Form **990**.

Return of Organization Exempt From Income Tax

OMB No 1545-0047

Open to Public

Department of the Treasury

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

	Ilai Kevei		Information about Form 990 and its instructions is at www.iis.		30	20.15
<u>A</u> _			ndar year, or tax year beginning JUL 1 , 2014, and ending			, 20 15 er identification number
В		applicable	C Name of organization WORLD MUSIC INSTITUTE INC			
X	Address	change	Doing business as			23045
	Name cl	hange	Number and street (or P O box if mail is not delivered to street address) Room/sui			ne number
	Initial re	turn	68 JAY STREET 201	(212)	545-7536
	Final retu	rn/terminated	City or town, state or province, country, and ZIP or foreign postal code	i		
	Amende	ed return	BROOKLYN, NY 11201	G	Gross re	eceipts \$ 838,651
	Applicat	ion pending	F Name and address of principal officer GABRIELE SAPPINGTON	H(a) Is this a grou	return for	subordinates? Yes X No
_	,рост	pa	68 JAY STREET, SUITE 201, BROOKLYN, NY 11201	I		s included? Tyes No
_	Tay aya	mpt status	\[\begin{align*}	- ' '		a list (see instructions)
'-			worldmusicinstitute.org	H(c) Group ex	emption	number >
7			Corporation ☐ Trust ☐ Association ☐ Other ► L Year of formation			of legal domicile NY
K				311 1 3 0 3	W Otate	or legal dofficile 141
	art I	Summ				
	1	•				IRES WONDER FOR WORLD
Governance	1		THROUGH MUSIC AND DANCE. THROUGH POWERFUL PROGRAMMING, WMI IS CREATI			
nar			GEMENT WITH OTHER CULTURES, HELPING TO FOSTER DEEPER UNDERSTANDING OF			
Æ	2	Check th	is box $lacktriangle$ $lacktriangle$ if the organization discontinued its operations or disposed c	f more than 2	!5% of	its net assets
တ်	3	Number	of voting members of the governing body (Part VI, line 1a)		3	6
∘ರ	4	Number	of independent voting members of the governing body (Part VI, line 1b)		4	5
ies	5	Total nur	mber of individuals employed in calendar year 2014 (Part V, line 2a)		5	6
Activities &	6		nber of volunteers (estimate if necessary)		6	51
Act	7a		elated business revenue from Part VIII, column (C), line 12		7a	0
	b		lated business taxable income from Form 990-T, line 34		7b	0
	-	1101 01110	dated business tenesis in the month of the second s	Prior Year		Current Year
Revenue		Contribut	tions and grants (Part VIII, line 1h) . . .	500	, 395	588,368
	8		l.		,038	250,283
en/	9		service revenue (Part VIII, line 2g)	222	, 030	230,203
ě	10		ent income (Part VIII, column (A), lines 3, 4, and 7d)			
_	11		venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		400	020 651
	12		enue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	/31	,433	838,651
	13		nd similar amounts paid (Part IX, column (A), lines 1–3)	_		
	14	Benefits				
Ś	15		other compensation, employee benefits (Part IX, column (A), lines 5–10)	233	,136	165,721
Expenses	16a	Profession	onal fundraising fees (Part IX, column (A), line 11e)			
be	b	Total fun	draising expenses (Part IX, column (D), line 25) ▶ 26, 198		4454	建铁性和金钱的
ũ	17	Other ex	penses (Part IX, column (A), lines 11a-11d, 11f-24e)	562	,535	590,292
	18		penses Add lines 13–17 (must equal Part IX, column (A), line 25)	795	671	756,013
	19		less expenses Subtract line 18 from line 12	(64	,238	82,638
_ "				leginning of Curr		End of Year
Net Assets or	20	Total acc	sets (Part X, line 16)	111	.,397	235,224
Asse	21		ollities (Part X, line 26)		, 857	157,046
e fe	21		ts or fund balances Subtract line 21 from line 20		,460	
					, 400	70,170
	art II		ture Block			
			iry, I declare that I have examined this return, including accompanying schedules and stater lets beclaration of preparer (other than officer) is based on all information of which preparer			my knowledge and belief, it is
	ie, correc	zt, and comp	White the state of		-	///_///
٠.		1 N X-1	January Jany		/د.	16/16
	gn	11 0	attere of officer	Date		•
He	ere	GĂ	BRIELE SAPPINGTON	EXE	CUTI	VE DIRECTOR
			e or print name and title			
D,	aid	Print/Ty	pe preparer's name Preparer's signature Da	te	Check	X If PTIN
		WILL:	IAM TAM / Chilean / un 05	/16/16		ployed P00012168
	epare	1	11777 T.N. (CD.)	Firm's	EIN ►	13-4041440
U:	se On	1 V	address ►132 NASSAU STREET, SUITE 515, NEW YORK, NY 1003		e no (2	
Ms	v the I	RS discus	s this return with the preparer shown above? (see instructions)			X Yes ☐ No
_			action Act Notice, see the separate instructions.	<u>·</u>		Form 990 (2014)
гo	raper	work Kedl	iction not Notice, see the separate monucions.			101111 300 (2017)

BAA		0102 05/28/14		Form	n 990 (2014)
4 e Total program service expense			Vivosouge A		
4 d Other program services (Desc (Expenses \$	ribe in Schedule O) including grants of	\$) (Revenue \$)
Ad Other program actions (Dec	ribo in Schedulo ()		<u> </u>		
	·				
4 c (Code) (Expens	iliciuc	g grants 01) (Izeveill	· ·	
4 c (Code) (Expens	20 \$ malus	ling grants of \$) (Reven	⊔e \$	
	-				
			-		
					
4 b (Code:) (Expens	es \$ includ	ling grants of \$) (Reven	ue \$)
		-			-
	-				
					
				-	
	ASIAN.				
	OREAN, MIDDLE EASTER				
	TS_A_FULL_SEASON_OF_C				
4 a (Code:) (Expense			0.)(Revenu		0,283.)
Section 501(c)(3) and 501(c)(4 and revenue, if any, for each p) organizations are required to repo	ort the amount of gra	ants and allocations to others,	the total expenses	1
If 'Yes,' describe these change 4 Describe the organization's pro-	ogram service accomplishments for	each of its three land	rgest program services, as me	asured by expense	es
•	nducting, or make significant chang	es in how it conducts	ts, any program services?	Yes	X No
If 'Yes,' describe these new se				_	_
	any significant program services d			· · · · · Yes	X No
			h ware not lessed on the name		
See Form 990, Page 2, Part II	-	_			
	POWERFUL PROGRAMMING				
•	UTE INSPIRES WONDER I	FOR WORLD CUI	LTURES THROUGH MUS	ic	
Check it Schedule O co Briefly describe the organization	ontains a response or note to any li	ie in this Part iii			· · · · <u> </u>
	gram Service Accomplish				
	rram Kamilaa Aasamniichi	manta			

Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Х Х Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 2 Х 3 X 4 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III Х 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Χ 6 Х 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' Х Я Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation Χ X 10 If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule 11 a Χ 11 b Х 11 c d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported X 11 d Х e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X.... 11 e 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 (ASC 740)? If 'Yes,' complete Schedule D, Part X . . . 11 f Х 12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII Х 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If Yes, and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional Х 12 b Х Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E....... 13 Х 14a 14a Did the organization maintain an office, employees, or agents outside of the United States? b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising Х 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any 15 Х 16 Χ 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 (see instructions) Х 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, Χ 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If Yes, Χ 19 20 Х

20 b

b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?

