### **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)

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► The organization may have to use a copy of this return to satisfy state reporting requirements. Obavo (Majje patago)

_	For the	2009 calen	dar year,	or tax year beg	jinning		<u>, 2009, and endin</u>	g		,	·
В	Check if a	pplicable		C					D Employ	er Identii	fication Number
	Addr	ess change	Please use IRS label	THELONIOU	IS MONK IN	STITUTE OF	JAZZ		52-	15440	030
	$\vdash$	e change	or print			NUE NW #60		ľ	E Telepho		
	$\vdash$	•	or type. See		ON, DC 200		-		•		
	Initia	ıl return	specific Instruc-		,, 20 200			ļ.	(20	2) 30	54-7272
	Term	nination	tions.								
	Ame	nded return							G Gross r	eceipts \$	2,882,869.
	H <sub>Anni</sub>	ication pending	F Name a	and address of princ	pal officer TH	OMAS CARTER	}	H(a) Is this a	group retur	n for affili	ates? Yes X No
		ication pending		AS C ABOVE		0.2.2	•	H(b) Are all	affiliates inc	luded?	Yes No
						T 40.477 \ \( \sigma \)	<del>,                                    </del>	If No.	attach a list	(see inst	ructions)
<u> </u>		xempt statu			✓ (insert no )	4947(a)(1	) or 527				
J	Webs	ite: ► WW		KINSTITUTE	.ORG			H(c) Group e		umber 🏲	
ĸ	Form of	f organization	X Corpora	ation Trust	Association	Other ►	L Year of Format	ion 1987	M s	State of le	gal domicile CA
Pa	id l	Summa							-		
1.0				nanization's mi	ssion or most s	ionificant activitie	es: TO OFFER	THE WO	י ת.זאר	MOS'	T PROMISING
							MERICA'S JA				
8											
ā	تل ا	התחות"?	THOOT	- BASED I	$AZZ$ $\bot$ LDULA	TION PROPER	MS_EQR_YQUN	ig Prup	TYR TAKE	עואנטנ_	THE MOKEN
Activities & Governance	–										
á							or disposed of mo	re than 25	% of its	assets	•
8						Part VI, line 1a)				3	9
စ္	4 N	umber of in	dependen	nt voting memb	ers of the gove	rning body (Part	VI, line 1b)			4	8
ŧ				yees (Part V, I						5	11
듄	6 T	otal number	r of volunt	eers (estimate	if necessary)					6	0
Ř	7a T	otal gross u	nrelated b	ousiness reveni	ue from Part V	II, column (C), lii	ne 12			7 a	0.
	bΝ	et unrelated	d business	s taxable incom	e from Form 9	90-T, line 34				7b	0.
								Pı	ior Year		Current Year
	8 C	ontributions	and aran	nts (Part VIII, III	ne 1h)		•		,747,3	143	2,631,709.
Revenue				iue (Part VIII, II				<u> </u>		95.	2,001,100.
ē						and 7d)		<u> </u>		05.	-6,445.
ۿ				art VIII, column			,	1			
_	11 0	ther revenu	e (Part VI	III, column (A)	3,64,54	<del>_9c, 10c, a</del> nd 11	e)	<u> </u>	31,6		38,932.
	12 T	otal revenue	e – add li	nes 8 through	11-(mwst-equal	Part VIII, column	1 (A), line 12)	2	<u>,784,5</u>		2,664,196.
	<b>  13</b> G	irants and s	ımılar amı	ounts page (Pai	rt IX, column (/	(A), line <b>s</b> (3)			233,3	348.	83,954.
	<b>14</b> B	enefits paid	l to or for	members (Par	IX column (A	h line 🛠					
	<b>15</b> S	Benefits paid to or for members (Part W collumn (A), line (B)  Salaries, other compensation, employee benefits (Part IX, onlumn (A), lines 5-10)  951,								97.	964,187.
9				J L		1 00 1	,,				
Ë				ng fees (Part)	31 / 17 1/1 /	1 1 1				200	
Expenses	b⊺	otal fundrai:	sing expe	nses (Part IX,	Columbra (D), 1111	J25) ►	188,367.	*			
ш	<b>17</b> 0	ther expens	ses (Part I	IX, column (A),	lines 11a-11d.	11f-24f)		1	,838,7	796.	1,739,697.
						, column (A), line	e 25)		,023,7		2,787,838.
	ī	•		s. Subtract line		• • • •	C 20)		-239,1		-123,642.
		evenue less	expense	S. Subtract line	10 IIOIII IIIIE I			1			
Net Assets or Fund Balances	1								ning of Y		End of Year
¥ ā	20 T	otal assets	(Part X, lı	ne 16)				1	<u>,004,9</u>	92.	970,751.
30	21 T	otal liabilitie	s (Part X	, line 26)					532,6	505.	542,016.
Ş	22 N	et assets or	r fund hal:	ances Subtrac	t line 21 from l	ne 20			472,3	387	428,735.
	rt(II		ure Bloc		t line 21 hom	110 20				, , , ,	1207,001
1200	Te des de l'a										
		Under penaltie true, correct, a	es of perjury, and c <u>om</u> plete	I declare that I have Declaration of prep	e examined this retu parer (other than off	rn, including accompar icer) is based on all inf	nying schedules and stat ormation of which prepa	ements, and arer has any k	to the best of nowledge	of my know	wledge and belief, it is
				0	/V. L	( )		1	8.	1.4	_
Siç	gn		<u>san</u>	w C.	Car				0 -	<u>/ P</u>	- 2010
He	re	Signature	of officer	•				Dat	e		
		► THOM	AS CAR	TER				PRESI	DENT		
			rint name and								
				1	7	1	Date )	1 Ch	eck if	Pre	parer's identifying number e instructions)
Pa	id				///			// sel	f-	III (se	e instructions)
Pro		Preparer's	- A 22 A					///)   em	ployed	Ш,,	/ 3
		signature		HAEL & AUI			V/11/10			<u>N</u> /	A
Us	rer's	Firm's name (	<u>DUN</u>	THAM, AUKA	MP & RHO	DES, PLC_					
Or		yours if self- employed),	<b>►</b> 443	7 BROOKFII	ELD CORPOR	RATE DRIVE,	SUITE 205	EIN	• _N	/A	
U	y	address, and ZIP + 4		NTILLY, V				Ph	one no	(703	) 631-8940
NA-	, the ID						ins)	1:-!:		<u>, , , , , , , , , , , , , , , , , , , </u>	X Yes No
						e <sup>7</sup> (see instructio		<del></del>			<del></del>
BA	A For P	rivacy Act a	and Paper	work Reduction	n Act Notice, s	see the separate i	instructions.		TEEA0113L	. 12/29/0	99 Form <b>990</b> (2009)

