income from members or shareholders
87b Gross income from other sources (Do not net amounts due or paid to other 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
89a 501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911, section 4912, section 4955
89b 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
89c Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958
89d Enter Amount of tax on line 89c, above, reimbursed by the organization
90a List the states with which a copy of this return is filed MA
90b Number of employees employed in the pay period that includes March 12, 2005 (See instructions) 73
91a The books are in care of LAURIE RUSSELL Telephone no (781) 721-2590
407 HIGHLAND AVENUE
Located at WINCHESTER, MA ZIP + 4 01890
91b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?
91c At any time during the calendar year, did the organization maintain an office outside of the United States?
92 Section 4947(a)(1) nonexempt charitable 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 92

Part VII Analysis of Income-Producing Activities (See the instructions.)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue					
a TUITION AND FEES					1,021,434
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	648	
96 Dividends and interest from securities			14	61,669	
97 Net rental income or (loss) from real estate					
a debt-financed property					
b non debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	22,324	
101 Net income or (loss) from special events			01	30,237	
102 Gross profit or (loss) from sales of inventory					
103 Other revenue a _____					
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))				114,878	1,021,434
105 Total (add line 104, columns (B), (D), and (E))					1,136,312

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 the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
93	WINCHESTER COMMUNITY MUSIC SCHOOL TRUST OFFERS A FULL RANGE OF INSTRUMENTAL AND VOCAL LESSONS, INCLUDING MUSIC FOR SPECIAL NEEDS STUDENTS TO STUDENTS OF ALL AGES WINCHESTER COMMUNITY MUSIC SCHOOL TRUST COMPLEMENTS MUSIC IN THE PUBLIC SCHOOLS AND COMMUNITY THEY OFFER TUITION ASSISTANCE TO ENSURE THAT THEIR PROGRAMS ARE ACCESIBLE

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

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

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)

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

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

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

Please Sign Here

Signature of officer _____ Date 2007-01-23

LAURIE RUSSELL executive director
Type or print name and title _____

Paid Preparer's Use Only	Preparer's signature PHILIP A WEITZEL	Date 2007-01-23	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN (See Gen Inst W)
	Firm's name (or yours if self-employed), address, and ZIP + 4 ERCOLINI & COMPANY LLP 101 ARCH STREET 300 BOSTON, MA 02110			EIN Phone no (617) 482-5511

SCHEDULE A (Form 990 or 990EZ)

Organization Exempt Under Section 501(c)(3)

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

Supplementary Information—(See separate instructions.)

OMB No 1545-0047

2005

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

Department of the Treasury Internal Revenue Service

Name of the organization WINCHESTER COMMUNITY MUSIC SCHOOL TRUST

Employer identification number

04-6510295

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

Table with 5 columns: (a) Name and address of each employee paid more than \$50,000; (b) Title and average hours per week devoted to position; (c) Compensation; (d) Contributions to employee benefit plans & deferred compensation; (e) Expense account and other allowances. Includes entry for MICHELL NOVER.

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

Table with 3 columns: (a) Name and address of each independent contractor paid more than \$50,000; (b) Type of service; (c) Compensation. Includes a 'None' entry.

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services (List each contractor who performed services other than professional services, whether individual or firms. If there are none, enter "None". See page X for instructions.)

Table with 3 columns: (a) Name and address of each independent contractor paid more than \$50,000; (b) Type of service; (c) Compensation. Includes a 'None' entry.

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

Yes No

1	During the year, has the organization attempted to influence national, state, or local legislation, include any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ►\$ _____ (Must equal amounts on line 38, Part VI-A, or line 1 of Part VI-B) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities			
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)			
a	Sale, exchange, or leasing property?	2a		No
b	Lending of money or other extension of credit?	2b		No
c	Furnishing of goods, services, or facilities?	2c	Yes	
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	Yes	
e	Transfer of any part of its income or assets?	2e		No
3a	Do you make grants for scholarships, fellowships, student loans, etc ? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments)	3a		No
b	Do you have a section 403(b) annuity plan for your employees?	3b		No
c	During the year, did the organization receive a contribution of qualified real property interest under section 170(h)?	3c		No
4a	Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?	4a		No
b	Do you provide credit counseling, debt management, credit repair, or debt negotiation services?	4b		No

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)The organization is not a private foundation because it is (Please check only **ONE** applicable box)