Part	Checklist of Required Schedules (continued)			-3-
			Yes	No
2 1	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	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 Schedule J	23		Х
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, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		Х
b c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		Х
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 Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If</i> "Yes," <i>complete Schedule L, Part II</i>	26	Х	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III.	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)	4		4
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV. A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.	28a 28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	İ	Х
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	Х	Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		Х
33	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.	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	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	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R</i> , <i>Part VI</i>	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note . All Form 990 filers are required to complete Schedule O	38	Х	

Form 990 (2014) WORLD MUSIC INSTITUTE INC 13-3323045 Part V Statements Regarding Other IRS Filings and Tax Compliance Yes No

				
1	a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		* *	~ -
	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	ا ا	,	
	(gambling) winnings to prize winners?	1 c	X	ļ
2	a 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 2 a 6			***
	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	Х	_
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	^		
3	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		X
	b If 'Yes' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation in Schedule O</i>	3 b		
4	a 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. ▶		* • •	`
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)		1 L	
5	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6	a 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 as charitable contributions?	6 a		х
	b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
	Organizations that may receive deductible contributions under section 170(c).	B. 196	% }	er .
	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and		1	
	services provided to the payor?	7 a	X	
	b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b	X	
	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		Х
	d If 'Yes,' indicate the number of Forms 8282 filed during the year	*	2. 🥷 :	16.
	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e	8 <u>45 - 1826 -</u>	X
	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Х
	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a			
8	Form 1098-C?	7 h	252	4
Ū	organization have excess business holdings at any time during the year?	8	l.#8	Х
9			,	
	a Did the sponsoring organization make any taxable distributions under section 4966?	9 a	alternations are and	Х
	b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		Х
10	Section 501(c)(7) organizations. Enter	\ \ \ \ \ \	N2	~
	a Initiation fees and capital contributions included on Part VIII, line 12	3 m	, ",.	
	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	1		-
• •	a Gross income from members or shareholders			
	b Gross income from other sources (Do not net amounts due or paid to other sources	٤.		
	against amounts due or received from them)	ļ	(T 3)	┝┸
12	La Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		<u> </u>
	b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year		1 KK	1 . [8]
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	a Is the organization licensed to issue qualified health plans in more than one state?	13 a		<u> </u>
	· · · · · · · · · · · · · · · · · · ·	٠,	ŀ	**
	b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	- *	į	à
	c Enter the amount of reserves on hand	1 .	, 5	
14	a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14 b		

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below,			
•	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O S Check if Schedule O contains a response or note to any line in this Part VI	ee ins	tructi	ions X
Section	on A. Governing Body and Management	•		
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year .	7722		
	If there are material differences in voting rights among members of the governing body, or	a		
	If the governing body delegated broad authority to an executive committee or similar	0 43		
	committee, explain in Schedule O.		9.4	
р 2	Enter the number of voting members included in line 1a, above, who are independent <u>1b</u> <u>5</u> Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	,'%'3"		變
2	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			_
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X _
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?			.,
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	7a		X
D	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	Ž.		f.
	the year by the following	* *		
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	X	<u> </u>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			١
Conti	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	ndo i	X
Secti	on B. Policies (This Section B requests information about policies not required by the internal Neven	ue C	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	_	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	ļ
ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990	40	<u> </u>	لخمصا
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b	X X	
b	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	120		
С	describe in Schedule O how this was done.	12c	Х	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did 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 approval by	, , , , , , , , , , , , , , , , , , ,	<* / %	
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	<u> </u>		لــــا
a	The organization's CEO, Executive Director, or top management official	15a	X	├─
b	Other officers or key employees of the organization	15b	X	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	k, t		. 74
	with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	j	»,	
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	*		***
	organization's exempt status with respect to such arrangements?	16b	L	<u> </u>
	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed ► New York Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	501	(C)(3)c	only)
10	available for public inspection. Indicate how you made these available. Check all that apply	. 55 11	حربي د	, only)
	☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int	erest	polic	y, and
	financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and re	cords	•	7526

Page	4

Form		

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII .

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 organization's tax year

- 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, if any See instructions for definition of "key employee"
- 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 neither the organization ne	or any relate	d org	aniz	atio	n c	ompe	nsa	ited any curren	it officer, director	r, or trustee
(A) Name and Title	(B) Average hours per week (list any	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable	(E) Reportable compensation from related	(F) Estimated
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) PAUL PALMER	1.50									
CHAIRMAN		Х		Х				0	0	0
(2) ZETTE EMMONS	1.50									
SECRETARY		Х		Х				0	0	0
(3) ANDREW FAULKNER	1.50									
DIRECTOR		X				ļ <u>.</u>		0	0	0
(4) DAISY PARADIS	1.50									
DIRECTOR		X						0	0	0
(5) SANDHYA MALHOTRA	1.50									
DIRECTOR		X					ļ	0	0	0
(6) CYNTHIA MCVAY	40.00									
ACTING EXECUTIVE DIRECTOR		X		Х			<u> </u>	0	0	0
(7) KAREN SANDER	40.00									
EXECUTIVE DIRECTOR				Х				74,446	0	3,879
(8)						<u> </u>				
(9)										
(10)										
(11)							 			_
(12)										
(13)		-								
(14)										