	The following of Hedginea Goriegates			•
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4		Х
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D. Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? In 'Yes,' complete Schedule D, Part V	10	Х	
11	Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	Х	
•	<ul> <li>Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI</li> </ul>			
(	<ul> <li>Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII</li> </ul>			
•	<ul> <li>Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII</li> </ul>			
	<ul> <li>Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX</li> </ul>			
	• Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X			
•	<ul> <li>Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If Yes, 'complete Schedule D, Part X</li> </ul>			
12	Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12	х	
12/	A Was the organization included in consolidated, independent audited financial statement for the tax  Yes No			
	year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional X			
_	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E  a Did the organization maintain an office, employees, or agents outside of the United States?	13 14a		$\frac{x}{x}$
	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising.			
1-	business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Part I	14b		X
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II	15		X
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III	16		X
	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I	17		X
	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		Х
20	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		<u>X</u> _

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| Partily | Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II 21 Х Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III 22 X Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete X Schedule J 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25 24a Х 24b b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d 25 a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I X 25a **b** Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If 'Yes,' complete* 25b Х Schedule L. Part I Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II 26 Х Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete Х Schedule L. Part III 27 Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) X 28a a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV **b** A family member of a current or former officer, director, trustee, or key employee? *If 'Yes,' complete Schedule L, Part IV* 28b Х c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV Х 280 Х Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete 32 32 X Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I Х 33 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, Х 34 line 1 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, 35 Part V. line 2 35 Х Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2 Х 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is Х treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI 37

BAA Form 990 (2009)

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?

Note. All Form 990 filers are required to complete Schedule O

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		Yes	No
1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U S Information Returns Enter -0- if not applicable 82			
b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
(gambling) winnings to prize winners?	1 c	Х	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return  2a 11			
2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3а		Х
<b>b</b> If 'Yes' has it filed a Form 990-T for this year? <i>If 'No,' provide an explanation in Schedule Q</i>	3ь		
4a 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)?	4 a		Х
b If 'Yes,' enter the name of the foreign country ▶		1	
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
— · · · · · · · · · · · · · · · · · · ·	5 b		X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5 c		
<b>6a</b> Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6 a		Х
<b>b</b> If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?	6 b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services	]_		
provided to the payor?	7 a		X
	7b		
	7 c		Х
d If 'Yes,' indicate the number of Forms 8282 filed during the year	-		
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		Х
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Х
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business —	R		
Holdings at any time during the year	*		
9 Sponsoring organizations maintaining donor advised funds.  — Did the organization make any tayable distributions under section 49663	9 a		
· · · · · · · · · · · · · · · · · · ·	9a 9b		
10 Section 501(c)(7) organizations. Enter	30		
a Initiation fees and capital contributions included on Part VIII, line 12			
b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b			
11 Section 501(c)(12) organizations. Enter			
a Gross income from other members or shareholders			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
· · · · · · · · · · · · · · · · · · ·	2 a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			

**Governing Body and Management** 

Section A.

Yes No

Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	•				
	Enter the number of voting members of the governing body	1a 9			
	Enter the number of voting members that are independent  Did any officer, director, trustee, or key employee have a family relationship or a business re	1b 8			
2	officer, director, trustee, or key employee have a family relationship or a business re	nationship with any other	2		X
3	Did the organization delegate control over management duties customarily performed by or of officers, directors or trustees, or key employees to a management company or other personal company.	under the direct supervision on	3		Х
4	Did the organization make any significant changes to its organizational documents		4		Х
	since the prior Form 990 was filed?				
5	Did the organization become aware during the year of a material diversion of the organization	n's assets?	5		<u>X</u>
6	Does the organization have members or stockholders?		6		Х
7	Does the organization have members, stockholders, or other persons who may elect one or governing body?	more members of the	7a		<u>X</u>
I	Are any decisions of the governing body subject to approval by members, stockholders, or o	ther persons?	7b		<u> X</u>
8	Did the organization contemporaneously document the meetings held or written actions under the following	ertaken during the year by			
•	The governing body?		8a	Х	
ı	Each committee with authority to act on behalf of the governing body?	•	8ь		Х
9	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who ca organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	nnot be reached at the	9		<u> </u>
Sec	tion B. Policies (This Section B requests information about policies not i	required by the Internal			
?ev	enue Code )			1	
10.	Done the commentation have lead shooten because a settleday?		10a	Yes	No X
	Does the organization have local chapters, branches, or affiliates?	A accelerate and a contract of the same	IVa		
	If 'Yes,' does the organization have written policies and procedures governing the activities of and branches to ensure their operations are consistent with those of the organization?	or such chapters, affiliates,	10Ь	İ	
11	Has the organization provided a copy of this Form 990 to all members of its governing body	before filing the form?	11	Х	
11 A Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O					
	Does the organization have a written conflict of interest policy? If 'No,' go to line 13		12a	X	
ı	Are officers, directors or trustees, and key employees required to disclose annually interests to conflicts?	that could give rise	12Ь	х	
•	Does the organization regularly and consistently monitor and enforce compliance with the positive of the second sec	licy? If 'Yes,' describe in	12c	Х	
	Does the organization have a written whistleblower policy?		13	Х	
	Does the organization have a written document retention and destruction policy?		14	Х	
15	Did the process for determining compensation of the following persons include a review and persons, comparability data, and contemporaneous substantiation of the deliberation and de	approval by independent cision?			
	The organization's CEO, Executive Director, or top management official SEE SCHEDULE	. O	15 a	X	
ı	Other officers of key employees of the organization		15 b	Х	<del></del> i
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions.)				
16 a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar entity during the year?	arrangement with a taxable	16a		X
	If 'Yes,' has the organization adopted a written policy or procedure requiring the organization in joint venture arrangements under applicable federal tax law, and taken steps to safeguard status with respect to such arrangements?	to evaluate its participation the organization's exempt	16b		
ec	tion C. Disclosures		.55		
	List the states with which a copy of this Form 990 is required to be filed • _ CA				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, a inspection. Indicate how you make these available Check all that apply  Own website   X   Another's website   X   Upon request	nd 990-T (501(c)(3)s only) av	aılabl	e for p	oublic
19	Describe in Schedule O whether (and if so, how) the organization makes its governing docur	nents, conflict of interest poli	cy, ar	id fina	incial
	statements available to the public SEE SCHEDULE O  State the name, physical address, and telephone number of the person who possesses the b				
20	THOMAS CARTER 5225 WISCONSIN AVE NW STE 605 WASHINGTON DO			. <b></b> .	

