		90		n 501(c), 527, or 49		al Revenue Cod	Income Tax	2008
		of the Treasury nue Service	The organizat				reporting requirements	Open to Public Inspection
A F	or the	e 2008 calend	ar year, or tax year	beginning JU]	L 1, 2008	and ending	JUN 30, 2009	
B c ar	heck if pplicabl]Addre	use IRS MU		MANCE TRUS	ST FUND NO.	2	D Employer identifi	cation number
	_]chang]Name	type	O SALIBELL	O & BRODEI	<u></u>		13-6	405088
	_ chang Initial return			r P O box if mail is no	ot delivered to street add	ress) Room/suite	······································	
]Termi ation	n- Specific Instruc- 63	3 3RD AVEN				212-	315-5000
	Amen return Applic		City or town, state or		4		G Gross receipts \$	347,707
L	Jtion		N YORK, NY		C. HALL. I	R.	H(a) Is this a group re for affiliates?	eturn Yes XN
		1040	AVENUE OF	THE AMERI(CAS, $18TH F$			
		empt status		◀ (insert no.)	4947(a)(1) or	527		list (see instructions)
		te:►N/A		<u> </u>			H(c) Group exemptio	
		organization	Corporation X	Trust Assoc	ciation Other ►	L Year	r of formation 1949	A State of legal domicile N
lane in the second seco	rt 1	Summary Briefly describ		mission or most si	onificant activities: T	HE FUND	WAS ESTABLIS	HED TO
Governance	•	ARRANGE	LIVE MUSI	CAL PERFOI	RMANCES BY	MUSICIAN	S IN AREAS O	
erna	2	Check this bo	x 🕨 🛄 if the org	janization discontir	nued its operations or	disposed of mor	e than 25% of its asset	S.
ove	3	Number of vot	ting members of the	governing body (Pa	art VI, line 1a)		3	
				-	rning body (Part VI, lin	e 1b)	4	
Activities &	6	Total number	of employees (Part V	to if necessary)			5	
cti	o 7a	Total gross un	of volunteers (estima prelated business rev	enue from Part VIII	, line 12, column (6)	VED	7a	(
Ă	ь	Net unrelated	business taxable inc	come from Form 99	0-T, line 34	101	7ь	(
					8 MAY 19	2010	Prior Year	Current Year
e			and grants (Part VIII,	· ·				247 70
Revenue		•	ce revenue (Part VIII,		OGDEN		264,662.	347,70
Re			come (Part VIII, colun					
			e (Part VIII, column (A	-	c, Toc, and TTe) art VIII, column (A), line	. 12)	264,662.	347,707
			milar amounts paid (F			<u>, , , , , , , , , , , , , , , , , , , </u>	340,850.	108,233
			to or for members (Pa					
es						5-10)	4,700.	5,000
Expenses			undraising fees (Part					
Щ. Д			ing expenses (Part IX				100,129.	119,092
			es (Part IX, column (A es. Add lines 13-17 (m				445,679.	232,325
		•	expenses. Subtract	•			<181,017.	
28			<u></u>		····		Beginning of Year	End of Year
Net Assets or Fund Balances	20	Total assets (F	^o art X, line 16)				132,216.	247,598
E A			(Part X, line 26)				184,543.	184,543
르르 Da	22 rt 11	Net assets or Signature	fund balances. Subtr Block	ract line 21 from lin	<u>e 20</u>		<52,327.	> 63,055
Fa	4 1 14	Under penalties o	penury, I declare that I have	e examined this return, i	ncluding accompanying sche	dules and statements,	and to the best of my knowledge	ge and belief, it is true, correct,
		and complete De	claration of preparer (other i	than office to based on a	all information of which prepa	rer has any knowledge		
Sigr	ı	\searrow	THE!	man -			5	13/10
Here	е		e of efficer				Date	1
			C. HALL,	JR., TRUS	<u>ree</u>			
						ate Ct	1eck If Prepare	er's identifying number
		Proparer s signature	RIF	\rightarrow		1 se		structions)
	arer's	Firm's name (or yours if	SALIBELL	O & BRODER				
Prep			►633 THIR		13TH FLOOR			
Prep		self-employed), address and			117			10 015 5000
Paid Prep Use (self-employed), address, and ZIP + 4		, N.Y. 100	<u>J1/</u>		Phone no PZ	12-315-5000
Prep Use May	Only the li	address, and ZIP + 4 RS discuss this	NEW YORK	parer shown above	? (see instructions)			X Yes
Prep Use May	Only the li	address, and ZIP + 4 RS discuss this is-os LHA F	NEW YORK s return with the prep For Privacy Act and	parer shown above Paperwork Reduc			structions.	. X Yes (20) Form 990 (20)

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F	- 000 (0000)		MANCE TRUST FUND NO.2	12 64	05000	
_	n 990 (2008)	C/O SALIBELL		13-64	02088	Page
<u> </u>		· · · · · · · · · · · · · · · · · · ·	ccomplishments (see instructions)		·	
1	MUSICIANS IN DOMINION OF	ESTABLISHED AREAS OF THE CANADA, WITHC	TO ARRANGE LIVE MUSICAL PE UNITED STATES, ITS TERRIT OUT ANY ADMISSION FEE, FOR C KNOWLEDGE AND APPRECIATI	TORIES AND THE PURPOS	THE E OF	
2		dertake any significant pro	gram services during the year which were not listed			X No
	If "Yes", describe these	new services on Schedule	e O.			
3		ase conducting, or make si changes on Schedule O	Ignificant changes in how it conducts, any program s	services?	Yes	X No
4	Describe the exempt pu	rpose achievements for ea	ach of the organization's three largest program servi section 4947(a)(1) trusts are required to report the a	• •		
			enue, if any, for each program service reported.	mount of grants and		
4 a	(Code: CONTRIBUTING		3,543. including grants of \$ 108,23 C KNOWLEDGE & APPRECIATION	33.)(Revenue\$ NOF MUSIC	347,	707.
		······				
	(Code) (Expenses \$				
40			Including grants of \$) (Revenue \$		
				······		
			· · · · · · · · · · · · · · · · · · ·			
4c	(Code:) (Expenses \$	Including grants of \$) (Revenue \$		
		- · · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·		
				<u></u>		
4d	Other program services. (Expenses \$	(Describe in Schedule O.) including grad	nts of \$) (Revenue \$))		
<u>4e</u>	Total program service of	expenses 🕨 \$	183,543. (Must equal Part IX, Line 25, cold	umn (B))		0.0000
					Form 99	U (2008)

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MUSIC PERFORMANCE TRUST FUND NO.2