Form 990 (2014) WORLD MUSIC INSTITUTE I									13-332304	
Part VII Section A. Officers, Directors, Tru		Key	En			es,	an	d Highest Con	npensated Emp	loyees (continued)
- (A) Name and title	Average hours per week	box	, unle	heck ss pe nd a c	ition more rson directo	than o	an ee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	(list any hours for related organiza - tions below dotted line)	or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(15)									_	
(16)										
<u>(17)</u>										
(18)							-			
(19)										
(20)										
(21)										
(22)										
(23)				•						
(24)										
(25)										
1 b Sub-total	on A						>	74,446.	0.	3,879.
d Total (add lines 1b and 1c)								74,446.	0.	<u>' '</u>
from the organization			1 400		WIIC		146			Yes No
3 Did the organization list any former officer, director, on line 1a? If 'Yes,' complete Schedule J for such in										3 X
For any individual listed on line 1a, is the sum of rep the organization and related organizations greater ti	oortable co	ompe	nsat <i>If "</i> Y	ion : 'es' i	and com	othei plete	r coi Scl	mpensation from hedule J for		
such individual	ompensat	ion fr	om a	any	unre	lated	org	ganization or individ	dual	4 X
for services rendered to the organization? If 'Yes,' c Section B. Independent Contractors										. 3 1
Complete this table for your five highest compensation from the organization Report compe										··· · · · · · ·
(A) Name and business addre	ess							Description of		(C) Compensation
							-			
					_					
2 Total number of independent contractors (including	but not lin	nited	to th	ose	liste	ed ab	ove) who received mo	re than	
\$100,000 of compensation from the organization										6 5 4 4 4 4 4 4 5 6 6 6 6 6 6 6 6 6 6 6

		ţ			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
တ္တ	1 a	Federated campaigns	. 1a			3		
ant		Membership dues	-	1,155.	=			
ع ق		Fundraising events			1			
ifts r A		Related organizations	<u> </u>		-[ž "s
<u>⊒</u> '⊆		Government grants (contributions)			, i		## X	·
Sin		<u> </u>		113,800.			F # 4	
턫	f	All other contributions, gifts, grants, a similar amounts not included above.	and	471,413.				ğ.
Contributions, Gifts, Grants and Other Similar Amounts		Noncash contributions included in lin		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
<u> </u>		Total. Add lines 1a-1f	-		F00 2C0	1		e ~
<u>မ</u>	- "	Total: Add lines 14-11		Business Code	588,368.			. v. 6 : 8
Program Service Revenue	2 2	CONCEDES		711130			0.	0.
ě	b	CONCERTS		/11130	250,283.	250,283.	ļ. · · ·	
Se								
ž	4							
လို	u							
ran	ء	All other program convectors						
<u>5</u>		All other program service reverse Total. Add lines 2a-2f		· · · · · · · · · · · · · · · · · · ·	252 222	<u> </u>		<u> </u>
					250,283.	2,		z 🔻 📗
	3	Investment income (including other similar amounts)	dividends,	interest and		İ		
	4	Income from investment of tax						
	5	Royalties	-	•				
			(ı) Real	(II) Personal	* * *	* * * * * * * * * * * * * * * * * * * *		₩
	6 a	Gross rents		· · · · · · · · · · · · · · · · · · ·	7.50	2 1		
		Less: rental expenses				*:	**	
		Rental income or (loss)						
				<u> </u>	3-8-30-4-	· · · · · · · · · · · · · · · · · · ·		
		` <u> </u>	Secuntres	(II) Other	*		1	Y .cs:14, 4
	/ a	Gross amount from sales of assets other than inventory			* ***			
						, %	\$ E'' '	**
	D	Less cost or other basis and sales expenses			7 3 å å	*	3	
	С	Gain or (loss)					****	
		Net gain or (loss)		·	Ja Marie Vinde - Marie - Marie - Milania - Milania - Milania - Milania - Milania - Milania - Milania - Milania	33.4840000	# (
•		Gross income from fundraising			* **	1 4	1.2.	3.8. *
enne	Ja		_			***	() () () () () () () () () ()	
		of contributions reported on lir	ne 1c)					
Other Rev		See Part IV, line 18		а	•			
je.	b	Less direct expenses		b				
ਠੋ	С	Net income or (loss) from fund	Iraising ev	ents ►				
	9 a	Gross income from gaming ac See Part IV, line 19	tivities	а		,,,,,	**	**************************************
	b	Less direct expenses		b				
	С	Net income or (loss) from gam	ning activiti	es ▶				
	10 a	Gross sales of inventory, less	returns		· •	\$ 1 · · · · · · · · · · · · · · · · · ·	,	-
		and allowances		a				
		Less cost of goods sold		b				
	С	Net income or (loss) from sale	s of inven	tory ▶				
		Miscellaneous Revenue		Business Code		<u> </u>	<u>*\$2.2</u>	
	11 a		 _		ļ <u>-</u>	ļ	 	
	b						 	
	С	T					 	ļ
		All other revenue					 	ļ
		Total. Add lines 11a-11d					<u> </u>	
	12	Total revenue. See instruction	ns		838,651.	250,283.	0.	0.

Part IX Statement of Functional Expenses

	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21		į	\$ 200° \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16.		,	S W 1 W 1	
4	Benefits paid to or for members			* * * * * * * * * * * * * * * * * * * *	· *· ; * · · ; ; · ·
5	Compensation of current officers, directors, trustees, and key employees	31,667.	19,000.	9,500.	3,167.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salanes and wages	98,910.	98,224.	686.	0.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	26,274.		2,050 <u>.</u>	637.
10	Payroll taxes	8,870.	7,963.	<u>692.</u>	215.
11	Fees for services (non-employees)				
_	Management		<u> </u>		-
	; Accounting	38,094.	0.	38,094.	0.
	Lobbying	30,094.	0.	30,034.	
	Professional fundraising services See Part IV, line 17			* 7 / * } ! *	
f	Investment management fees				
g	Other (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	163,533.	115,908.	25,500.	22,125.
12	Advertising and promotion	44,445.	44,445.	0.	0.
13	Office expenses	6,999.	0.	6,999.	0.
14	Information technology				
15	Royalties				
16	Occupancy	27,750.		27,750.	0.
17	Travel	29,352.	27,838.	1,514.	0.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings		 		
20	Interest			_	
21	Payments to affiliates	520	520	0.	0.
22 23	Depreciation, depletion, and amortization Insurance	528. 9,249.	528. 5,532.	3,717.	0.
	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10%	3,243.	J, J, J, J, J, J, J, J, J, J, J, J, J, J	****	
	of line 25, column (A) amount, list line 24e expenses on Schedule O)		inter (A)	G - 72	7 v. 3 / 8
	ARTISTS'_FEES	117,226.	117,226.		0.
	PRINTING	27,416.	27,416.	0.	0
	THEATRE RENTAL	51,155.	51,155.	0.	. 0
	PRODUCTION COSTS All other expenses		21,551. 29,788.	23,152.	54
25		756,013.	T	139,654.	26,198
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)		333,131.	257,004.	20,130