## Rartivila Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

Check this box if the organization did not compensate any current officer, director, or trustee										
(A)	(B)	(c)						(D)	(E)	(F)
Name and Title	Average hours		tion (		k all i	that app	ly)	Reportable compensation from	Reportable compensation from	Estimated amount of other
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W 2/1099-MISC)	compensation from the
		ector	ğ	"	) E	st co	<u>q</u>			organization and related
		trus	al tr		) R	ğ				organizations
		8	ıstee			insat				
		<u> </u>	<u> </u>	ļ	<u> </u>	<u>e</u>				
THOMAS CARTER		l		١						_
PRESIDENT	40	X		X				300,000.	0.	0.
HERBIE HANCOCK	_							_	_	_
CHAIRMAN	8	X	_					0.	0.	0.
BILL COSBY		İ						_		_
HON CO-CHAIRMAN	3	X			_			0.	0.	<u> </u>
BILLY DEE WILLIAMS					}				_	_
HON CO-CHARIMAN	3	Х						0.	0.	0.
THELONIOUS S. MONK, JR.	1 .	١			1			_		_
BOARDMAN BOARD	8	X			┞			0.	0.	<u> </u>
PAXTON K. BAKER		١			1			_		_
TRUSTEE	3	X		<u> </u>	ļ		<u> </u>	0.	0.	<u> </u>
JIMMY_HEATH		l						_		_
TRUSTEE	3	X			┞	<u> </u>		0.	0.	0.
WAYNE SHORTER	1	١								
TRUSTEE	3	X			ļ	ļ		0.	0.	0.
STUART_SUBOTNICK		١								
TRUSTEE	3	X			<u> </u>			0.	0.	0.
CLARK TERRY		١			ļ				_	_
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JAMES_DYAS					١					
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Name and Tide    Competended	Part VII   Section A. Officers, Directors, Trust	lees, K	(ey	Em	plo	ye	es,	an	d Highest Con	npensated Emp	loyees (cont.)
The Total  1b Total  1b Total  1b Total  1b Total  1b Total  1b Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of the organization and related organizations greater than \$150,000 of the organization and related organizations greater than \$150,000 of the organization and related organizations greater than \$150,000 of the organization and related organizations greater than \$150,000 of the organization and related organizations greater than \$150,000 of the organization and related organizations greater than \$150,000 of the organization and related organizations greater than \$150,000 of the organization for the organization and related organizations greater than \$150,000 of the organization and related organizations greater than \$150,000 of the organization and related organizations greater than \$150,000 of the organization and related organizations greater than \$150,000 of the organization for the organization and related organizations greater than \$150,000 of the organization for th	· ·				-	•			(D)	(E)	(F)
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			ıımı	ied	io tr	iose	: IISt	ea a	above) who receiv	eu more than	]

Pa	rt VIII   Statement of Revenue	<del></del>			1
		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	1 a Federated campaigns b Membership dues c Fundraising events. d Related organizations e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above  1 a 1 b 1 c 1 c 683,777.	-			
E	g Noncash contribns included in lns 1a-1f. \$			,	
<u>8</u> ₹	h Total. Add lines 1a-1f	2,631,709.			
Ä.	Business Code	<b></b>			
S.	2a				
E	b				_
Ϋ́С	c				
SEF	d	<del>  </del>			
ΑM	e				
90	f All other program service revenue				
<u> </u>	g Total. Add lines 2a-2f			<u> </u>	
	<ul> <li>Investment income (including dividends, interest and other similar amounts)</li> <li>Income from investment of tax-exempt bond proceeds</li> </ul>	14,102.			14,102.
	5 Royalties				
	(i) Real (ii) Personal	4			
	6a Gross Rents	4			
	<b>b</b> Less rental expenses	4			
	c Rental income or (loss)				
	d Net rental income or (loss)	<u> </u>			
	7a Gross amount from sales of (i) Securities (ii) Other	-}			
	assets other than inventory 198, 126.	4			
	<b>b</b> Less: cost or other basis				
	and sales expenses 218, 673.	-}			
	<b>c</b> Gain or (loss) -20, 547.				
	d Net gain or (loss)	-20,547.	-20,547.		
OTHER REVENUE	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c).				
REV	See Part IV, line 18	1			
ĘŖ	b Less direct expenses	-			İ
1	c Net income or (loss) from fundraising events				
	9a Gross income from gaming activities See Part IV, line 19		:		
	b Less direct expenses b				
	c Net income or (loss) from gaming activities	<u> </u>			
	10 a Gross sales of inventory, less returns and allowances				
	<b>b</b> Less: cost of goods sold <b>b</b>				
	c Net income or (loss) from sales of inventory				
	Miscellaneous Revenue Business Code	<b></b>			
	11a OTHER INCOME 900099	38,932.	38,932.		
	b				<del></del>
	c				-
	d All other revenue	20.000			
	e Total. Add lines 11a-11d	38,932.	10.005		14 100
	12 Total revenue. See instructions	2,664,196.	18,385.	0.	14,102.

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complet	e columns (B), (C), and (D).
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Do	not include amounts reported on lines	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
1	7b, 8b, 9b, and 10b of Part VIII.  Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21		expenses	general expenses	expenses
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	83,954.	83,954.		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	300,000.	246,000.	24,000.	30,000.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages.	565,286.	457,842.	46,000.	61,444.
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	45,504.	37,014.	3,681.	4,809.
10	Payroll taxes	53,397.	43,434.	4,320.	5,643.
	Fees for services (non-employees)				
	a Management				<del></del>
	b Legal	26 557	20 726	2 061	2 060
	c Accounting d Lobbying	36,557.	29,736.	2,961.	3,860.
	Prof fundraising svcs See Part IV, In 17		· ·		
	Investment management fees			-	
	1 Other				
	Advertising and promotion	23,957.	23,957.		
13	Office expenses	·	,		
14	Information technology	18,987.	15,407.	1,552.	2,028.
15	Royalties				
16	Occupancy	181,262.	82,129.	42,979.	56,154.
17		546,139.	529,675.	4,832.	11,632.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
	Conferences, conventions, and meetings				
20	Interest	11,411.	9,282.	923.	1,206.
	Payments to affiliates	0.540	0.074	206	260
22		2,549. 34,842.	2,074. 28,340.	206. 2,819.	269. 3,683.
	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below).	34,042.	20,340.	2,019.	3,003.
	PRODUCTION EXPENSES	374,789.	374,539.	250.	
ı	ARTIST COMPENSATION	341,288.	341,288.		
	CONSULTANTS	109,320.	108,813.	507.	
	TELEPHONE	15,977.	12,995.	1,293.	1,689.
	PARKING	11,201.	9,111.	906.	1,184.
	All other expenses	31,418.	40,240.	-13,588.	4,766.
	Total functional expenses. Add lines 1 through 24f	2,787,838.	2,475,830.	123,641.	188,367.
26	Joint costs. Check here ► if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
BAA	······································				Form <b>990</b> (2009)