- Forn	1990 (2008) C/O SALIBELLO & BRODER 13-640	5088	З F	age 3
Pa	rt IV Checklist of Required Schedules			
			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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
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		X
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 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		X
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		X
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?			
	If "Yes," complete Schedule D, Parts VI, VII, VII, IX, or X as applicable	11	X	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was			
	prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		X
13	Is the organization a school as described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the US ? If "Yes," complete Schedule F, Part I	14b	<u> </u>	<u>X</u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entit	у		
	located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	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		<u>X</u>
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17	L	X
18	Did the organization report more than \$15,000 total 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 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			1
	last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K			ł
	If "No", go to question 25	24a		<u>X</u>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		ļ
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	1		-
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u>X</u>
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a			
	pnor year? If "Yes," complete Schedule L, Part I	25b		<u>X</u>
26	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		<u>X</u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial			
	contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		X

Form **990** (2008)

MUSIC PERFORMANCE TRUST FUND NO.2 C/O SALIBELLO & BRODER

- Form 990 (2008)

13-6405088 Page 4

Pa	rt IV Checklist of Required Schedules (continued)			
			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an			
	indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other			
	person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization?			
	If "Yes," complete Schedule L, Part IV	28b		X
с	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional			
	corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		X
2 9	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
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		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			1
	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			ĺ
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35		X
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		X
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? If "Yes," complete Schedule R, Part VI	37		Х

Form **990** (2008)

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MUSIC PERFORMANCE TRUST FUND NO.2

13-6405088	Page 5
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- Form	990 (2008) C/O SALIBELLO & BRODER 13-640	5088	P	age 5
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
			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	1		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	0		
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	ļ
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	0		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2ь	ļ	ļ
	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?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	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)?	4a		X
b	If "Yes," enter the name of the foreign country:			
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and			
	Financial Accounts.			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<u>5a</u>		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<u>5</u> b		<u> </u>
c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited			
•	Tax Shelter Transaction?	<u>5c</u>		x
	Did the organization solicit any contributions that were not tax deductible?	<u>6a</u>		^
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	C L		
7	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c). Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7.		x
a b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7a 7b		<u> </u>
b	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	/0		
С	to file Form 8282?	7c		х
Ь	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	-		
v	benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
q	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
ĥ	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		X
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3)			
	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have			
	excess business holdings at any time during the year?	8		X
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		X
ь	Did the organization make a distribution to a donor, donor advisor, or related person?	9ь		Х
10	Section 501(c)(7) organizations. Enter: N/A			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	_		
11	Section 501(c)(12) organizations. Enter: N/A			
а	Gross income from members or shareholders 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them)	-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b			

Form **990** (2008)

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Form 990 (2008)

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MUSIC PERFORMANCE TRUST FUND NO.2 C/O SALIBELLO & BRODER

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code)

Section A.	Governing	Body and	Management

Jec	tion A. Governing Body and Management			<u> </u>
			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,			
	processes, or changes in Schedule O See instructions			
		0		
р		4		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			v
_	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 X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a		X X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following			1
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b		X X
9a	Does the organization have local chapters, branches, or affiliates?	9a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with those of the organization?	9Ъ		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must			
	describe in Schedule O the process, if any, the organization uses to review the Form 990	10	X	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		X
Sec	tion B. Policies			
			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b		
с	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		_X
14	Does the organization have a written document retention and destruction policy?	14		X
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:			
а	The organization's CEO, Executive Director, or top management official?	15a	Х	
ь	Other officers or key employees of the organization?	15b		X
	Describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		Х
ь	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16ь		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ►NY			
	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	e for		
18				
10	public inspection Indicate how you make these available. Check all that apply.			

Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial 19 statements available to the public.

20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization.	
	JOHN C. HALL, JR 212-391-3950	

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1040	AVENUE	OF	THE	AMERICAS,	18TH	FLOOR.	NEW	YORK.	NY	10018		

MUSI	C PERFORMA	ANCE	TRUST	FUND	NO.2
C/0	SALIBELLO	& BI	RODER		

- Form 990 (2008)

13-6405088 Part VII 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. 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, and current key employees Enter -0 in columns (D), (E), and (F) if no compensation was paid.

• 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 officer, director, trustee, or key employee.

(A)	(B)	(C)						(D)	(E)	(F)
Name and Title	Average							Reportable	Reportable	Estimated
	hours per week	Individual trustee or director	Institutional trustee		Key employee	Highest compensated		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
JOHN C. HALL, JR.								F 000		
TRUSTEE	35.00	X						5,000.	0.	0.
		 	1							
			-							
									·	

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Form 990 (2008)

Page 7

MUSIC	PERFORMANCE	TRUST	FUND	NO.2	
C/O SP	ALIBELLO & B	RODER			

13	8-64	1050	88	Page 8

Form 990 (<u></u>	13-64	10508	8	Page 8
Part VII	Section A. Officers, Directors, Tr	ustees, Key E	mplo	oyee	es, a	nd I	High	est	Compensated Employ	ees (continued)			
	(A) Name and title	(B) Average			Pos				(D) Reportable	(E) Reportable		(F Estim	ated
		hours per week	Individual trustee or director	hect		that seford under the set	Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MIS	6 C(C) c	from organiz and re	er sation the ation
1b Tota				ļ					5,000.		0.		0
2 Total	I number of individuals (including those pensation from the organization	e in 1a) who re	ceiv	ed n	nore	tha	n \$1	00,0	· · · · · · · · · · · · · · · · · · ·		•		 (
	he organization list any former officer,	director or tru	stee	. ke	v em	rotar	vee.	or h	lighest compensated er	nplovee on		Ye	s No
	a? If "Yes," complete Schedule J for s any individual listed on line 1a, is the su			omp	ensa	ation	anc	i oth	ner compensation from	the organization	3	_	<u> </u>
and	related organizations greater than \$15 any person listed on line 1a receive or a	0,000?	" со	mple	ete S	Sche	edule	ə J f	or such ındivıdual		4		<u> </u>
the o	organization? <i>If "Yes," complete Scheo</i> B. Independent Contractors										5		X
	plete this table for your five highest co organization. NONE	mpensated ind	depe	ende	ent c	ontr	acto	ors ti	hat received more than	\$100,000 of com	pensation	n from	
	(A) Name and business	address							(B) Description of s	ervices		(C) pensat	ion
								-					
0 7.1												••••••	
	number of independent contractors (in the organization	ncluding those	= (N 1	i) Wł	io re	cell	ved i	nore	e man φτου,σου in com	pensation			

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Form **990** (2008)