- 5** A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)
- 6** A school Section 170(b)(1)(A)(ii) (Also complete Part V)
- 7** A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
- 8** A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)
- 9** A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) **Enter the hospital's name, city, and state ►** _____
- 10** An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A)
- 11a** An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
- 11b** A community trust Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
- 12** An organization that normally receives **(1) more than 33 1/3%** of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc , functions—subject to certain exceptions, and **(2) no more than 33 1/3%** of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the **Support Schedule** in Part IV-A)
- 13** An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in **(1)** lines 5 through 12 above, or **(2)** sections 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) Check the box that describes the type of supporting organization ► Type 1 Type 2 Type 3

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

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

- 14** An organization organized and operated to test for public safety Section 509(a)(4) (See page 5 of the instructions)

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

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

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants See line 28)					
16 Membership fees received					
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					
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					
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					
23 Total of lines 15 through 22					
24 Line 23 minus line 17					
25 Enter 1% of line 23					
26 Organizations described on lines 10 or 11:					
a Enter 2% of amount in column (e), line 24					26a
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2001 through 2004 exceeded the amount shown in line 26a Do not file this list with your return. Enter the total of all these excess amounts					26b 0
c Total support for section 509(a)(1) test Enter line 24, column (e)					26c
d Add Amounts from column (e) for lines 18 _____ 19 _____ 22 _____ 26b _____					26d
e Public support (line 26c minus line 26d total)					26e
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f
27 Organizations described on line 12:					
a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person " Do not file this list with your return. Enter the sum of such amounts for each year (2004) _____ (2003) _____ (2002) _____ (2001) _____					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (Include in the list organizations described in lines 5 through 11, as well as individuals) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2) , enter the sum of these differences (the excess amounts) for each year (2004) _____ (2003) _____ (2002) _____ (2001) _____					
c Add Amounts from column (e) for lines 15 _____ 16 _____ 17 _____ 20 _____ 21 _____					27c
d Add Line 27a total _____ and line 27b total _____					27d
e Public support (line 27c total minus line 27d total)					27e
f Total support for section 509(a)(2) test Enter amount from line 23, column (e)					27f
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2001 through 2004, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant Do not file this list with your return. Do not include these grants in line 15					

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

	Yes	No
29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29 Yes	
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 Yes	
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement) NO BROADCAST MEDIA USED ALL STUDENTS ARE RACIALLY ACCEPTED BROCHURES STATE "THE SCHOOL DOES NOT DISCRIMATE ON THE BASIS OF RACE, COLOR, CREED, OR NATIONAL ORIGIN "	31	No
32 Does the organization maintain the following	32a Yes	
a Records indicating the racial composition of the student body, faculty, and administrative staff?		
b Records documenting that scholarships and other financial assistance are awarded on racially nondiscriminatory basis?	32b Yes	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c Yes	
d Copies of all material used by the organization or on its behalf to solicit contributions?	32d	No
If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement) NO STUDENT IS EVER TURNED AWAY OUR POLICY ADMITS ALL WITHOUT DISCRINATION THERE IS NO INQUIRY AS TO RACIAL BACKGROUND		
33 Does the organization discriminate by race in any way with respect to		
a Students' rights or privileges?	33a	No
b Admissions policies?	33b	No
c Employment of faculty or administrative staff?	33c	No
d Scholarships or other financial assistance?	33d	No
e Educational policies?	33e	No
f Use of facilities?	33f	No
g Athletic programs?	33g	No
h Other extracurricular activities?	33h	No
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	No
b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement	34b	No
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 Yes	

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

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

Limits on Lobbying Expenditures

(The term "expenditures" means amounts paid or incurred)

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

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

4-Year Averaging Period Under Section 501(h)

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

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.)

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

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

Form 4562 (Rev. January 2006) Department of the Treasury Internal Revenue Service

Depreciation and Amortization (Including Information on Listed Property)

OMB No 1545-0172

2005

Attachment Sequence No 67

See separate instructions. Attach to your tax return.

Table with 3 columns: Name(s) shown on return, Business or activity to which this form relates, Identifying number.

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

Table with 2 columns: Description, Amount. Rows 1-5.

Table with 3 columns: (a) Description of property, (b) Cost (business use only), (c) Elected cost. Rows 6-13.

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions)

Table with 2 columns: Description, Amount. Rows 14-16.

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

Table with 2 columns: Description, Amount. Rows 17-18.

Section B—Assets Placed in Service During 2005 Tax Year Using the General Depreciation System

Table with 7 columns: (a) Classification of property, (b) Month and year placed in service, (c) Basis for depreciation, (d) Recovery period, (e) Convention, (f) Method, (g) Depreciation deduction. Rows 19a-i.