Form **990** (2009)

	art A	Dailance Sheet	(A) Beginning of year		( <b>B</b> ) End of year
_	1	Cash - non-interest-bearing	258,709.	1	2,006.
	2	Savings and temporary cash investments	,	2	·
	3	Pledges and grants receivable, net	250,000.	3	344,842.
	4	Accounts receivable, net	·	4	
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L.		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1))			
		and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L		6	
Š	7	Notes and loans receivable, net .		7	
A S S E T S	8	Inventories for sale or use		8	
Ś	9	Prepaid expenses and deferred charges	20,949.	9	105,326.
	10 a	Land, buildings, and equipment cost or other basis 10a 66,321.			
		Complete Part VI of Schedule D			<u></u>
	t	Less. accumulated depreciation. 10b 56, 483.	10,065.	10 c	9,838.
	11	Investments — publicly-traded securities	449,788.	11	493,258.
	12	Investments – other securities See Part IV, line 11		12	
	13	Investments - program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	15,481.	15	15,481.
	16	Total assets Add lines 1 through 15 (must equal line 34)	1,004,992.	16	970,751.
	17	Accounts payable and accrued expenses	182,605.	17	180,016.
	18	Grants payable		18	
	19	Deferred revenue		19	
ŀ	20	Tax-exempt bond liabilities		20	
B	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
L	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II			<del></del>
- 1		of Schedule L		22	
E	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities Complete Part X of Schedule D	350,000.	25	362,000.
	26	Total liabilities. Add lines 17 through 25.	532,605.	26	542,016.
N E T		Organizations that follow SFAS 117, check here ► X and complete lines	,		
		27 through 29 and lines 33 and 34.			
A SSE	27	Unrestricted net assets	-27,613.	27	-71,265.
Ē T S	1	Temporarily restricted net assets		28	
	29	Permanently restricted net assets	500,000.	29	500,000.
R		Organizations that do not follow SFAS 117, check here   and complete			
r UZO		lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	-
B A L	31	Paid-in or capital surplus, or land, building, and equipment fund		31	
Ā	32	Retained earnings, endowment, accumulated income, or other funds		32	
AZCES	33	Total net assets or fund balances.	472,387.	33	428,735.
<u>s</u>	34	Total liabilities and net assets/fund balances	1,004,992.	34	970,751.

form <b>990</b> (2009) THELONIOUS MONK INSTITUTE OF JAZZ	52-1544030	Pa	ige 12
Part XI Financial Statements and Reporting			
		Yes	No
1 Accounting method used to prepare the Form 990 $\square$ Cash $\square$ Accrual $\square$ Other			
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O			
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
<b>b</b> Were the organization's financial statements audited by an independent accountant?	2b	Х	
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for overs review, or compilation of its financial statements and selection of an independent accountant?	sight of the audit, 2c	х	
If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	nıc		
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year w consolidated basis, separate basis, or both:	rere issued on a		
X Separate basis Consolidated basis Both consolidated and separate basis			
3a As a result of a federal award, was the organization required to undergo an audit or audits as set fort Audit Act and OMB Circular A-133?	h in the Single	х	
<b>b</b> If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo or audits, explain why in Schedule O and describe any steps taken to undergo such audits	the required audit 3b	х	

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Form 990 (2009)

#### SCHEDULE A (Form 990 or 990-EZ)

**Public Charity Status and Public Support** 

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Total

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Employer identification number THELONIOUS MONK INSTITUTE OF JAZZ 52-1544030 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is. (For lines 1 through 11, check only one box) A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii) Enter the hospital's An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 5 **170(b)(1)(A)(iv).** (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) X R A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives (1) more than 33-1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions – subject to certain exceptions, and (2) no more than 33-1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III ) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h 11 **b** Type II c | Type III - Functionally integrated d | Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? 11 g (i) a family member of a person described in (i) above? 11 g (ii) (iii) a 35% controlled entity of a person described in (i) or (ii) above? 11 g (iii) Provide the following information about the supported organizations h (i) Name of Supported Organization (in) EIN (iii) Type of organization (iv) Is the organization in col (v) Did you notify (vii) Amount of Support the organization in col (i) of your support? (described on lines 1 9 above or IRC section (see instructions)) organization in col (i) organized in the US? (i) listed in your governing document? No Yes Yes No Yes No

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

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

	(Complete only if you check	ed the box on line	5, 7, or 8 of Par	t I )			
Sec	tion A. Public Support		·				<del></del>
begi	ndar year (or fiscal year nning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants ')	1,868,398.	2,563,981.	3,090,870.	2,747,343.	2,631,709	. 12,902,301.
	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						0.
3	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.						0.
4	Total. Add lines 1-through 3	1,868,398.	2,563,981.	3,090,870.	2,747,343.	2,631,709	. 12,902,301.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						3,131,817.
	<b>Public support.</b> Subtract line 5 from line 4						9,770,484.
<u>Sec</u>	tion B. Total Support					r	<del></del>
Calendar year (or fiscal year beginning in) ►		(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	1,868,398.	2,563,981.	3,090,870.	2,747,343.	2,631,709	. 12,902,301.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	18,988.	22,764.	29,372.	18,078.	14,102	. 103,304.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	25,796.	13,394.	8,240.	31,654.	38,932	. 118,016.
11	Total support. Add lines 7 through 10						13,123,621.
12	Gross receipts from related activ	rities, etc. (see in:	structions)			12	0.
13	First five years. If the Form 990 organization, check this box and	is for the organiz stop here	ation's first, secoi	nd, third, fourth,	or fifth tax year as	s a section 501(	c)(3)
	tion C. Computation of Pu						<del></del>
	Public support percentage for 20			ne 11, column (f)		14	<del></del>
15	Public support percentage from	2008 Schedule A,	Part II, line 14			_ 15	0.0%
16 a	33-1/3 support test - 2009. If the and stop here. The organization	e organization did qualifies as a pul	I not check the bo olicly supported o	ox on line 13, and rganization	the line 14 is 33	-1/3 % or more,	check this box ► X
t	33-1/3 support test — 2008. If the and stop here. The organization	e organization did qualifies as a pul	I not check a box olicly supported o	on line 13, or 16a rganization	a, and line 15 is 3	3-1/3% or more	, check this box
	7a 10%-facts-and-circumstances test — 2009 If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.						
t	o 10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-an	meets the 'facts-a d-circumstances'	and-circumstance test The organi	s' test, check this zation qualifies a:	box and <b>stop he</b> i s a publicly suppo	r <b>e.</b> Explain in Pa orted organizatio	n. how the
18		zation did not che	eck a box on line,	13, 16a, 16b, 17a			990 or 990-EZ) 2009
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Page 3

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I)

Sec	tion A. Public Support							
Cale	ndar year (or fiscal yr beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	<b>(e)</b> 200	9	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants.')							
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose							
3	Gross receipts from activities that are not an unrelated trade or business under section 513							
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
5	The value of services or facilities furnished by a governmental unit to the organization without charge							
	Total. Add lines 1 through 5 a Amounts included on lines 1, 2, 3 received from disqualified persons							
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the year							
C	: Add lines 7a and 7b							
8	Public support (Subtract line							
	7c from line 6)		•					
Sec	tion B. Total Support							
Cale	ndar year (or fiscal yr beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	<b>(e)</b> 200	9	(f) Total
_	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources							
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
11	Add lines 10a and 10b  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on							
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)							
13 14	Total support. (add Ins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and	is for the organizes	ation's first, seco	nd, third, fourth,	or fifth tax year a	s a section!	501(c)(3	3) ▶ □
Sec	tion C. Computation of Pu	blic Support P	ercentage					
15	Public support percentage for 20	009 (line 8, colum	n (f) divided by lii	ne 13, column (f))	<u> </u>		15	%
	Public support percentage from						16	%
	tion D. Computation of Inv			e				
17					ımn (f))		17	%
18	Investment income percentage f						18	%
19 a	<b>33-1/3 support tests – 2009.</b> If the omore than 33-1/3%, check this b	organization did not box and <b>stop here</b>	check the box on The organization	line 14, and line 15 n qualifies as a pi	ublicly supported	organization		
	<b>33-1/3 support tests</b> — <b>2008.</b> If the state of the stat	this box and <b>sto</b>	<b>p here.</b> The orgar	nization qualifies a	as a publicly supp	orted organ	ızatıon	and line 18 ☐
20	Private foundation. If the organi	zation did not che	ck a box on line	14, 19a, or 19b, o	check this box and	d see instruc	tions	<u> </u>