MUSIC	C PERFORMA	4NC	Έ	TRUST	FUND	NO.2
C/0 :	SALIBELLO	&	BF	ODER		

13-6405088 Page **9**

Form	990	(2008) C/O S	SALIBELLC	& BRODE	R		<u>13-6405</u>	088 Page 9
Par	t VI	II Statement of Reve	nue					
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	b c d f g	Fundraising events Related organizations Government grants (contribu All other contributions, gifts, gran similar amounts not included abo	nts, and by the second se					
	 2 a b			Business Code 713990	347,707.	347,707.		
Program Service Revenue	c d e			1 1				
<u>د</u>	f g	All other program service reve Total. Add lines 2a-2f	enue	►	347,707.			
	3 4 5	Investment income (including other similar amounts) Income from investment of ta Royalties	x-exempt bond p	proceeds				
	6a b c	Rental income or (loss)	(i) Real	(II) Personal				
	d 7 a b	Gross amount from sales of assets other than inventory	(I) Securities	(ii) Other				
/enue	d	Gain or (loss) Net gain or (loss) Gross income from fundraisin including \$	of	▶ 				
Other Revenue	с	contributions reported on line Part IV, line 18 Less: direct expenses Net income or (loss) from fund	a b draising events	>				
	b	Gross income from gaming ac Part IV, line 19 Less: direct expenses Net income or (loss) from gan	a b	>				
	ь	Gross sales of inventory, less and allowances Less: cost of goods sold Net income or (loss) from sale	a b	>				
-	 11 a b	Miscellaneous Revenu	ie	Business Code				
	с d е 12	All other revenue Total. Add lines 11a-11d Total Revenue. Add lines 1h, 2g, 3,	4, 5, 6d, 7d, 8c. 9c. 10	Dc, and 11e	347,707.	347,707.	0.	0.

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Form **990** (2008)

MUSIC PERFORMANCE TRUST FUND NO.2 C/O SALIBELLO & BRODER

13-6405088 Page 10

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 complete columns (B), (C), and (D). (D) Fundraising (A) (B) (C) Do not include amounts reported on lines 6b, Total expenses Program service Management and 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses 1 Grants and other assistance to governments and 105,233. 105,233. organizations in the U.S. See Part IV, line 21 2 Grants and other assistance to individuals in 3,000. 3,000 the U.S. See Part IV, line 22 3 Grants and other assistance to governments, organizations, and individuals outside the US See Part IV, lines 15 and 16 4 Benefits paid to or for members 5 Compensation of current officers, directors, 5,000. 5,000. trustees, and key employees 6 Compensation not included above, to disgualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7 Other salaries and wages 8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) 9 Other employee benefits Payroll taxes 10 11 Fees for services (non-employees)a Management 26,419. 26,419. b Legal 12,307. 12,307 Accounting С d Lobbying Professional fundraising services See Part IV, line 17 е f Investment management fees Other g Advertising and promotion 12 1,382. 1,382 13 Office expenses Information technology 14 15 Royalties 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 222. 222 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 3,452. 3,452 23 Insurance 24 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) 75,310. 75,310. LITIGATION SETTLEMENT а b С d е f All other expenses 232,325. 183,543 48,782 0. Total functional expenses. Add lines 1 through 24f 25 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

- Form 990 (2008)

MUSIC PERFORMANCE TRUST FUND NO.	MUSIC	PERFORMANCE	TRUST	FUND	NO.
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C/O SALIBELLO & BRODER

13-6405088 Page 11

Form 990 (C/
Part X	Balance	Sheet

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1 Cash - non-interest-bearing 132,216,1 247,598 2 Sowings and temporary cash investments 3 - 3 Predges and grants recordube, net 3 - 4 Accounts receivable, net 4 - 5 Receivable, net 4 - 6 Receivable from other data dynamic officers, directors, trustees, key employees, or other related parture. Complete Part II of Schedule L 5 - 6 Receivable from other data dynamic officers, directors, trustees, key employees, or other related parture. Complete Part II of Schedule L 5 - 7 Notes and kans receivable, net 7 - - 10 Lack, dudings, and equipment cost basis 9 - - 11 Investments - three accumulated SeP ant IV, line 11 11 12 - 11 Investments - three accumulates SeP ant IV, line 11 132, 216, 14 247, 598 11 Investments - three accumulates SeP ant IV, line 11 132, 216, 14 247, 598 12 Investments - three accumulates SeP ant IV, line 11 132, 216, 14 247, 598 13 Investments - three accumulates SeP ant IV, line 11 13						(A) Beginning of year		End (B) of year	
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	ь			dit or au	dits?	-			+	+
						· · · · · · · · · · · · · · · · · · ·			n 990	(2008)