Part X Balance Sheet

.—	•	Check if Schedule O contains a response or	r note to any line in this Pa		<u>.</u>	<u>. </u>
•				(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		7,108	1	37,147
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net			3	125,000
	4	Accounts receivable, net		88,970	4	30,043
1	5	Loans and other receivables from current and	former officers, directors,			,
1		trustees, key employees, and highest co	ompensated employees	Year A. War and A. War and A. War and A. War and A. War and A. War and A. War and A. War and A. War and A. War		
		Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified pers	sons (as defined under section			× .
		4958(f)(1)), persons described in section 4958(c)(3)(B), ar				
		sponsoring organizations of section 501(c)(9) volume				2.27.4
ts		organizations (see instructions) Complete Part II of Sche	edule L		6	
Assets	7	Notes and loans receivable, net			7	
۴	8	Inventories for sale or use		4,907	8	4,837
	9	Prepaid expenses and deferred charges		3,412	9	26,505
	10a	Land, buildings, and equipment cost or			47.0	
İ		other basis Complete Part VI of Schedule D	10a 11,650			<u> </u>
	b	Less accumulated depreciation	10b 6,958	0	10c	4,692
	11	,			11	
1	12	Investments—other securities See Part IV, line			12	
	13	Investments—program-related See Part IV, line	11		13	
	14	Intangible assets	• • •	7.000	14	7.000
	15	Other assets See Part IV, line 11.		7,000	15	7,000
	16	Total assets. Add lines 1 through 15 (must equa	al line 34)	111,397	16	235,224
	17	Accounts payable and accrued expenses .	• •	66,690	17 18	92,479
	18	Grants payable	•		19	
	19 20	Deferred revenue Tax-exempt bond liabilities	•		20	
	21	Escrow or custodial account liability Complete	Part IV of Schedule D		21	
	22	Loans and other payables to current and for			21	2 3 3 37 84
Liabilities	22	trustees, key employees, highest comper			* *	
<u>;</u>		disqualified persons Complete Part II of Schedu			22	15,400
Lia	23	Secured mortgages and notes payable to unrela		49,167	23	49,167
- 1	24	Unsecured notes and loans payable to unrelated			24	
	25	Other liabilities (including federal income tax,	-			
		parties, and other liabilities not included on lines				
		of Schedule D	• •		25	
	26	Total liabilities. Add lines 17 through 25 .	<u> </u>	115,857	26	157,046
Ses		Organizations that follow SFAS 117 (ASC 958 complete lines 27 through 29, and lines 33 an			,	
an	27	Unrestricted net assets		(9,250	27	70,234
Fund Balances	28			4,790	28	7,944
힏	29	Permanently restricted net assets			29	
		Organizations that do not follow SFAS 117 (ASC 9 complete lines 30 through 34.	58), check here ► ☐ and			
ts c	30	Capital stock or trust principal, or current funds			30	
se	31	Paid-in or capital surplus, or land, building, or e			31	
AS	32	Retained earnings, endowment, accumulated in	come, or other funds		32	
Net Assets or	33			(4,460		78,178
	34	Total liabilities and net assets/fund balances .		111,397	34	235,224

orr	m 990 (2014) WORLD MUSIC INSTITUTE INC	3323045		Page	e 12
Pa	Reconciliation of Net Assets	•			
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	838	8,65	1.
2	Total expenses (must equal Part IX, column (A), line 25)	2	756	6,01	3.
3	Revenue less expenses Subtract line 2 from line 1	3	82	2,63	8.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	- 4	4,46	0.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7		7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	71	8,17	8.
Рã	Financial Statements and Reporting			- 7	
	Check if Schedule O contains a response or note to any line in this Part XII				
	Check if Schedule O contains a response of note to any line in this Part All	 			_L_I No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O		0 4 0 4		
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a		X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis	An organization of the control of th			
	b Were the organization's financial statements audited by an independent accountant?		2 b	х	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both. X Separate basis Consolidated basis Both consolidated and separate basis				
,	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audi review, or compilation of its financial statements and selection of an independent accountant?	t, 	2 c	х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		H	31	1 (P)
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		3 a		Х

b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit

BAA

3 b

Form 990 (2014)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 2014

Open to Public Inspection

Name o	Name of the organization Employer identification number							
WORI	WORLD MUSIC INSTITUTE INC13-3323045							<u> </u>
Part	T	Reason for Public Cha	rity Status (All or	ganizations must co	mplete	this p	art.) See instruction	S.
The or	gai	nization is not a private foundati	on because it is (For	lines 1 through 11, check	only on	e box.)		
1		A church, convention of church	es, or association of o	churches described in se	ction 17	0(b)(1)(A)(i).	
2		A school described in section	170(b)(1)(A)(ii). (Attac	ch Schedule E.)				
3		A hospital or a cooperative hos		•	170(b)(1)(A)(iii)		
4	\vdash	A medical research organization	. •					ne hospital's
•		name, city, and state						•
5		An organization operated for the 170(b)(1)(A)(iv). (Complete Pa	e benefit of a college art II.)	or university owned or op	perated b	y a gov	emmental unit described	in section
6		A federal, state, or local govern	ment or governmenta	il unit described in sectio	n 170(b)(1)(A)(v	<i>י</i>).	
7	X	An organization that normally run section 170(b)(1)(A)(vi). (C	eceives a substantial ¡ complete Part II.)	part of its support from a	governm	nental ur	nit or from the general pu	iblic described
8		A community trust described in	section 170(b)(1)(A)	(vi). (Complete Part II)				
9		An organization that normally refrom activities related to its exemples investment income and unrelated June 30, 1975. See section 50	mpt functions — subject ed business taxable in 19(a)(2). (Complete Pa	ect to certain exceptions, ncome (less section 511 art III.)	and (2) r tax) from	no more busines	than 33-1/3% of its supposes acquired by the org	ort from gross
10	L	An organization organized and	operated exclusively	to test for public safety. S	See sect	ion 509	(a)(4).	
11		An organization organized and or more publicly supported organizes 11a through 11d that descriptions.	anızatıons described ii	n section 509(a)(1) or se	ection 50	09(a)(2).	See section 509(a)(3).	
а		Type I. A supporting organizationganization(s) the power to recomplete Part IV, Sections A	gularly appoint or elec	ed, or controlled by its si t a majority of the director	upported ors or true	organız stees of	ation(s), typically by giving the supporting organization.	ng the supported tion You must
b		Type II. A supporting organizate management of the supporting must complete Part IV, Sections A	tion supervised or con organization vested in	trolled in connection with the same persons that	its supp control o	orted or r manag	ganızation(s), by havıng le the supported organız	control or ation(s). You
С		Type III functionally integrate organization(s) (see instruction	ed. A supporting organ	nization operated in conn	ection w	ith, and	functionally integrated w	ith, its supported
d		Type III non-functionally inte functionally integrated The orgunstructions) You must complete the complete th	grated. A supporting of ianization generally m	organization operated in ust satisfy a distribution i	connect	on with	its supported organizatio an attentiveness require	n(s) that is not ment (see
e		Check this box if the organization integrated, or Type III non-fund	on received a written	determination from the IF	RS that is	з а Туре	I, Type II, Type III functi	onally
		ter the number of supported org						
g	Pr	ovide the following information a	bout the supported or	ganization(s)				
		(i) Name of supported organization	(II) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	escribed on lines 1-9 organization listed in your governing			(vi) Amount of other support (see instructions)
					Yes	No		
(A)								
(B)								
<u>1-1</u>								
(C)								
(D)								
(E)								
Total								
	_		~ ***	L	t		l	<u> </u>