Schedule A	(Form 990	or 990-E	<u>2) 2009</u>	THETO	NTOO2	MUNK .	<u> 111211</u> 1	OIF OF	JAZZ		52-1544	1030	Page 4
Part IV	Supplen	nental In	formati	i <b>on.</b> Cor	nplete t	his part	t to prov	ide the	explanat	ions requ	ired by F	art II, lin	e 10;
	Part II, II	ne I/a	or 1/b;	and Pai	rt III, lin	e 12. P	rovide a	any othe	r additioi	nal inforn	nation. Se	ee instruc	ctions.
						<del>-</del> -	- <b></b> -					<b>. –</b> – – –	
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Schedule A (Form 990 or 990-EZ) 2009

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## SCHEDULE A, PART IV - SUPPLEMENTAL INFORMATION PAGE 5

THE	ONIOUS	MONK	INSTITUTE	OF 1477
INEL	CUUINO.	INDINU	MOIIIUIE	OF JAZZ

52-1544030

PA	RT	II.	LINE	10 -	<b>OTHER</b>	<b>INCOME</b>
----	----	-----	------	------	--------------	---------------

NATURE AND SOURCE	<u> </u>	2009	2008	2007	2006	2005
OTHER INCOME	TOTAL \$	38,932. 38,932.	31,654. \$ 31,654.	\$ 8,240. \$ 8,240.	13,394. \$ 13,394.	25,796. \$ 25,796.

#### **SCHEDULE D** (Form 990)

**Supplemental Financial Statements** 

Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.
 ► Attach to Form 990.
 ► See separate instructions

OMB No 1545-0047

Open to Public Inspection Employer Identification number

Department of the Treasury Internal Revenue Service Name of the organization

THI	ELONIOUS MONK INSTITUTE OF JAZ	Z	52-1544030
Pa	रिक्षि Organizations Maintaining Dono	r Advised Funds or Other Simila	
	the organization answered 'Yes' t	o Form 990, Part IV, line 6.	in runus of recounts complete in
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year).		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and dor funds are the organization's property, subject		
6	Did the organization inform all grantees, dono used only for charitable purposes and not for purpose conferring impermissible private bene	the benefit of the donor or donor adviso	ant funds may be r or for any other
D'a	福祉 Conservation Easements Comple		
	Purpose(s) of conservation easements held by		Tes to Form 990, Part IV, line 7.
•	Preservation of land for public use (e.g., r		vation of an historically important land area
	Protection of natural habitat		vation of certified historic structure
	Preservation of open space		validit of defining finatoric structure
2		on held a qualified conservation contrib	ution in the form of a conservation easement on th
			Held at the End of the Year
a	Total number of conservation easements		2a
ŀ	Total acreage restricted by conservation ease	ments	2b
(	Number of conservation easements on a certi	fied historic structure included in (a)	2c
C	Number of conservation easements included i	n (c) acquired after 8/17/06	2d
3	Number of conservation easements modified, year ▶	transferred, released, extinguished, or t	erminated by the organization during the tax
4	Number of states where property subject to co	nservation easement is located 🟲	
5	Does the organization have a written policy re and enforcement of the conservation easemer	garding the periodic monitoring, inspect to the holds?	ion, handling of violations, Yes No
	Staff and volunteer hours devoted to monitoring the year ▶	· · · · · · · · · · · · · · · · · · ·	
7	Amount of expenses incurred in monitoring, in during the year ►	especting, and enforcing conservation ea	esements \$
8	Does each conservation easement reported or 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the requiremen	ts of section Yes No
9	In Part XIV, describe how the organization reports include, if applicable, the text of the footnote conservation easements	s conservation easements in its revenue and the organization's financial statement	d expense statement, and balance sheet, and s that describes the organization's accounting for
Pai	Organizations Maintaining Colle Complete if the organization ans	ctions of Art, Historical Treasur wered 'Yes' to Form 990, Part IV	es, or Other Similar Assets , line 8.
1 a	If the organization elected, as permitted under treasures, or other similar assets held for pub- the text of the footnote to its financial stateme	lic exhibition, education, or research in t	statement and balance sheet works of art, historic furtherance of public service, provide, in Part XIV,
t	o If the organization elected, as permitted under treasures, or other similar assets held for pub amounts relating to these items:	SFAS 116, to report in its revenue stat lic exhibition, education, or research in	ement and balance sheet works of art, historical furtherance of public service, provide the following
	(i) Revenues included in Form 990, Part VIII,	line 1	►\$ ►\$
	(ii) Assets included in Form 990, Part X		<b>&gt;</b> \$
2	If the organization received or held works of a amounts required to be reported under SFAS	rt, historical treasures, or other similar a 116 relating to these items	assets for financial gain, provide the following
á	Revenues included in Form 990, Part VIII, line	1	<b>-</b> \$
	Assets included in Form 990. Part X		►\$