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SCHE	DULE A	Put	olic Charity St	tatus	and P	ublic	Supp	ort		OMB No 1545-0047
(Form 99	90 or 990-EZ)		mpleted by all section							2000
				mpt chari	-					2000
Department of Internal Reve	of the Treasury nue Service	► At	ttach to Form 990 or Fo	orm 990-E	Z. 🕨 See	separate	instructio	ons.		Open to Public
Name of	the organizat	ion MUSTC F	ERFORMANCE T	RUST	FUND	NO.2		E	mployer	identification number
	Ū		IBELLO & BRC							3-6405088
Part I	Reason	for Public Char	rity Status (All organiz	zations mu	ist comple	te this par	t.) (see ins	tructions)		
The organ	nization is not a	a private foundation	because it is (Please ch	neck only c	one organi	zation)				
1 🛄	A church, co	nvention of churche	s, or association of chur	ches desc	ribed in se	ection 170)(<mark>Ь)(1)(А)(</mark> і).		
2	A school des	cribed in section 17	70(b)(1)(A)(ii). (Attach Sc	hedule E)	1					
3 🛄			ital service organization						-	
4 🛄		-	operated in conjunction	with a hos	spital desc	ribed in se	ection 170	(b)(1)(A)(i	ii). Enter	the hospital's name,
- 🗂	city, and stat		benefit of a college or u							
5 🛄	-	(b)(1)(A)(iv). (Compl		niversity o	when or of	perated by	a governi	mentalun	n deschi	eu m
6			ient or governmental uni	t describe	d in secto	on 170(b)(⁻	1)(A)(v).			
7		· · ·	eives a substantial part					or from the	general	public described in
	section 170	(b)(1)(A)(vi). (Comple	ete Part II)			-			-	
8	A community	trust described in s	section 170(b)(1)(A)(vi).	(Complete	Part II)					
9 X	An organizat	on that normally rec	erves (1) more than 33	1/3% of its	s support f	rom contr	ibutions, n	nembersh	ip fees, a	nd gross receipts from
		•	nctions - subject to certa	•	• •				•••	•
			axable income (less sect	tion 511 ta	x) from bu	Isinesses a	acquired b	y the orga	anization	after June 30, 1975.
10		509(a)(2). (Complete	e the Part III.) perated exclusively to te	et for oubl	ic cafety	See cactio	n 500/a)//	1) (cee inc	tructions	-1
11			perated exclusively to te perated exclusively for the							
	-	-	ations described in section		•				•	
	• •		organization and compl		•		,			
	а 🛄 Туре	і b 🗌		с 🛄 Тур	e III - Fund	tionally in	tegrated		d 🗌] Type III - Other
e 🗌	By checking	this box, I certify tha	at the organization is not	controllec	d directly o	r indirectly	/ by one o	r more dis	qualified	persons other than
	foundation m	nanagers and other t	han one or more publicly	y supporte	ed organiza	ations des	cribed in s	ection 50	9(a)(1) or	section 509(a)(2).
f	•		tten determination from t	the IRS that	at it is a Ty	pe I, Type	II, or Type	ə III		د
		rganization, check ti								L
g	-		organization accepted ar			-				Yes No
	••••••	•	lirectly controls, either al upported organization?	ione of tog		persons c	leschbeu	in (ii) and (iii) Delow	11g(i)
	-		n described in (i) above?	ı.					-	11g(ii)
	., ,	•	person described in (i) o		e?					11g(iii)
h	Provide the f	ollowing information	about the organizations	the organ	ization su	pports.				
<u> </u>		r		r				1		
(i) Name	of supported	(II) EIN	(iii) Type of organization	p /	0	(v) Did yo		(vi) Is organizati	s the	(vii) Amount of
orga	anization		(described on lines 1-9		sted in your document?		r support?	(i) organiz U S	ed in the l	support
			above or IRC section (see instructions))	Yes	No	Yes	No	Yes	./ No	
										· · · · · · · · · · · · · · · · · · ·
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Total										

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

Schedule A (Form 990 or 990-EZ) 2008

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Part II Support Schedule for C (Complete only if you checked						,
ection A. Public Support						
alendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and						
membership fees received (Do not						
Include any "unusual grants.")						
2 Tax revenues levied for the organ-						
ization'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 - 3						
5 The portion of total contributions						
by each person (other than a						1
governmental unit or publicly						
supported organization) included						
on line 1 that exceeds 2% of the						
amount shown on line 11,						
column (f)						
6 Public Support. Subtract line 5 from line 4		+				
Section B. Total Support		<u></u>	1	£		
alendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4						
8 Gross income from interest,						
dividends, payments received on						
securities loans, rents, royalties						
and income from similar sources						
9 Net income from unrelated business						
activities, whether or not the						
business is regularly carried on						
0 Other income. Do not include gain						
or loss from the sale of capital						
assets (Explain in Part IV.)						
1 Total support. Add lines 7 through 10						
2 Gross receipts from related activities, e	to (see instruct		1	Ł	12	<u> </u>
3 First five years. If the Form 990 is for t		•	rd fourth or fifth t	ax vear as a secti		
organization, check this box and stop I	-	,,				
ection C. Computation of Public	: Support Pe	ercentage				
4 Public support percentage for 2008 (lin	e 6, column (f) d	divided by line 11,	column (f))		14	
5 Public support percentage from 2007 S	Schedule A, Par	t IV-A, line 26f			15	
6a 33 1/3% support test - 2008. If the org	ganization did n	ot check the box o	n line 13, and line	14 is 33 1/3% or	more, check this bo	x and
stop here. The organization qualifies as	s a publicly supp	ported organization	ו			
b 33 1/3% support test - 2007. If the org	ganization did n	ot check a box on	line 13 or 16a, and	line 15 is 33 1/3	% or more, check th	nis box
and stop here. The organization qualifi	es as a publicly	supported organiz	ation			
7a 10% -facts-and-circumstances test	- 2008. If the org	ganization did not (check a box on line	e 13, 16a, or 16b,	and line 14 is 10%	or more,
and if the organization meets the "facts	s-and-circumstar	nces" test, check t	his box and stop h	ere. Explain in P	art IV how the organ	nization
meets the "facts-and-circumstances" te	est. The organization	ation qualifies as a	publicly supported	d organization		
b 10% -facts-and-circumstances test	- 2007. If the org	ganization did not	check a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or
more, and if the organization meets the	facts-and-circi	umstances" test, c	heck this box and	stop here. Expla	in in Part IV how the)
organization meets the "facts-and-circu	mstances" test.	. The organization	qualifies as a publi	cly supported org	ganization	
					and see instruction	•

Schedule A (Form 990 or 990-EZ) 2008

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MUSIC PERFORMANCE TRUST FUND NO.2

- <u>Sch</u>	edule A (Form 990 or 990 EZ) 2008 C	/O_SALIBE	LLO & BRO	DER		13-640	5088 Page 3
Pa	rt III Support Schedule for (Organizations	Described in	Section 509(a)(2) (Complete only	If you checked the bo	x on line 9 of Part I)
Se	ction A. Public Support						
- Cal	endar year (or fiscal year beginning in)►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	Include any "unusual grants.")	278,092.	139,673.	562,866.	264,662.	347,707.	1593000.
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that	ſ					
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	Ization'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		100 (70	540 044			150000
	Total. Add lines 1 · 5	278,092.	139,673.	562,866.	264,662.	347,707.	1593000.
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
E	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)		_				1593000.
See	ction B. Total Support						
Cal	endar year (or fiscal year beginning in)►		(b) 2005	_(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6	278,092.	139,673.	562,866.	264,662.	347,707.	1593000.
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
t	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business activities not included in line 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	Total support (Add lines 9, 10c, 11, and 12)						1593000.
	First five years. If the Form 990 is for	r the organization's	first, second. thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3) organiz	
	check this box and stop here	•					
See	ction C. Computation of Publ	ic Support Pe	rcentage				
	Public support percentage for 2008 (I			olumn (f))		15	100.00 %
	Public support percentage from 2007					16	100.00 %
	ction D. Computation of Invest						
17				e 13, column (f))		17	.00 %
18	Investment income percentage from	2007 Schedule A,	Part IV-A, line 27h			18	%
19a	33 1/3% support tests - 2008. If the	-		on line 14, and line	15 is more than 3	3 1/3%, and line 1	
	more than 33 1/3%, check this box a	-					►X
Ŀ	33 1/3% support tests - 2007. If the		-				nd
	line 18 is not more than 33 1/3%, che	-					
20	Private foundation. If the organizatio						