13-3323045

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
Cale: begi:	ndar year (or fiscal year nning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants')	606,583.	666,547.	520,551.	509,395.	588,368.	2,891,444.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	606,583.	666,547.	520,551.	509,395.	588,368.	2,891,444.
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)			The second secon	· · · · · · · · · · · · · · · · · · ·		707 102
6	Public support. Subtract line 5 from line 4					**	707,103.
Sec	tion B. Total Support	1			<u> </u>	h	2,201,0121
Cale	ndar year (or fiscal year nning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4	606,583.	666,547.	520,551.	509,395.	588,368.	2,891,444.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,574.	143.	5.			1,722.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10			1			2,893,166.
12	Gross receipts from related activiti	es, etc (see instruc	ctions)			12	
13	First five years. If the Form 990 is organization, check this box and s						
	tion C. Computation of Pu						
	Public support percentage for 201						75.50 %
15	Public support percentage from 20)13 Schedule A, Pa	art II, line 14			15	82.98%
16 a	33-1/3% support test — 2014. If and stop here. The organization of						
b	33-1/3% support test — 2013. If t and stop here. The organization of						
17 a	10%-facts-and-circumstances to or more, and if the organization method organization meets the 'facts-a	eets the 'facts-and-	-circumstances' tes	st, check this box a	and stop here. Exp	olain in Part VI how	′ —
	10%-facts-and-circumstances to or more, and if the organization morganization meets the 'facts-and-	eets the 'facts-and- circumstances' tes	-circumstances' tes t The organization	st, check this box a n qualifies as a pub	and stop here. Exp olicly supported org	olain in Part VI how ganization	the ▶ □
18	Private foundation. If the organiz	ation did not check	k a box on line 13,	16a, 16b, 17a, or			
					0-1	hadula A /Form 00	0 000 EZ\ 0044

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 or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II)

	tion A. Public Support			<u></u>			
Calen 1	dar year (or fiscal yr beginning in) Gifts, grants, contributions and membership fees received. (Do not include	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
2	any 'unusùal grants ')						
3	tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 .						
5	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
	Total. Add lines 1 through 5						
t	and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 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	•			,	<u> </u>	
Calen	dar year (or fiscal yr beginning in) 🕨 👚	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
11	Add Innes 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
	10c, 11 and 12.)	<u> </u>					<u> </u>
	First five years. If the Form 990 is organization, check this box and s	top here		hırd, fourth, or fifth	tax year as a sect	tion 501(c)(3)	▶
	tion C. Computation of Pu						
15	Public support percentage for 201						
	Public support percentage from 20					16	§
	tion D. Computation of Inv				2)	· I	
17	Investment income percentage for						
18	Investment income percentage fro						
	a 33-1/3% support tests — 2014. If is not more than 33-1/3%, check to	his box and stop h	ere. The organizat	ion qualifies as a	publicly supported	organization	▶ ∐
	33-1/3% support tests — 2013. If line 18 is not more than 33-1/3%,	check this box and	stop here. The or	ganizatıon qualıfie	es as a publicly sup	ported organizat	ion ▶ 🔲
20 BAA	Private foundation. If the organiz	cauon did not check	TEEA0403				990 or 990-F7) 2014

Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All	Supporting	Organizations
----------------	------------	---------------

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in Part VI how the supported organizations are designated if designated by class or purpose, describe the designation if historic and continuing relationship, explain	1		建了
	and designation in rustone and community relationality, explain	V	THE PERSON NAMED IN	comment ma
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)	2		
				~ Z~
3 a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below	3a		*,'.
t	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in Part VI when and how the organization made the determination	3b		
ď	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in Part VI what controls the organization put in place to ensure such use	3c		7387
4 a	Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		
	,	72.45	WW. 32	3757
ŧ	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in Part VI how the organization had such control and discretion despite being controlled	41		
	or supervised by or in connection with its supported organizations	4b	٠ _ ناسا	
C	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	4c		
		80 KJ	2002	6. 386
5 a	Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by			
	amendment to the organizing document)	5a		
		-, 3	2.367-1	72.1
Ł	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
(Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c	Frank	5.5 rm
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If 'Yes,' provide detail in Part VI	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990)	7		
	rogara to a cassiantial continuator. In 100, complete i arci of confedure E (1 offi 300)	Singular to	1 20, 18,40 25	
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990)	8		
9 a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If 'Yes,' provide detail in Part VI	9a		\$ 7
			SERV	*b. \$6000.7 A
ł	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in Part VI	9b		
•	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If Yes,' provide detail in Part VI	9c		436
10 a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes,' answer (b) below	10a		
ŀ	Did the organization, have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)	10b	X ():	

Pa	irt:IV 🕯 Supporting Organizations (continued)			
			Yes	No
	Has the organization accepted a gift or contribution from any of the following persons?		15 mg.	
•	a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a	77.70.8	39.33%
	b A family member of a person described in (a) above?	11b		
	c A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI	11c		
Sec	ction B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		**************************************
Sec	ction C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
Sec	ction D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	**************************************	**************************************	, , , , , , , , , , , , , , , , , , , ,
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played in this regard	3		
Sec	ction E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):			
	The organization satisfied the Activities Test Complete line 2 below.			
	b The organization is the parent of each of its supported organizations. Complete line 3 below			
	c The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions)	ons)		
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a	Jan 198	
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.	5		
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI	3a	935	
	b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard	3b	<u> </u>	