•										
Schedule D (Form 990) 2009 THELC								544030		Page 2
Part III Organizations Mainta	ning Colle	ections	of Art, Hist	orica	l Treasures, o	r Otl	ner Similar A	\ssets (	continu	ıed)
3 Using the organization's acquisiti items (check all that apply)	on accession	and oth	ner records, che	eck an	y of the following	that a	are a significan	t use of its	s collecti	on
a Public exhibition			<b>d</b> Loan	or exc	change programs					
b Scholarly research			e Other	r						
c Preservation for future gener	ations									
4 Provide a description of the organ Part XIV	nızatıon's col	lections	and explain ho	w they	further the organ	nızatı	on's exempt pu	rpose in		
5 During the year, did the organiza assets to be sold to raise funds r	tion solicit or ather than to	receive be mair	donations of a ntained as part	rt, hist of the	orical treasures, organization's co	or oth	er sımılar on?	Ye	s [	No
Part IV Escrow and Custodia 9, or reported an amount	Arrangen unt on For	<b>nents</b> ( m 990,	Complete if on Part X, line	orgar 21.	ization answe	red '	Yes' to Form	1 990, P	art IV,	line
1a Is the organization an agent, trus included on Form 990, Part X?	tee, custodia	n, or oth	ner intermediar	y for c	ontributions or ot	her as	ssets not	Ye	s [	No
<b>b</b> If 'Yes,' explain the arrangement	in Part XIV a	and com	plete the follow	ıng ta	ble:	_				
						L		Amou	nt	
c Beginning balance						L	1 c			
<b>d</b> Additions during the year						·	1 d			
e Distributions during the year						  -	1 e			
f Ending balance						L	1f			_
2a Did the organization include an a	mount on Fo	rm 990,	Part X, line 21	?.				∐ Ye	s L	No
<b>b</b> If 'Yes,' explain the arrangement					<del> </del>					
Part V   Endowment Funds Cor	nplete if o	rganıza	ation answer	ed 'Y	es' to Form 99	90, F	Part IV, line	10.		
	(a) Current		(b) Prior yea		(c) Two years bac	:k	(d) Three years ba	ack (e	Four year	s back
1 a Beginning of year balance	449	<u>,788.</u>	614,8	<u> 374.</u>						
<b>b</b> Contributions						_				
c Net Investment earnings, gains, and losses	43	,470.	-165,0	086.						
<b>d</b> Grants or scholarships					×					
Other expenditures for facilities and programs										
f Administrative expenses										
<b>g</b> End of year balance	493	,258.	449,7	<u> 788.</u>						
2 Provide the estimated percentage	of the year	end bala	ance held as							
a Board designated or quasi-endow	/ment ►		₹							
<b>b</b> Permanent endowment ►	100.00 %									
c Term endowment ▶	<del></del>									
3a Are there endowment funds not in organization by	n the posses	sion of tl	he organizatior	that	are held and adm	ınıste	red for the		Yes	No
(i) unrelated organizations								3a(i)		Х
(ii) related organizations								3a(ii)		Х
<b>b</b> If 'Yes' to 3a(II), are the related o	rganizations	listed as	required on S	chedu	le R?			3b		
4 Describe in Part XIV the intended	-		=				SEE	PART	XIV	
Part VI Investments-Land, B						, line			-	
Description of investment		(a) Cost	or other basis vestment)	(b)	Cost or other casis (other)	(c	) Accumulated Depreciation	(d)	Book Va	alue
1a Land				Ĭ			•			
<b>b</b> Buildings				Ĭ		I		1		

**c** Leasehold improvements 51,536. 48,310. **d** Equipment 3,226. 8,173. 6,612. 14,785. e Other Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c) 9,838.

BAA

Schedule **D** (Form 990) 2009

Schedule D (Form 990) 2009 THELONIOUS MONK I		52-1544030 Page 3
Part VII Investments-Other Securities See F	orm 990, Part X, line	12. N/A
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other		
	<u> </u>	
	-	
	-	
Total (Column (b) must equal Form 990 Part X, col. (B) line 12.)		
Part VIII Investments-Program Related (See	Form 990, Part X, line	e 13) N/A
(a) Description of investment type	(b) Book value	(c) Method of valuation
	`	Cost or end-of-year market value
		<del>-</del>
	<del>                                     </del>	
		· · · · · · · · · · · · · · · · · · ·
	1	
	† <del></del>	
Total (Column (b) must equal Form 990, Part X, Col (B) line 13)		
Part IX Other Assets (See Form 990, Part X,	line 15) N/A	
(a) De	escription	(b) Book value
	<del></del>	
***************************************		
		<del></del>
	· ·	
	<del>-</del> · ·	
Total. (Column (b) must equal Form 990, Part X, col (B), I	line 15)	<b>•</b>
Part X Other Liabilities (See Form 990, Part	X, line 25)	
(a) Description of Liability	(b) Amount	
Federal Income Taxes		
LINE OF CREDIT	350,000	
LOAN PAYABLE	12,000	<u>-</u>
- · · · · · · · · · · · · · · · · · · ·		4
		_
	-	-
	<del></del>	-
<del></del>		<b>†</b>
		†
		7
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	362,000.	.]
		·

Sche	edule <b>D</b> (Form 990) 2009 THELONIOUS MONK INSTITUTE OF JAZZ 52	2-1544030	Page <b>4</b>
Pai	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements		
1	Total revenue (Form 990, Part VIII,column (A), line 12)		2,664,196.
2	Total expenses (Form 990, Part IX, column (A), line 25)	<del></del>	2,787,838.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		-123,642.
4	Net unrealized gains (losses) on investments		79,990.
5	Donated services and use of facilities		
6	Investment expenses		
7	Prior period adjustments		
8	Other (Describe in Part XIV)		
9	Total adjustments (net) Add lines 4 through 8		79,990.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		-43,652.
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue per R	eturn	•
1	<u></u>		3,094,186.
	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
	Net unrealized gains on investments 2a 79,990.	i l	
	Donated services and use of facilities 2b 350,000.	1	
	Recoveries of prior year grants	1 1	
	I Other (Describe in Part XIV)	1	
	Add lines 2a through 2d	2e	429,990.
	Subtract line 2e from line 1	$\overline{}$	2,664,196.
	Amounts included on Form 990, Part VIII, line 12, but not on line 1		2,004,150.
	Investments expenses not included on Form 990, Part VIII, line 7b.		
	Other (Describe in Part XIV)	1	
	Add lines 4a and 4b	4c	
	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		2,664,196.
	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per		2,004,190.
	Total expenses and losses per audited financial statements		3,137,838.
	Amounts included on line 1 but not on Form 990, Part IX, line 25:		3,137,636.
	1 1		
	Donated services and use of facilities  2a 350,000.	1 1	
	Prior year adjustments 2b	- 1	
	Other losses 2c	-	
	Other (Describe in Part XIV)	<del>                                     </del>	250 000
	Add lines 2a through 2d.	2e	350,000.
3	Subtract line 2e from line 1	3	2,787,838.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
	Investments expenses not included on Form 990, Part VIII, line 7b	-	
	Other (Describe in Part XIV)		
	Add lines 4a and 4b	4c	
$\overline{}$	Total expenses Add lines 3 and 4c (This must equal Form 990, Part I, line 18)	5	<u>2,787,838.</u>
Par	t XIV   Supplemental Information	<del> </del>	
line 4	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Part IV 1, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part ation.  PART V, LINE 4 - INTENDED USES OF ENDOWMENT FUND	, lines 1b and art to provide	d 2b, Part V, any additional
	THE ENDOWMENT FUND SUPPORTS THE ORGANIZATION'S JAZZ MASTERS PROGRAM	AND ASSIS	STS IN
	TEACHING AT UNIVERSITIES AND PUBLIC SCHOOLS		

TEEA3304L 02/02/10

BAA

Schedule **D** (Form 990) 2009

Schedule D (1 0111 990) 2009 THELONIOUS MONK INSTITUTE OF SAZZ	32-1344030	rage o
Part XIV Supplemental Information (continued)		
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		<b></b>

# SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Part I General Information on Grants and Assistance

THELONIOUS MONK INSTITUTE OF JAZZ

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 21 or 22.

Attatch to Form 990.