Schedule A (Form 990 or 990-EZ) 2008

Schedu (Form 990)	ule D	Supplementa	al Financial Statements	5	OMB No 1545-0047
Department of the Internal Revenue			. To be completed by organizations that m 990, Part IV, line 6, 7, 8, 9, 10, 11, or 1		Open to Public Inspection
Name of the		C/O SALIBELLO & BR	ODER		bloyer identification number
Part I	Organiza	tions Maintaining Donor Advise	ed Funds or Other Similar Funds	s or Accou	Ints. Complete if the
	organizatio	n answered "Yes" to Form 990, Part IV, lin			
			(a) Donor advised funds	(b) Fun	ds and other accounts
1 Total n	umber at er	nd of year			
2 Aggreg	jate contrib	utions to (during year)			
3 Aggreg	ate grants f	rom (during year)			
4 Aggreg	ate value a	end of year			·····
5 Did the	e organizatio	n inform all donors and donor advisors in	writing that the assets held in donor advis	sed funds	
are the	organizatio	n's property, subject to the organization's	exclusive legal control?		Yes No
6 Did the	e organizatio	n inform all grantees, donors, and donor a	advisors in writing that grant funds may be	e used only	
	ritable purp	oses and not for the benefit of the donor of	or donor advisor or other impermissible pri	ivate benefit?	Yes No
Part II	Conserv	ation Easements. Complete if the or	ganization answered "Yes" to Form 990, F	Part IV, line 7	
1 Purpos	se(s) of cons	ervation easements held by the organizat	ion (check all that apply).		
🗌 F	Preservation	of land for public use (e.g , recreation or p	pleasure) Preservation of an his	storically impo	ortant land area
F	Protection o	f natural habitat	Preservation of certifi	ed historic sti	ructure
🗌 F	Preservation	of open space			
2 Comple	ete lines 2a-	2d if the organization held a qualified cons	servation contribution in the form of a con-	servation eas	ement on the last day
of the t	ax year	-			
					Held at the End of the Yea
a Total n	umber of co	enservation easements		2a	
b Total a	creage rest	icted by conservation easements		2ь	
	•	vation easements on a certified historic sti	ructure included in (a)	2c	
		vation easements included in (c) acquired		2d	
			leased, extinguished, or terminated by the	e organization	during the taxable
year 🕨					
4 Numbe	er of states v	where property subject to conservation ea	sement is located >		
5 Does th	he organizat	ion have a written policy regarding the pe	nodic monitoring, inspection, violations, ai	nd	
enforce	ement of the	conservation easements it holds?			🔛 Yes 🔛 No
6 Staff or	r volunteer I	nours devoted to monitoring, inspecting, a	nd enforcing easements during the year	•	
7 Amoun	t of expens	es incurred in monitoring, inspecting, and	enforcing easements during the year > \$		
			ve satisfy the requirements of section 170		
	ction 170(h)				🛄 Yes 📃 No
	. ,		ion easements in its revenue and expense	e statement, a	
		÷ .	tion's financial statements that describes		
	vation ease	-			
			f Art, Historical Treasures, or O	ther Simila	ar Assets.
	-	the organization answered "Yes" to Form			
1a If the o	-	-	ot to report in its revenue statement and b		
1a If the o treasur	es, or other	similar assets held for public exhibition, e	ducation, or research in furtherance of pul		
1a If the o treasur	es, or other	-	ducation, or research in furtherance of pul		
1a If the o treasur the foo	res, or other thote to its	similar assets held for public exhibition, e financial statements that describes these	ducation, or research in furtherance of pul	blic service, p	rovide, in Part XIV, the text o
1a If the o treasur the foo b If the o	res, or other thote to its rganization	similar assets held for public exhibition, e financial statements that describes these elected, as permitted under SFAS 116, to	ducation, or research in furtherance of pul items	blic service, p ice sheet worl	rovide, in Part XIV, the text c ks of art, historical treasures,
1a If the o treasur the foo b If the o	res, or other thote to its irganization er similar ass	similar assets held for public exhibition, e financial statements that describes these elected, as permitted under SFAS 116, to	ducation, or research in furtherance of pul items report in its revenue statement and balan	blic service, p ice sheet worl	rovide, in Part XIV, the text c ks of art, historical treasures,
 1a If the o treasur the foo b If the o or othe these f 	res, or other tnote to its rganization er similar ass tems:	similar assets held for public exhibition, e financial statements that describes these elected, as permitted under SFAS 116, to	ducation, or research in furtherance of pul items report in its revenue statement and balan	blic service, p ice sheet worl	rovide, in Part XIV, the text o ks of art, historical treasures, following amounts relating to
1a If the o treasur the foo b If the o or othe these fi (i) Re	res, or other thote to its rganization er similar ass tems [.] venues incli	similar assets held for public exhibition, e financial statements that describes these elected, as permitted under SFAS 116, to sets held for public exhibition, education, o	ducation, or research in furtherance of pul items report in its revenue statement and balan	blic service, p ice sheet worl	rovide, in Part XIV, the text o
1a If the o treasur the foo b If the o or othe these it (i) Re (ii) Ass	res, or other thote to its irganization er similar ass tems venues include sets include	similar assets held for public exhibition, e financial statements that describes these elected, as permitted under SFAS 116, to tets held for public exhibition, education, o uded in Form 990, Part VIII, line 1 d in Form 990, Part X	ducation, or research in furtherance of pul items report in its revenue statement and balan	blic service, p ce sheet worl e, provide the E S	rovide, in Part XIV, the text of art, historical treasures, following amounts relating to
 1a If the o treasur the foo b If the o or othe these fit (i) Ref (ii) Ass 2 If the o 	res, or other thote to its rganization r similar ass tems: venues include sets include rganization	similar assets held for public exhibition, e financial statements that describes these elected, as permitted under SFAS 116, to tets held for public exhibition, education, o uded in Form 990, Part VIII, line 1 d in Form 990, Part X	ducation, or research in furtherance of pul items report in its revenue statement and balan or research in furtherance of public service sasures, or other similar assets for financia	blic service, p ce sheet worl e, provide the E S	rovide, in Part XIV, the text o ks of art, historical treasures, following amounts relating to
 1a If the o treasur the foo b If the o or othe these find (i) Ref (ii) Ass 2 If the o the following t	res, or other thote to its rganization r similar ass tems: venues include rganization owing amou	similar assets held for public exhibition, e financial statements that describes these elected, as permitted under SFAS 116, to sets held for public exhibition, education, o uded in Form 990, Part VIII, line 1 d in Form 990, Part X received or held works of art, historical tre	ducation, or research in furtherance of pul items report in its revenue statement and balan or research in furtherance of public service sasures, or other similar assets for financia	blic service, p ce sheet worl e, provide the E S	rovide, in Part XIV, the text o ks of art, historical treasures, following amounts relating to
 1a If the o treasur the foo b If the o or othe these fl (i) Reg (ii) Ass 2 If the o the follow a Revenue 	res, or other thote to its rganization r similar assitems: venues include rganization owing amou Jes included	similar assets held for public exhibition, e financial statements that describes these elected, as permitted under SFAS 116, to sets held for public exhibition, education, o uded in Form 990, Part VIII, line 1 d in Form 990, Part X received or held works of art, historical tre ints required to be reported under SFAS 1	ducation, or research in furtherance of pul items report in its revenue statement and balan or research in furtherance of public service sasures, or other similar assets for financia	blic service, p ce sheet worl e, provide the E S	rovide, in Part XIV, the text o ks of art, historical treasures, following amounts relating to