Section C—Assets Placed in Service During 2005 Tax Year Using the Alternative Depreciation System

Table with 6 columns: Description, Amount, Recovery period, Convention, Method, Depreciation deduction. Rows 20a-c.

Part IV Summary (see instructions)

Table with 2 columns: Description, Amount. Rows 21-23.

Part V Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A-Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? Yes No 24b If "Yes," is the evidence written? Yes No

Table with 9 columns: (a) Type of property, (b) Date placed in service, (c) Business/investment use percentage, (d) Cost or other basis, (e) Basis for depreciation, (f) Recovery period, (g) Method/Convention, (h) Depreciation/deduction, (i) Elected section 179 cost. Includes rows 25-29.

Section B-Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

Table for Section B with columns (a) through (f) for Vehicle 1 through Vehicle 6. Rows 30-36 include questions about business/investment miles, commuting miles, and personal use.

Section C-Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions).

Table for Section C with questions 37-41 and Yes/No columns. Questions relate to written policies, personal use, and qualified automobile demonstration use.

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

Part VI Amortization

Table for Section VI with columns (a) Description of costs, (b) Date amortization begins, (c) Amortizable amount, (d) Code section, (e) Amortization period or percentage, (f) Amortization for this year. Includes rows 42-44.

Additional Data

Software ID:

Software Version:

EIN: 04-6510295

Name: WINCHESTER COMMUNITY MUSIC SCHOOL TRUST

Form 4562, Part III, Line 19, Section B—Assets Placed in Service During 2004 Tax Year Using the General Depreciation System:

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property		317	3	HY	S/L	53
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property		11,250	20	HY	S/L	281
f 20-year property		2,140	20	HY	S/L	54
g 25-year property			25 yrs		S/L	
h Residential rental property			27 5 yrs	MM	S/L	
			27 5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	
				MM	S/L	

Form 4562, Part III, Line 20a - c, Section C—Assets Placed in Service During 2004 Tax Year Using the Alternative Depreciation System :

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
20a Class life		576	20	HY	S/L	14
a Class life		1,790	3	HY	S/L	298
a Class life		885	3	HY	S/L	148
a Class life		1,244	3	HY	S/L	207
a Class life		1,628	2	HY	S/L	407
b 12-year			12 yrs		S/L	
c 40-year	2006-04	5,419	40 yrs	MM	S/L	68
c 40-year	2006-05	13,283	40 yrs	MM	S/L	166
c 40-year	2006-06	4,586	40 yrs	MM	S/L	57
c 40-year	2006-07	12,985	40 yrs	MM	S/L	162

TY 2005 Gain/Loss from Sale of Public Securities Schedule**Name:** WINCHESTER COMMUNITY MUSIC SCHOOL TRUST**EIN:** 04-6510295**Gross Sales Price:** 79,272**Basis:** 56,948**Sales Expenses:** 0**Total (net):** 22,324

TY 2005 Investments - Securities Schedule

Name: WINCHESTER COMMUNITY MUSIC SCHOOL TRUST

EIN: 04-6510295

Description	Book Value	Cost/FMV
MUTUAL FUNDS	2,206,654	F

TY 2005 Land etc. Schedule

Name: WINCHESTER COMMUNITY MUSIC SCHOOL TRUST

EIN: 04-6510295

Category/Item	Cost/Other Basis	Accumulated Depreciation	Book Value
Land	656,422		656,422
FY 99 Addition	1,902	713	1,189
FY '00 Addition	13,618	4,426	9,192
Building	1,132,194	212,287	919,907
Building Improvement	1,177,835	220,844	956,991
Piano	2,000	2,000	0
Piano	2,630	2,630	0
Piano	3,240	3,240	0
Piano	3,600	3,600	0
Piano	124,780	77,991	46,789
Piano	69,360	37,570	31,790
Upright piano	5,584	2,559	3,025
Roland piano	963	441	522
Boston Upright Piano	10,027	1,254	8,773
Upright pianos (5)	9,870	1,234	8,636

Category/Item	Cost/Other Basis	Accumulated Depreciation	Book Value
Roland Digital Piano	1,000	125	875
Violins	2,050	427	1,623
Trombone	2,000	417	1,583
Harpsichord Overhaul	900	113	787
FY 99 Addition	7,106	4,442	2,664
FY 0001 Additions	2,434	1,116	1,318
FY 0001 Additions	603	276	327
FY 0203 Additions	3,173	1,057	2,116
FY 0203 Additions	475	139	336
FY 0203 Additions	833	243	590
Vibraphone	2,500	521	1,979
Keyboard for lab	1,023	213	810
Computers for exec dir & dir of admin	1,950	975	975
Computer for registrar	960	480	480
New workstation setup & upgrades	1,000	500	500