OMB No 1545-0047 2009

Open to Public Inspection

**Employer identification number** 52-1544030

0 0 0	rds to substantiate the the grants or assistance s procedures for moni		f the grants or assistance, the grantees use of grant funds in the United States	rantees' eligibility for the grant	ne grants or assistanc RT_IV	e, and	X Yes No
Part II J Grants and Other Assistance to Governments and Organizations 990, Part IV, line 21 for any recipient that received more than \$5,0 Part IV and Schedule I-1 (Form 990) if additional space is needed	ance to Governme ny recipient that re (Form 990) if addi		Organizations in the United States. Complete if the organization answered 'Yes' to Form nore than \$5,000. Check this box if no one recipient received more than \$5,000. Use ace is needed	ed States. Comple this box if no one r	te if the organizat ecipient received	ion answered 'Ye more than \$5,00	s' to Form 5. Use ▼ X
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							
Enter total number of section 501(c)(3) and government organization	(3) and government or	rganizations	-				0
Enter total number of other organizations	ations					<b>A</b>	0
BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	duction Act Notice, se	e the Instructions fo	or Form 990.	TEEA3901L 02/10/10	02/10/10	Schedu	Schedule I (Form 990) 2009

Page 2

Schedule I (Form 990) 2009 THELONIOUS MONK INSTITUTE OF JAZZ

Reart-III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22.

Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
					SCHOLARSHIP TO STUDY WITH JAZZ
COMPETITION SCHOLARSHIP	4	10,500.			PROFESIONALS
					SCHOLARSHIP TO STUDY AT LOYOLA
LOYOLA UNIVERISTY SCHOLARSHIP	14	73,454.			UNIVERSITY
Ratilix Supplemental Information. Complete this part to		provide the information required in Part I	ion required in Pai	, line 2, and	any other additional information.
<u>PART I, LINE 2 - GRANTMAKER'S DESCRIPTION OF</u>		<u>HOW GRANTS ARE USED</u>	JSED		
THE ORGANIZATION RETAINS ALL DOCUMENTATION	- 1	REGARDING THE PAYMENT OF SCHOLARSHIPS AND	AYMENT OF SCHO	LARSHIPS AND	
GRANTS. THE RECIPIENTS ARE MONITORED REGULARLY TO ENSURE COMPLIANCE AND ELIGIBILITY.	TORED REGULAR	LY_TO ENSURE C	OMPLIANCE AND	ELIGIBILITY.	
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Schedule I (Form 990) 2009

#### SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

OMB No 1545-0047 2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

► Complete if the organization answered 'Yes' to Form 990, Part IV, line 23. ► Attach to Form 990. ► See separate instructions.

Employer identification number

52-1544030

THELONIOUS MONK INSTITUTE OF JAZZ Part I Questions Regarding Compensation Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items. First-class or charter travel Housing allowance or residence for personal use Payments for business use of personal residence Travel for companions Tax indemnification and gross-up payments Health or social club dues or initiation fees Personal services (e.g., maid, chauffeur, chef) Discretionary spending account b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If No, complete Part III to explain 1 b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, 2 trustees, and the CEO/Executive Director, regarding the items checked in line 1a2 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization Х a Receive a severance payment or change-of-control payment? 4a Х b Participate in, or receive payment from, a supplemental nongualified retirement plan? 4h c Participate in, or receive payment from, an equity-based compensation arrangement? 4 c If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of Х a The organization? 5 a X 5b b Any related organization? If 'Yes' to line 5a or 5b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of 6a X a The organization? Х **b** Any related organization? 6b If 'Yes' to line 6a or 6b, describe in Part III. For person listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If 'Yes,' describe in Part III 7 Х Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53.4958-4(a)(3)? If 'Yes,' describe in Part III 8 Х If 'Yes' to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

section 53 4958-6(c)?

Schedule J (Form 990) 2009

2-1544030

Page 2

Schedule J (Form 990) 2009 THELONIOUS MONK INSTITUTE OF JAZZ

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

	(B) Breakdown	(B) Breakdown of W-2 and/or 1099-MIS	MISC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name	(i) Base compensation	(ii) Bonus and incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)·(ı)·(D)	reported in prior Form 990 or Form 990-EZ
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	(ii)						
ВАА			TEEA4102L 02/02/10	1202/10		Sched	Schedule J (Form 990) 2009

#### SCHEDULE O (Form 990)

## **Supplemental Information to Form 990**

OMB No 1545-0047

2009

Department of the Treasury Internal Revenue Service Name of the organization Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

➤ Attach to Form 990.

Open to Public Inspection

Name of the organization	Employer identification number
THELONIOUS MONK INSTITUTE OF JAZZ	52-1544030
FORM 990, PART III, LINE 4B - PROGRAM SERVICE ACCOMPLISHMENTS	
OTHER PROGRAM SERVICES	
THE INSTITUTE OFFERS ADDITIONAL EDUCATIONAL AND CULTURAL PROGRA	MS IN THE UNITED
STATES AND ABROAD FOR THE ADVANCEMENT OF JAZZ. THESE PROGRAMS A	RE ADMINISTERED OUT
OF THE WASHINGTON, D.C. OFFICE. SINCE 1995, THIS INSTITUTE HAS	PRESENTED A SERIES OF
INTERNATIONAL TOURS, EXPOSING PEOPLE OUTSIDE OF THE UNITED STAT	ES TO JAZZ. THESE
TOURS, MANY OF WHICH ARE SPONSORED BY THE U.S. DEPARTMENT OF ST	ATE, HAVE REACHED
MORE THAN ONE MILLION PEOPLE OF ALL AGES AND BACKGROUNDS IN IND	IA, THAILAND, SEVEN
AFRICAN NATIONS, THE CARIBBEAN, ARGENTINA, CHILE, PERU, EGYPT,	JAPAN, VIETNAM, AND
MANY OTHER COUNTRIES. THE INSTITUTE HAS ALSO PRODUCED A SERIES	OF TELEVISION AND
RADIO SPECIALS, INTRODUCING MILLIONS OF PEOPLE TO THE RICH HIST	ORY OF JAZZ. IN
RECENT YEARS, THE INSTITUTE HAS PARTNERED WITH BLACK ENTERTAINM	ENT_TELEVISION,
NATIONAL PUBLIC RADIO, AND THE PUBLIC BROADCASTING SYSTEM, IN A	SSOCIATION WITH
WETA-TV_IN_WASHINGTON, D.C	
FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION	
INTERNATIONAL JAZZ COMPETITION	
THE THELONIOUS MONK JAZZ COMPETITION, ESTABLISHED IN 1987, IS R	ECOGNIZED AS THE
WORLD'S MOST PRESTIGIOUS JAZZ COMPETITION AND HAS LAUNCHED A NU	MBER OF MAJOR
PROFESSIONAL JAZZ CAREERS. THE COMPETITION OFFERS YOUNG, ASPIRI	NG MUSICIANS FROM
AROUND THE WORLD THE OPPORTUNITY TO RECEIVE SCHOLARSHIP AWARDS	AND PRIZES, AS WELL
AS PERFORMANCE OPPORTUNITIES AND INTERNATIONAL EXPOSURE.	
FORM 990 PART VI LINE 11 - FORM 990 REVIEW PROCESS	
A COPY OF THE RETURN IS PROVIDED TO EACH BOARD MEMBER DURING TH	
AND TAX RETURN BY AN OFFICER OF THE ORGANIZATION.	