Pa	rt Vﷺ Tỳpe III Non-Functionally Integrated 509(a)(3) Supporting Orga	<u>ıniz</u> a	itions	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nother Type III non-functionally integrated supporting organizations must complete Sec	loven tions	nber 20, 1970. See instrud A through E	ctions. All
Sec	tion A – Adjusted Net Income		(A) Pnor Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Sec	etion B — Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year).			
í	Average monthly value of secunties	1 a		
i	Average monthly cash balances	1 b		
	Fair market value of other non-exempt-use assets	1 c		
	d Total (add lines 1a, 1b, and 1c)	1 d		
-	Discount claimed for blockage or other factors (explain in detail in Part VI)	**		
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of pnor-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C — Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2	是只然是 的 學是不多	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	the said of the said	
4	Enter greater of line 2 or line 3	4	· 17.50 法 動作法 赞	
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally-integrated (see instructions).	d Typ	e III supporting organization	on

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Schedule A (Form 990 or 990-EZ) 2014

Sche	dule A (Form 990 or 990-EZ) 2014	innorting Organization	tions (continued)	Page 7
<u> </u>	t V Type III Non-Functionally Integrated 509(a)(3) Sution D — Distributions	ipporting Organizat	dons (continued)	Current Year
, <u>000</u> 1	Amounts paid to supported organizations to accomplish exempt purpos	ses		
2	Amounts paid to perform activity that directly furthers exempt purposes			
_	in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purposes of suppo	orted organizations		
4	Amounts paid to acquire exempt-use assets	<u></u>		
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI) See instructions			
7	Total annual distributions. Add lines 1 through 6		<u> </u>	
8	Distributions to attentive supported organizations to which the organization Part VI) See instructions.	• "		
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
Sec	tion E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014 (reasonable cause required — see instructions)	~ \ % /s .		
3	Excess distributions carryover, if any, to 2014	. ~	· * * .	in the second
а		* **		***
b		A.	* " * *	, 🛊 . 4
С		<i>x 1</i>		
d	Market and the same special sp		2 11/2 1 7 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1	* * * * * * * * * * * * * * * * * * *
е	From 2013			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			~ · · · · · · · · · · · · · · · · · · ·
h	Applied to 2014 distributable amount		<u> </u>	
i	Carryover from 2009 not applied (see instructions)	~ ~~ ~~	, <u> </u>	
j	Remainder Subtract lines 3g, 3h, and 3i from 3f		, 1 * 4 \ , \ , \ \	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
4	Distributions for 2014 from Section D, line 7 \$			
а	Applied to underdistributions of prior years	a to some		, a
	Applied to 2014 distributable amount	, , , , , , , , , , , , , , , , , , , ,	<u> </u>	
c	Remainder Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6	Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7	Excess distributions carryover to 2015. Add lines 3 _j and 4c		***	
8	Breakdown of line 7	, , ,	· · · · ·	
a	The second secon			~
b	\$ 5 5 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6		,s , j .	*
С	東京 後、大き、 東京を新くか 湯水の (1) (1) (1) (1) (1)			<u> </u>
d	Excess from 2013		and the second distribution of the second	· · · · · · · · · · · · · · · · · · ·
е	Excess from 2014		1. M. 1. M. N. 1. M. 1.	well and the special con-

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Schedule A (Form 990 or 990-EZ) 2014

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered 'Yes,' to Form 990,
Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

2014

OMB No 1545-0047

Open to Rublic Inspection

Department of the Treasury Internal Revenue Service Name of the organization

	WORLD MUSIC INSTITUTE INC	13-3323045
D**	প্তা 🚜 Organizations Maintaining Donor Advised Funds or Other Similar Fund	
Rai	Complete if the organization answered 'Yes' to Form 990, Part IV, line 6.	3 of Accounts.
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	(b) I unds and other accounts
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advisore the organization's property, subject to the organization's exclusive legal control?	sed funds
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose impermissible private benefit?	conferring
Pai	Conservation Easements. Complete if the organization answered 'Yes' to Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (check all that apply)	
	Preservation of land for public use (e.g., recreation or education)	historically important land area
	Protection of natural habitat Preservation of a	certified historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form	of a conservation easement on the
	last day of the tax year	v
		Held at the End of the Tax Year
	a Total number of conservation easements	2 a
ı	b Total acreage restricted by conservation easements	2 b
•	Number of conservation easements on a certified historic structure included in (a)	2 c
•	d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2 d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by th tax year ►	e organization during the
4	Number of states where property subject to conservation easement is located ▶	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements d	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during	the year
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170 and section 170(h)(4)(B)(II)?	0(h)(4)(B)(ı) Yes
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expens include, if applicable, the text of the footnote to the organization's financial statements that describes conservation easements.	e statement, and balance sheet, and the organization's accounting for
Pai	Organizations Maintaining Collections of Art, Historical Treasures, or O Complete if the organization answered 'Yes' to Form 990, Part IV, line 8.	ther Similar Assets.
1 a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue state art, historical treasures, or other similar assets held for public exhibition, education, or research in furt in Part XIII, the text of the footnote to its financial statements that describes these items	
l	o If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement historical treasures, or other similar assets held for public exhibition, education, or research in further following amounts relating to these items	
	(i) Revenue included in Form 990, Part VIII, line 1	▶ \$
	(ii) Assets included in Form 990, Part X	
2	If the organization received or held works of art, historical treasures, or other similar assets for financiamounts required to be reported under SFAS 116 (ASC 958) relating to these items:	al gain, provide the following
á	a Revenue included in Form 990, Part VIII, line 1	▶\$
ı	Assets included in Form 990, Part X	▶\$