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

Schedule D (Form 990) 2008

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 Sche 	_	ERFORMANCE IBELLO & B		ND NO.2	13-	6405088 Page 2	
5	t III Organizations Maintaining C	ollections of A	rt, Historical 1	Freasures, or C			
3	Using the organization's accession and othe	_					
•	that apply)						
а	Public exhibition	(d 🛄 Loan or e	xchange programs			
b	Scholarly research		e 🛄 Other				
с	Preservation for future generations						
4	Provide a description of the organization's co	pliections and expla	in how they further	r the organization's	exempt purpose in	Part XIV	
5	During the year, did the organization solicit o		-	-			
•	to be sold to raise funds rather than to be ma					Yes No	
Par	t IV Trust, Escrow and Custodial reported an amount on Form 990, Par		. Complete if orga	anization answered	"Yes" to Form 990,	Part IV, line 9, or	
1a	Is the organization an agent, trustee, custod	an or other interme	diary for contribution	ons or other assets	not included		
	on Form 990, Part X?					Yes No	
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing table:				
						Amount	
с	Beginning balance				1c		
	Additions during the year				1d		
е	Distributions during the year				1e		
f	Ending balance				1f		
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21?		·	Yes No	
	If "Yes," explain the arrangement in Part XIV.						
Par			ered "Yes" to Form	n 990, Part IV, line 1	0.		
		(a) Current year	(b) Prior year	(c) Two years bad	ck (d) Three years b	ack (e) Four years back	
1a	Beginning of year balance		1				
	Contributions	· · · · · · · · · · · · · · · · · · ·					
	Investment earnings or losses						
	Grants or scholarships						
	Other expenditures for facilities						
•	and programs						
f	Administrative expenses						
	End of year balance						
2	Provide the estimated percentage of the yea	r end balance held :	ae.			······	
- a	Board designated or guasi-endowment		%				
	Permanent endowment	%					
		% %					
	Are there endowment funds not in the posse		ation that are held	and administered	for the organization		
	by					Yes No	
	(i) unrelated organizations					3a(i)	
	(ii) related organizations					3a(ii)	
ь		listed as required r	on Schedule B?				
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 3b 4 Describe in Part XIV the intended uses of the organization's endowment funds							
	<u>A Describe in Part XIV the intended uses of the organization's endowment funds</u> Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10.						
t.i	Description of investment	(a) Cost or c			c) Depreciation	(d) Book value	
	Decemption of infoodment	basis (investr		s (other)		(4) 20011 14100	
19	Land	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·			•	
	Buildings						
	Leasehold improvements						
	Equipment						
	Other						
	Add lines 1a-1e. (Column (d) should equal Fo	m 990 Part X col	umn (R) line 10(c)	1		0.	
. v.a	ride intes ta te locionin lor should equal FC	$a_1 a_2 a_3 a_1 a_1 a_1 a_1 a_1 a_1 a_1 a_1 a_1 a_1$			<u>F</u> _		

Schedule D (Form 990) 2008

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MUSI	C PERFORMA	NC	E TRUS	ST	FUND	NO.2
C/0	SALIBELLO	&	BRODEF	2		

_1	.3–	64	105	08	8 Pag	je 3

Schedule D (Form 990) 2008 C/O SALIBE	LLO & BRODER		13-6405088	Page 3
Part VII Investments - Other Securities.	See Form 990, Part X, line		······································	
 (a) Description of security or category (including name of security) 	(b) Book value) Method of valuation: or end-of-year market value	
Financial derivatives and other financial products				
Closely-held equity interests				
Other				
Total (Col (b) should equal Form 990, Part X, col (B) line 12)	>			
Part VIII Investments - Program Related.		13		
(a) Description of investment type	(b) Book value) Method of valuation	
		Cost c	or end-of-year market value	
			· · · · · · · · · · · · · · · · · · ·	<u> </u>
			· · · · · ·	
Total. (Col (b) should equal Form 990, Part X, col (B) line 13) ▶				
Part IX Other Assets. See Form 990, Part X, Iir			(b) Book va	1.10
(8	a) Description			
				·
		· · · · · · · · · · · · · · · · · · ·		
	· · · · · · · · · · · · · · · · · · ·			
	· · · · ·			
		····		
Total. (Column (b) should equal Form 990, Part X, col (B)			►	
Part X Other Liabilities. See Form 990, Part > (a) Description of liability	(, line 25.	(b) Amount		
Federal income taxes				
LOAN PAYABLE-BANK	· · · · · · · · · · · · · · · · · · ·	184,543.		
	· · · · · · · · · · · · · · · · · · ·			
·····				
		104 542		
Total. (Column (b) should equal Form 990, Part X, col (B)	line 25) 📃 🕨	184,543.		