Category /Item	Cost/Other Basis	Accumulated Depreciation	Book Value
printer for business office	584	292	292
furniture & fixtures - other	404	202	202
furniture & fixtures - other	1,202	601	601
Computer (Registrar)	1,600	1,600	0
Computer Equip	3,734	3,734	0
Printer	1,482	1,482	0
Computer (C Nicols)	2,244	2,244	0
New Server & Switch Setup	280	140	140
Antivirus Software	442	368	74
Backup tapes for new server	303	253	50
Computers	10,291	10,291	0
Computer (Acct Office)	1,647	1,647	0
Server	1,941	970	971
Computer for Front Office & Development	1,753	877	876
Network server upgrade	428	214	214

Category/Item	Cost/Other Basis	Accumulated Depreciation	Book Value
Software for new server	452	377	75
furniture & fixtures - other	328	68	260
furniture & fixtures - other	350	73	277
furniture & fixtures - other	4,900	1,021	3,879
Furniture & fixtures	74,683	46,680	28,003
furniture & fixtures	6,849	3,710	3,139
porch	10,951	5,020	5,931
furniture & fixtures - other	7,413	3,398	4,015
furniture & fixtures - other	3,339	1,252	2,087
furniture & fixtures - other	3,547	1,331	2,216
furniture & fixtures - other	1,278	372	906
furniture & fixtures - other	6,432	1,876	4,556
furniture & fixtures - other	2,400	700	1,700
furniture & fixtures - other	175	51	124
furniture & fixtures - other	1,589	463	1,126

Category/Item	Cost/Other Basis	Accumulated Depreciation	Book Value
furniture & fixtures - other	4,900	1,429	3,471
furniture & fixtures - other	300	88	212
furniture & fixtures - other	52	15	37
furniture & fixtures - other	816	170	646
furniture & fixtures - other	1,365	285	1,080
furniture & fixtures - other	656	137	519
furniture & fixtures - other	433	90	343
furniture & fixtures - other	10,610	1,592	9,018
furniture & fixtures - other	2,025	1,519	506
ASTOR CLUB - PIANO TRUCK	576	14	562
FY APRIL '06 ADDITIONS	5,419	68	5,351
FY MAY '06 ADDITIONS	13,283	166	13,117
FY JUN '06 ADDITIONS	4,586	57	4,529
FY JUL '06 ADDITIONS	12,985	162	12,823
PRINTER FOR DEVL OFFICE	1,790	298	1,492

Category /Item	Cost/Other Basis	Accumulated Depreciation	Book Value
PC FOR BUSINESS OFFICE	885	148	737
BACKUP TAPE DRIVE	1,244	207	1,037
PEACHTREE 2006	1,628	407	1,221
MONITOR FOR BUSINESS OFFICE	317	53	264
FY'06 LAND IMPROVEMNETS	11,250	281	10,969
FY '06 LAND IMPROVEMENTS	2,140	54	2,086

TY 2005 Officer Compensation Schedule

Name: WINCHESTER COMMUNITY MUSIC SCHOOL TRUST

EIN: 04-6510295

LAURIE RUSSELL

	Compensation	EE Benefit Plans	Expense Acct
Program Services	17,282		
Mgmt & General	29,305		
Fundraising	28,553		

TY 2005 Other Assets Schedule

Name: WINCHESTER COMMUNITY MUSIC SCHOOL TRUST

EIN: 04-6510295

Description	Beginning of Year Amount	End of Year Amount
ARTWORK	2,000	2,000

TY 2005 Other Changes in Net Assets Schedule**Name:** WINCHESTER COMMUNITY MUSIC SCHOOL TRUST**EIN:** 04-6510295

Description	Amount
NET UNRESTRICTED GAINS ON INVESTMENTS	101,208
IN-KIND CONTRIBUTIONS CAPITALIZED	12,285

TY 2005 Other Expenses Included Schedule

Name: WINCHESTER COMMUNITY MUSIC SCHOOL TRUST

EIN: 04-6510295

Description	Amount
LINE 9 B SPECIAL EVENTS	37,164

TY 2005 Other Liabilities Schedule**Name:** WINCHESTER COMMUNITY MUSIC SCHOOL TRUST**EIN:** 04-6510295

Description	Beginning of Year Amount	End of Year Amount
PREPAID TUITION	110,851	132,236
GIFT CERTIFICATES	70	70