Part III Organizations Mainta	ining Collect	ion <u>s</u> of Art	<u>, Historica</u>	I Treasures, or	Other Similar Ass	ets (contini	ued)
 Using the organization's acquisition items (check all that apply) 	n, accession, and	other records	, check any o	f the following that a	are a significant use of its	collection	
a Public exhibition		d [Loan or exc	hange programs			
b Scholarly research		e _	Other				
c Preservation for future general	tions						
 Provide a description of the organic Part XIII. 	zation's collection	ns and explain	how they furt	her the organization	's exempt purpose in		
5 During the year, did the organization to be sold to raise funds rather that	n to be maintaine	d as part of the	e organization	n's collection?		Yes	No
Part IV Escrow and Custodia line 9, or reported an a	I Arrangeme mount on For	nts. Comple m 990, Part	ete if the or X, line 21.	ganızation ansv	vered 'Yes' to Form	990, Part I\ 	√, ————
1 a Is the organization an agent, truste on Form 990, Part X?	ee, custodian, or o				ets not included	Yes	No
b If 'Yes,' explain the arrangement in	Part XIII and cor	mplete the follo	owing table				
						Amount	
c Beginning balance							
d Additions during the year							
e Distributions during the year							
f Ending balance							
2 a Did the organization include an am					· •	Yes	No No
b If 'Yes,' explain the arrangement in	Part XIII Check	nere if the exp	planation has	been provided in Pa	irt XIII		
Part V Endowment Funds. C	omplete if the	organizatio	on answers	d 'Ves' to Form	990 Part IV June 10	<u> </u>	
Fait V Lindowine it I dids.	(a) Current yea		Prior year	(c) Two years back	(d) Three years back	(e) Four yea	rc hack
1 a Beginning of year balance	(a) Current yea	(6)	riioi yeai	(c) Two years back	(a) Three years back	(e) i our yea	13 Dack
b Contributions					-		
						+	
c Net investment earnings, gains, and losses							
d Grants or scholarships						 	
e Other expenditures for facilities and programs							
f Administrative expenses							
g End of year balance		<u> </u>		1	1	<u> </u>	
2 Provide the estimated percentage			(line 1g, colu	mn (a)) held as:			
a Board designated or quasi-endowr		——— ^೪					
b Permanent endowment	-	0					
c Temporarily restricted endowment							
The percentages in lines 2a, 2b, ai	nd 2c should equa	ai 100%					
3 a Are there endowment funds not in organization by	the possession o	f the organizat	tion that are h	eld and administere	d for the	Yes	No
(i) unrelated organizations						. 3a(i)	
(ii) related organizations			<i>.</i>			. 3a(ii)	
b If 'Yes' to 3a(II), are the related org	anizations listed	as required on	Schedule R?	٠		. 3b	
4 Describe in Part XIII the intended u	uses of the organ	ızatıon's endov	wment funds				
Part VI Land, Buildings, and Complete if the organiz		ed 'Yes' to F	Form 990, I	Part IV, line 11a	. See Form 990, Pa	rt X, line 10).
Description of property	· 1	Cost or other (investment	basis (b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book v	
1 a Land					**. · ·		
b Buildings							
c Leasehold improvements							
d Equipment				11,650.	6,958.	4	1,692.
e Other		•					
Total. Add lines 1a through 1e (Column	(d) must equal F	orm 990, Part	X, column (B), line 10c)		4	1,692.
BAA	· ·			··· · · · · · · · · · · · · · · · · ·		ule D (Form 99	

Part VII Investments - Other Securities.	IV14- F 000 F	2 - 1 N / Em. 44h Can Farm 000 F	Dark V. Brand 10
Complete if the organization answered	(b) Book value	(c) Method of valuation Cost or end-o	
(a) Description of security or category (including name of security) (1) Financial derivatives	, ,	(C) Wethod of Valdation Cost of end-c	or-year market value
(2) Closely-held equity interests			
and the second s			
	-		
(A) (B)	-		
(c)	-		
(D)	-		
(E)			
(F)			
(G)			
(H)			
(1)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12)	•	· (4.4%	
Part VIII Investments - Program Related.	'\/aa' ta Farm 000 [Dort IV June 11e See Form 000 F	Part V lina 12
Complete if the organization answered (a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-	
	(b) Book value	(c) Method of Valuation Cost of end-	-oi-year market value
(1)			<u> </u>
(2)			
(3)			<u> </u>
<u>(4)</u> (5)			
(6)			
(7)			-
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 13).	>		
Part IX Other Assets.	1\/!	Don't IV line 11 d See Form 000 l	Dort V. line 15
Complete if the organization answered	escription	Part IV, line 11d. See Form 990, i	(b) Book value
(1)	odon prion		(2) 2 2 2 3 3 2 3 2 3 2
(2)			
(3)			
(4)		<u> </u>	
(5)			
(6)			
<u>(7)</u> (8)			·
(9)	-		
(10)	 		<u> </u>
Total. (Column (b) must equal Form 990, Part X, column (B),	, line 15)		•
Part X Other Liabilities. Complete if the organization answered 'Yes' to l			•
(a) Description of liability	(b) Book value		* /, *
(1) Federal income taxes			, s , , , , , , ,
(2)			
(3)			
(4) (5)			
(6)			
(7)			
(8)			
(9)			
(10)			
(11)			
Total (Column (b) must equal Form 990, Part X, column (B) line 25)			* * * * *
2. Liability for uncertain tax positions In Part XIII, provide the text of the foo	otnote to the organization's fina	ancial statements that reports the organization's lia	ability for uncertain

Schedule D (Form 990) 2014 WORLD MUSIC INSTITUTE INC Page 4 Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a. Total revenue, gains, and other support per audited financial statements 865,084. Amounts included on line 1 but not on Form 990, Part VIII, line 12: 2a 2 b 26,433. 20 26,433. 838,651. Amounts included on Form 990, Part VIII, line 12, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b. 4 b 4 c 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)..... 838,651 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements. 782,446. Amounts included on line 1 but not on Form 990, Part IX, line 25: 2 b 2 c 2 d 20 26,433. 3 756,013. Amounts included on Form 990, Part IX, line 25, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b. 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) 756,013 Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

Pt :	Х,	Line	2	FIN 48 FINANCIAL STATEMENT FOOTNOTE:
Pt 2	Х,	Lıne	2	WORLD MUSIC INSTITUTE, INC. (THE ORGANIZATION) IS
Pt :	Х,	Line	2	EXEMPT FROM FEDERAL TAXES UNDER SECTION 501(C)(3) OF
Pt :	Х,	Line	2	THE U.S.INTERNAL REVENUE CODE AND FROM STATE AND LOCAL
Pt :	Х,	Line	2	TAXES UNDER COMPARABLE LAWS. THE ORGANIZATION ADOPTED THE
Pt :	Х,	Line	2	PROVISIONS OF FASB ASC 740, INCOME TAXES, WHICH REQUIRES
Pt :	Х,	Line	2	THAT A TAX POSITION BE RECOGNIZED OR DERECOGNIZED BASED
Pt :	Х,	Line	2	ON A "MORE LIKELY THAN NOT" THRESHOLD. THIS APPLIES TO
Pt :	Х,	Line	2	POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN.
Pt :	Х,	Line	2	THE ORGANIZATION DOES NOT BELIEVE ITS FINANCIAL STATEMENTS
Pt :	Х,	Line	2	INCLUDE ANY UNCERTAIN INCOME TAX POSITIONS. THE
Pt :	Х,	Line	2	ORGANIZATION'S TAX RETURN FOR THE FISCAL YEAR 2012 AND
Pt :	x,	Line	2	FORWARD ARE SUBJECT TO THE USUAL REVIEW BY THE APPROPRIATE
Pt :	х,	Line	2	TAXING AUTHORITIES.