y 1 y . , under FIN 48. 832053 12-23-08

	MUSIC PERFORMANCE TRUST FU	ND NO.2		
Sche	dule D (Form 990) 2008 C/O SALIBELLO & BRODER			13-6405088 Page
Pa	t XI Reconciliation of Change in Net Assets from Form 990 to	Financial Stat	ements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	
- 2	Total expenses (Form 990, Part IX, column (A), line 25)		2	
3	Excess or (deficit) for the year Subtract line 2 from line 1		3	
4	Net unrealized gains (losses) on investments		4	
5	Donated services and use of facilities		5	
6	Investment expenses		6	<u> </u>
7	Prior period adjustments		7	
8	Other (Describe in Part XIV)		8	
9	Total adjustments (net) Add lines 4-8		9	·····
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9		10	
Pa	t XII Reconciliation of Revenue per Audited Financial Stateme	nts With Rever	nue per l	Return
1	Total revenue, gains, and other support per audited financial statements			1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.			
а	Net unrealized gains on investments	_2a		_
b	Donated services and use of facilities	2b		
с	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIV)	2d		
е	Add lines 2a through 2d			2e
3	Subtract line 2e from line 1			3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV)	4b		
с	Add lines 4a and 4b			4c
	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)			5
Pa	t XIII Reconciliation of Expenses per Audited Financial Stateme	ents With Expe	nses pe	r Return
1	Total expenses and losses per audited financial statements			1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1 1		
а	Donated services and use of facilities	2a		-
b	Prior year adjustments	2b		4
С	Losses reported on Form 990, Part IX, line 25	2c		_
d	Other (Describe in Part XIV)	_2d		_ 1
е	Add lines 2a through 2d			2e
3	Subtract line 2e from line 1			3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	1 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		_ 1
b	Other (Describe in Part XIV)	4b		4
с	Add lines 4a and 4b			4c
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)			5
Pa	t XIV Supplemental Information			
Com	blete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part II	l, lines 1a and 4; Pa	rt IV, lines	1b and 2b; Part V, line 4; Part
X, Pa	rt XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.			

SCHEDULEI							OMB No 1545-0047
(Form 990)		Grants and Governi	Grants and Other Assistance to Organizations, Governments, and Individuals in the U.S.	e to Organizations luals in the U.S.	-		2008
Department of the Treasury	Comp	Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22.	on answered "Yes,	" on Form 990, Pa	rrt IV, lines 21 or 22.		Open to Public
			► Attach to Form 990	n <u>990.</u>			Inspection
Name of the organization MUSIC PERFORMANCE TRUST C/O SALIBELLO & BRODER	FORMANCE ELLO & BR	FUND	NO.2				Employer identification number 13-6405088
	nd Assistance						
1 Does the organization maintain records to substantiate the amount of the	to substantiate the		s or assistance, the	grantees' eligibility	r for the grants or ass	grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	
criteria used to award the grants or assistance?	stance?	:	:				X Yes No
2 Describe in Part IV the organization's procedures for monitoring the use of grant tunds in the United States.	ocedures for moni	toring the use of grant	tunds in the United	d States.		L	
reart is grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this hox if no one recipient received more than \$5,000. Check this hox if no one recipient received more than \$5,000. Check this hox if no one recipient received more than \$5,000. It and Schedule 1-1 (Form 990) if additional source is needed	Governments and 55 000 Check this	d Organizations in the s box if no one recipier	e United States. C	omplete if the orga an \$5 000 11se Pa	rnization answered "Y rt IV and Schedule I-1	s in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any actinient received more than \$5,000. Use Part IV and Schedule I-1 (Form 900) if additional snare is needer	IV, line 21, for any
1 (a) Name and address of organization or government	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal,	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
							MUSICAL PERFORMANCE,
LYRIC OPERA OF CHICAGO							WITHOUT ANY ADMISSION,
20 N WACKER DR.							FOR THE PURPOSE OF
CHICAGO, IL 60606	36-6008929	501(C)(3)	50,000.	0.	,		CONTRIBUTING TO THE
							MUSICAL PERFORMANCE,
METROPOLITAN OPERA							
U N							FOR THE PURPOSE OF
NEW YORK, NY 10023	13-1624087	501(C)(3)	25,000.	.0			CONTRIBUTING TO THE
							MUSICAL PERFORMANCE,
SYMPHONIC JAZZ ORCHESTRA							WITHOUT ANY ADMISSION,
1421							FOR THE PURPOSE OF
CULVER CITY, CA 90232	95-4847284	501(C)(3)	8,633.	0.			CONTRIBUTING TO THE
							MUSICAL PERFORMANCE,
SAN FRANCISCO OPERA CO.							WITHOUT ANY ADMISSION
ЧВ.							FOR THE PURPOSE OF
SAN FRANCISCO, CA 94102	94-1189846	501(C)(3)	10,000.	0.			CONTRIBUTING TO THE
	nd government or	ganizations					4.
٦	S						
LHA FOR Privacy Act and Paperwork Heduction Act Notice, see the instructions for Form 990. SEE PART IV FOR COLUMN (H) DESCRIPTI	CTION ACT NOTICE, IV FOR CC	see the instructions LUMN (H) DE	DESCRIPTIONS	S			Schedule I (Form 990) 2008
832101 12-18-08			19				

832101 12-18-08

MUSIC PERFORMA C/O SALIBELLO	NCE TRUST & BRODER	FUND NO.2			13-6405088
Part III Grants and Other Assistance to Individuals in the United States Use Schedule I-1 (Form 990) if additional space is needed.	nited States. Com ded.	plete if the organize	ation answered "Yes"	. Complete if the organization answered "Yes" on Form 990, Part IV, line 22	
(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
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information	I I I I I I I I I I I I I I I I I I I	n required in Part I,	Ine 2, and any other	additional information	
SCHEDULE I, PART I, LINE 2: IN EACH	CASE,	ON SITE RE	REVIEW AND I	INSPECTION IS	
CONDUCTED BY THE FUND'S TRUSTEE OR	BY R	EPRESENTATIVES	OF THE	AFM LOCAL WHO	
ARE RESPONSIBLE FOR THE PRESENTATION	IN	THAT AREA AN	AREA AND WHO REPRESENT	ESENT THE	
FUND FOR THAT PURPOSE.					
PART II, LINE 1, COLUMN (H):					
NAME OF ORGANIZATION OR GOVERNMENT:	LYRIC	OPERA OF C	CHICAGO		
(H) PURPOSE OF GRANT OR ASSISTANCE:	MUS	ICAL PERFORMANCE,	NCE, WITHOUT ANY	UT ANY	
ADMISSION, FOR THE PURPOSE OF CONT	CONTRIBUTING	0T	THE PUBLIC KNOWLEDGE	EDGE AND	
832102 12-18-08		20			Schedule I (Form 990) 2008

Schedule I (Form 990) 2008 C/O
 Part IV Supplemental Information

• APPRECIATION OF MUSIC.

NAME OF ORGANIZATION OR GOVERNMENT: METROPOLITAN OPERA

(H) PURPOSE OF GRANT OR ASSISTANCE: MUSICAL PERFORMANCE, WITHOUT ANY

ADMISSION, FOR THE PURPOSE OF CONTRIBUTING TO THE PUBLIC KNOWLEDGE AND

APPRECIATION OF MUSIC.