TY 2005 Other Revenues Included Schedule

Name: WINCHESTER COMMUNITY MUSIC SCHOOL TRUST

EIN: 04-6510295

Description	Amount
LINE 9B SPECIAL EVENTS	37,164

TY 2005 Special Events Schedule

Name: WINCHESTER COMMUNITY MUSIC SCHOOL TRUST

EIN: 04-6510295

Event Name	Gross Receipts	Contributions	Gross Revenue	Direct Expense	Net Income (Loss)
25TH ANNIVERSARY	67,401	0	67,401	37,164	30,237

TY 2005 Self Dealing Statement

Name: WINCHESTER COMMUNITY MUSIC SCHOOL TRUST

EIN: 04-6510295

Line Number	Explanation
2c	SHELLY ZIEGELMAN, TRUSTEE PROVIDED ARCHITECTURAL SERVICES TO THE ORGANIZATION AND RECIEVED COMPENSATION FOR THOSE SERVICES.

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
MELODIE A WING 189 MYSTIC VALLEY PARKWAY WINCHESTER, MA 01890	VICE-CHAIR 0 00	0	0	0
SHELLY W ZIEGELMAN 1 EDGEHILL ROAD WINCHESTER, MA 01890	TRUSTEE 0 00	0	0	0
ANGELA MYLES BEECHING 1000 CENTRE STREET 15 JAMAICA PLAIN, MA 02130	TRUSTEE 0 00	0	0	0
BRETT LITTLE 10 SHEFFIELD ROAD WINCHESTER, MA 01890	TRUSTEE 0 00	0	0	0
DEBRA HERNANDEZ 23 BROOKS STREET WINCHESTER, MA 01890	TRUSTEE 0 00	0	0	0
JOE NICHOLSON 20 SUSSEX ROAD WINCHESTER, MA 01890	TRUSTEE 0 00	0	0	0
EDWARD MARTIN 25 CABOT STREET WINCHESTER, MA 01890	TRUSTEE 0 00	0	0	0
MARGARET PAINE 11 SANBORN STREET WINCHESTER, MA 01890	TRUSTEE 0 00	0	0	0
CATHY RUSSO 17 AGAWAM ROAD WINCHESTER, MA 01890	TRUSTEE 0 00	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
LAURIE RUSSELL 14 PINE HILL CIRCLE WAKEFIELD, MA 01880	EXECUTIVE DIRECTOR 40 00	75,140	0	0
BRIAN J CASSERLY 24 SYMMES ROAD WINCHESTER, MA 01890	TRUSTEE 0 00	0	0	0
MARK R DIORIO 5 CENTRAL STREET WINCHESTER, MA 01890	TRUSTEE 0 00	0	0	0
NEIL W GROVER 23 RUSTIC ROAD STONEHAM, MA 02180	TRUSTEE 0 00	0	0	0
JUSTIN L MAGEE 8 RIDGEFIELD ROAD WINCHESTER, MA 01890	TRUSTEE 0 00	0	0	0
GABRIELLE R STOTT 408 HIGHLAND AVENUE WINCHESTER, MA 01890	TRUSTEE 0 00	0	0	0
TAMI D ANTON 5 OAKLAND CIRCLE WINCHESTER, MA 01890	CHAIR 0 00	0	0	0
MICHAEL J BRAY 30 BROOKS STREET WINCHESTER, MA 01890	TRUSTEE 0 00	0	0	0
ERIK KNUTZEN 16 EVERETT AVENUE WINCHESTER, MA 01890	TREASURER 0 00	0	0	0
MARGARET M ROLL 7 WAINWRIGHT ROAD UNIT 45 WINCHESTER, MA 01890	TRUSTEE 0 00	0	0	0

Additional Data**Software ID:****Software Version:****EIN:** 04-6510295**Name:** WINCHESTER COMMUNITY MUSIC SCHOOL TRUST**Form 990, Part II, Line 43 - Other expenses not covered above (itemize):**

<i>Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.</i>		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
a MUSIC AND EQUIPMENT	43a	18,270	18,270		
b PROMOTIONS	43b	21,112	21,112		
c OFFICE EXPENSE	43c	48,303	24,127	24,127	49
d CONFERENCESDUES	43d	2,481	2,481		
e INSURANCE	43e	13,531	6,766	6,765	
f CONSULTING	43f	5,165		5,165	
g RECRUITING	43g	237		237	
h MAINTENANCE	43h	41,316	27,545	13,771	
i UTILITIES	43i	44,689	29,794	14,895	
j EDUCATION AND TRAINING	43j	1,815	960	855	
k FUNDRAISING	43k	4,563			4,563
l TEMPORARY HELP	43l	4,386	4,386		