Schedule **D** (Form 990) 2014

SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Part I

▶ Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization	Employer identification number		
WORLD MUSIC INSTITUTE INC	13-3323045		
Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) of	organizations only).		

ne of disqualified person	organization	(c) Description of transaction	(d) Corrected?		
			Yes	No	
				<u>L</u> _	
				<u> </u>	
				<u> </u>	
	the amount of tax incu	the amount of tax incurred by the organization managers or disqual	the amount of tax incurred by the organization managers or disqualified persons during the year	the amount of tax incurred by the organization managers or disqualified persons during the year	

Enter the amount of tax, if any, on line 2, above, reimbursed by the organization

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
		То	From			Yes	No	Yes	No	Yes	No
DIRECTOR	CASH FLOW	Χ		15,000	15,400		Х	Х		Χ	
						<u> </u>		,			<u> </u>
											<u> </u>
			!								
			<u></u>								
						<u> </u>					
						<u></u>					<u></u>
									<u> </u>		
			organiz To	organization? To From	organization? To From DIRECTOR CASH FLOW X 15,000	Organization? To From DIRECTOR CASH FLOW X 15,000 15,400	organization? To From Yes DIRECTOR CASH FLOW X 15,000 15,400 Image: Company of the company of the	Organization? To From From Yes No	Organization? To From From Test To Yes No Yes	To From Yes No Yes No No DIRECTOR CASH FLOW X S S S S S S S S S	Organization

Grants or Assistance Benefiting Interested Persons. Part III

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
10)				

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

Schedule L (Form 990 or 990-EZ) 2014

Part IV	Rusings Transactions Invol	ving Interested Persons				age Z
raitiv	Business Transactions Invol- Complete if the organization a	nswered "Yes" on Form 990	, Part IV, line 28a, 2	8b, or 28c.		
,	(a) Name of interested person	terested person (b) Relationship between interested person and the organization		(d) Description of transaction	(e) Sharing of organization's revenues?	
					Yes	No
(1)						
(2)						
(3)						ļ
(4)						
(1) (2) (3) (4) (5) (6)				F1		
(b) (7)						
(8)						ļ <u> </u>
(9)						
(10)						
Part V	Supplemental Information					
	Provide additional information	for responses to questions	on Schedule L (see	instructions)		
••						
					-	
*						
	·					

'SCHEDULE M · (Form 990)

Noncash Contributions

OMB No 1545-0047

2014

Open To Public

Department of the Treasury Internal Revenue Service Name of the organization

► Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

► Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Inspection Employer identification number

	NORLD MUSIC INSTITUTE INC 13-3323045					
Par	t I Types of Property					
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Metho noncash	(d) d of determining contribution amounts
1	Art — Works of art					
2	Art — Historical treasures					
3	Art — Fractional interests				ļ	
4	Books and publications		2-5-20% (* 6 11) 3-3 0%			
5	Clothing and household goods					
6	Cars and other vehicles	_				
7	Boats and planes					
8	Intellectual property		_			
9	Securities — Publicly traded				<u> </u>	
10	Securities — Closely held stock				_	
11	Securities — Partnership, LLC, or trust interests Securities — Miscellaneous					
12						
13	Qualified conservation contribution — Historic structures					
14	Qualified conservation contribution — Other					
15	Real estate – Residential					
16	Real estate – Commercial				ļ	
17	Real estate — Other					
18	Collectibles					
19	Food inventory					
20	Drugs and medical supplies					
21	Taxidermy					
22	Historical artifacts				<u> </u>	· · · · · · · · · · · · · · · · · · ·
23	Scientific specimens					
24	Archeological artifacts					
25	Other () .	_			ļ	
26	Other () .				<u> </u>	
27	Other () .					
28	Other► () .			<u> </u>	 	
29	Number of Forms 8283 received by the organization organization completed Form 8283, Part IV, Donee A	during the ta	x year for contributions t	for which the	29	
	organization completed 1 of 11 0200, 1 are 14, 501.007	toknowiougo			23	Yes No
30a	During the year, did the organization receive by contribution of the initial contribut	I contribution	n, and which is not requir	red to be used for exem	pt 🖡	** ** ** ** ** ** ** ** ** ** ** ** **
	purposes for the entire holding period?				• • • • • • • •	30 a X
	If 'Yes,' describe the arrangement in Part II Does the organization have a gift acceptance policy to	that requires	the review of any non-st	tandard contributions?	ŀ	31 X
31		•	•			31 A
	Does the organization hire or use third parties or rela noncash contributions?	•				32 a X
	If 'Yes,' describe in Part II				1	
33	If the organization did not report an amount in column describe in Part II	n (c) for a typ	e of property for which o	column (a) is checked,		

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

Schedule M (Form 990) (2014)

Page 2

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE O • (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 2014

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

WORLD MUSIC INSTI	TUTE INC 13-3323045
Pt VI, Line 11b	FORM 990 IS REVIEWED BY THE FINANCE COMMITTEE AND PROVIDED
Pt VI, Line 11b	TO THE BOARD FOR FINAL REVIEW AND APPROVAL BEFORE BEING
Pt VI, Line 11b	FILED.
Pt VI, Line 12c	ALL OFFICERS AND DIRECTORS ARE REQUIRED TO DISCLOSE ANNUAL
Pt VI, Line 12c	INTERESTS THAT COULD GIVE RISE TO CONFLICTS OF INTERESTS.
Pt VI, Line 12c	ALL DISCLOSURES OF INTERESTS ARE COMPILED AND REPORTED BY
Pt VI, Line 12c	MANAGEMENT TO THE FINANCE COMMITTEE. THE FINANCE COMMITTEE
Pt VI, Line 12c	SHALL DETERMINE IF THE RESPONSES TO QUESTIONNAIRES ARE
Pt VI, Line 12c	APPROPRIATE.
Pt VI, Line 15a	THE BOARD DETERMINES THE SALARY OF THE EXECUTIVE DIRECTOR
Pt VI, Line 15a	BASED UPON INDEPENDENT STUDIES AND COMPARISON WITH
Pt VI, Line 15a	INDUSTRY PEERS.
Pt VI, Line 15b	THE BOARD DETERMINES THE SALARY OF OTHER KEY EMPLOYEES
Pt VI, Line 15b	BASED UPON INDEPENDENT STUDIES AND COMPARISON WITH
Pt VI, Line 15b	INDUSTRY PEERS.
Pt VI, Line 19	FINANCIAL REPORTS AND OTHER GOVERNING DOCUMENTS ARE
Pt VI, Line 19	AVAILABLE UPON REQUEST.
Other	PART IX, LINE 11G EXPENSES CONSIST OF PRODUCTION CONSULTANT
Other	EXPENSE OF \$32,675, PUBLIC RELATIONS CONSULTANT EXPENSE OF
Other	\$26,830, DEVELOPMENT CONSULTANT EXPENSE OF \$13,625 AND
Other	OTHER CONSULTING EXPENSES OF \$90,403.