Schedule <b>O</b> (Form 990) 2009	Page 2
Name of the organization	Employer identification number
THELONIOUS MONK INSTITUTE OF JAZZ	52-1544030
FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORC	EMENT OF CONFLICTS
ALL CONFLICTS OF INTEREST ARE TO BE IMMEDIATELY DISCLOSED VI	A VERBAL AND WRITTEN
COMMUNICATION.	
FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROC	ESS FOR CEO, EXEC. DIR., OR TOP M
CEO'S PERFORMANCE IS ANNUALLY REVIEWED BY THE CHAIRMAN OF TH	E BOARD. ALL EMPLOYEES
ARE REVIEWED ANNUALLY.	
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY	AVAILABLE
GUIDESTAR HOSTS A COPY OF THE 990 OR CAN BE MADE AVAILABLE U	PON REQUEST.
	·

Schedule O (Form 990) 20	09						Page 2
Name of the organization						Employer identificatio	n number
THELONIOUS MONK	INSTITUTE	OF JAZZ				52-1544030	
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Thelonious Monk Institute of Jazz Property Plant & Equipment Depreciation Schedule 12/31/2009

Asset	Property Description	Date in Service	Cost	Sec 179 Exp $C_{\text{urrent}} = c$	Tay Sec	Prior	Jan-09	Feb-09	Jan-09 Feb-09 Mar-09 Apr-09	Apr-09
	monday (made)		1500		1111V (N) 801		Depleciation	Depleciation	Depreciation	Depreciation
iroup										
_	Piano	2661/1/2	17.500 00	00 0	00 0	17,500.00	ı		•	
9	Fax Machine - DC Office	1/1/1996	481 68	00 0	00 0	481 88	•	•	•	
7	Fax Machine - CA	9661/1/1	520 48	00 0	00 0	520 48	•		,	•
<b>∞</b>	Furniture - CA	9661/1/1	4,500 00	0.00	00 0	4,500 00	•	1	•	•
Ξ	Copier - Image Runner	1/27/2001	11,251 00	0.00	00 0	11,251 00	•		•	,
	Dell Computer - DC	5/19/2004	1,633 00	0.00	00 0	1,633 00	•	•	•	•
	Dell Computer - DC	7/17/2004	1,766 00	0.00	00 0	1,766 00		,	•	•
	Apple Computer - LA	9/1/2005	3,182 92	0.00	00 0	3,182 92	•	•	•	
	5 Dell Computers - DC	6/15/2005	8,772 74	0.00	00 0	8,772 74	,	*	•	•
	Copier - Image Runner - LA	6/15/2005	4,108 07	00 0	00 0	2,122 49	68 47	68.47	68 47	68 47
	Furniture - CA	6/14/2007	3,422 72	00 0	0.00	733 44		40.75	40.75	40 75
	Furniture - Loyola	7/12/2007	4,230 00	0.00	00 0	906 43	50 36	50.36	50 36	50 36
	Furniture - Loyola	7/12/2007	2,632 35	00 0	00 0	564 08	31 34	31 34	3134	3134
	Dell Compter-JITC	6/18/2006	2,319 65/			,				
		No Group	66,320 61	•		53,934.46		が存	E 250	4.01
		E	10000				-			
		Crand Lotal	00,320 01	-	•	55,934.46/				

A. Recalculated Agreed
T. Traced to Supporting Documentation Agreed.

1. Tracedto PY Avit, Agreed.

## Form **8868**(Rev April 2009)

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service File a separate application for each return.

OMB No 1545-1709

Internal Revenue	Service		File a Sepa	arate application for	each return.			
If you are	filing for an	Automatic 3-Mo	nth Extension, com	plete only Part I and	check this box.			. ► X
_	_		Automatic) 3-Month			page 2 of this	form)	
			ready been granted					
Partil	Automatic	3-Month Exte	nsion of Time.	Only submit orig	inal (no copies	s needed).		
				- · · · <b>,</b> - · · · · · · <b>,</b>		- · · · <b>- · · ·</b> ·		
• •	•		nd requesting an au					, L
All other corp income tax re		udıng 1120-C file	ers), partnerships, F	REMICS, and trusts i	must use Form 70	004 to request a	n extension of ti	me to file
returns noted the additiona Form 990-T	l below (6 mo l (not automa Instead, you r	nths for a corpoi ic) 3-month extenust submit the	n electronically file hation required to file ension or (2) you file fully completed and on e-file for Charities	e Form 990-T) How e Forms 990-BL, 606 signed page 2 (Par	ever, you cannot 59. or 8870. group	file Form 8868 or returns, or a co	electronically if ( omposite or con	1) you want solidated
_	Name of Exempt	Organization				. E	mployer identification	number
Type or print	THEI ONTO	HE MONE TH	כייידינויים אם דו	N 7 7	,	_	2-1544020	
File by the			STITUTE OF JA ber If a P O box, see inst			13	2-1544030	<del></del>
due date for filing your return See	5225 WIS	CONSIN AVE	NUE NW #605					
instructions	City, town or post	office, state, and ZIF	code For a foreign addre	ss, see instructions				
	WASHINGT	ON, DC 200	15					
		filed (file a sepa	arate application for	•				
X Form 990			Form 990-T (co	•	<u>-</u>	Form 4720		
Form 990	_		<del></del> -	ection 401(a) or 408		Form 5227		
Form 990			<u>-</u>	ust other than above	e)	Form 6069		
Form 990	)-PF	<del></del>	Form 1041-A			Form 8870		
		of <u>THOMA</u>			<b></b> -			
		) 364-7272		FAX No				. 🗀
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			organization's four d of the group, check					
	sion will cover	•	or the group, check	tills box and	attach a hat with	the hames and	LINS OF All THEIR	ibers
			onths for a corporati	on required to file F	orm 990-T) exten	sion of time	<del></del>	
until _	8/15	, 20 <u>10</u> , to 1	ile the exempt orga	•				
_		he organization'	s return for			•		
	calendar year				00			
▶ ∐	tax year begii	ining	, 20,	and ending				
2 If this ta	ax year is for l	ess than 12 moi	nths, check reason	Initial return	Final retu	rn Cha	nge in accountir	g period
3a If this a nonrefu	pplication is fondable credits	or Form 990-BL, See instruction	990-PF, 990-T, 472	0, or 6069, enter the	e tentative tax, le	ss any	3a \$	0.
<b>b</b> If this a made I	pplication is for nclude any pr	or Form 990-PF or year overpay	or 990-T, enter any ment allowed as a c	refundable credits a credit	ind estimated tax		3b \$	0.
deposit	Due. Subtractive with FTD coupertructions	t line 3b from li oon or, if require	ne 3a Include your d, by using EFTPS	payment with this fo (Electronic Federal	orm, or, if required Tax Payment Sys	d, item).	3c \$	0.
Caution. If yo		make an electi	onic fund withdrawa	al with this Form 886	58, see Form 8453	3-EO and Form	8879-EO for	

BAA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev 4-2009)