NAME OF ORGANIZATION OR GOVERNMENT: SYMPHONIC JAZZ ORCHESTRA

(H) PURPOSE OF GRANT OR ASSISTANCE: MUSICAL PERFORMANCE, WITHOUT ANY

ADMISSION, FOR THE PURPOSE OF CONTRIBUTING TO THE PUBLIC KNOWLEDGE AND

APPRECIATION OF MUSIC.

NAME OF ORGANIZATION OR GOVERNMENT: SAN FRANCISCO OPERA CO.

(H) PURPOSE OF GRANT OR ASSISTANCE: MUSICAL PERFORMANCE, WITHOUT ANY

ADMISSION, FOR THE PURPOSE OF CONTRIBUTING TO THE PUBLIC KNOWLEDGE AND

APPRECIATION OF MUSIC.

 SCHEDULE O (Form 990)

Department of the Treasury
 Internal Revenue Service

Supplemental Information to Form 990

Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information. Open to Public Inspection

OMB No 1545-0047

Name of the organization MUSIC PERFORMANCE TRUST FUND NO.2 C/O SALIBELLO & BRODER

Employer identification number 13-6405088

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

UNITED STATES, ITS TERRITORIES AND THE DOMINION OF CANADA, WITHOUT ANY

ADMISSION FEE, FOR THE PURPOSE OF CONTRIBUTING TO THE PUBLIC KNOWLEDGE

AND APPRECIATION OF MUSIC.

FORM 990, PART VI, SECTION A, LINE 8B: NOT APPLICABLE

FORM 990, PART VI, SECTION A, LINE 10: THE FORM 990 IS PROVIDED TO AND

REVIEWED BY THE TRUSTEE AND COUNSEL BEFORE IT IS FILED.

FORM 990, PART VI, SECTION B, LINE 15: 15A: THE PROCESS INVOLVED

COMPARISON OF COMPENSATION IN SIMILAR PLANS FOR THE TRUSTEE.

15B: NOT APPLICABLE

FORM 990, PART VI, SECTION C, LINE 19: THE DOCUMENTS OF THE ORGANIZATION ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART XI, LINE 1

MODIFIED CASH BASIS

E.I.N. 13-6405088 2008 Form 990 July 1, 2008 through June 30, 2009

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Check Date	Check No.	Payee	Amount	Location of Performance	Date of Perf.
5/5/2008	1425	Harry Chanson Scholarship Fund	5,000 00	N/A - scholarship	N/A
7/14/2008		Music Performance Trust Fund (a)	25,000 00	(a)	(a)
9/23/2008	1436	Santa Barbara Opera	5,000 00	Lobero Theatre, Santa Barbara, CA	11/14/08 11/15/08
12/15/2008	1444	Erik Valdmanıs (Scholarship)	3,000 00	N/A - scholarship	N/A
3/10/2009	1451	Actors Fund (Actors Home Concerts)	1,000 00	Actors Fund Nursing Home, New Jersey	various dates
3/18/2009	1455	Bucks County Opera Association	600 00	Central Bucks South High School, Warrington, Pennsylvania	5/16/09
4/7/2009	1457	Metropolitan Opera (2009 NY Concert)	25,000 00	Central Park Summer Stage - Manhattan Crotona Park - The Bronx Queensbridge Park - Queens Tappan Park - Staten Island Coffey Park - Brooklyn	7/13/09 7/17/09 8/7/09 8/7/09 8/14/09
4/7/2009	1458	Lyric Opera of Chicago (2009 Millennium Park Concert)	25,000 00	Millennium Park, Chicago, Illinois	9/11/09
4/9/2009	1459	Symphonic Jazz Orchestra	8,633 00	San Gabriel Mission Playhouse, San Gabriel, California	5/27/09
4/13/2009	1460	San Francisco Opera Co (Opera in the Park)	10,000 00	Golden Gate Park - San Francisco, CA	9/13/09
			108,233 00		

(a) Remitted to Lyric Opera of Chicago for Millennium Park concerts - September 2008

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		~ ~			
		Application for Extension of Time To File an Exempt Organization Return File a separate application for each return.	OMB No. 1545-1709		
If youIf you	are filing for an Auto are filing for an Add	prise a separate application for each return. pomatic 3-Month Extension, complete only Part I and check this box itional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this ess you have already been granted an automatic 3-month extension on a previously fil	form).		
Part I	Automatic	3-Month Extension of Time. Only submit original (no copies needed).	<u></u>		
A corpor Part I onl		Form 990-T and requesting an automatic 6-month extension - check this box and com			
	corporations (includ ome tax returns.	ing 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an	extension of time		
noted be (not auto you must	low (6 months for a matic) 3-month extension submit the fully con	nerally, you can electronically file Form 8868 if you want a 3-month automatic extensio corporation required to file Form 990-1). However, you cannot file Form 8868 electronic nsion or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or cor mpleted and signed page 2 (Part II) of Form 8868. For more details on the electronic fill n e-file for Charitles & Nonprofits.	cally if (1) you want the additional nsolidated Form 990-T. Instead,		
Type or	Name of Exempt	-	Employer identification number		
print		RFORMANCE TRUST FUND NO.2 BELLO & BRODER	13-6405088		
File by the		and room or suite no. If a P.O. box, see instructions.			
thing your 633 3RD AVENUE, 13TH FLOOR					
instructions.	City, town or pos NEW YORK	t office, state, and ZIP code. For a foreign address, see instructions.			
For	m 990 m 990-BL m 990-EZ m 990-PF	Form 990-T (corporation)Form 472Form 990-T (sec. 401(a) or 408(a) trust)Form 522Form 990-T (trust other than above)Form 604Form 1041-AForm 883	27 69		
Teleph If the c If this i	one No. 212- organization does no s for a Group Return	JOHN C. HALL JR. of \blacktriangleright <u>1501 BROADWAY</u> - <u>NEW YORK</u> , <u>NY 10036-5503</u> <u>-575-7900</u> FAX No. \blacktriangleright thave an office or place of business in the United States, check this box n, enter the organization's four digit Group Exemption Number (GEN) If this of the group, check this box \blacktriangleright and attach a list with the names and EINs of all n	■ is for the whole group, check this		
is fo	· .	or			
2 lf th	is tax year is for les	s than 12 months, check reason: Initial return Final return	Change in accounting period		
non	refundable credits.		3a \$		
	••	Form 990-PF or 990-T, enter any refundable credits and estimated			
		Lude any prior year overpayment allowed as a credit. Line 3b from line 3a. Include your payment with this form, or, if required,	35 \$		
dep	osit with FTD coupo	on or, if required, by using EFTPS (Electronic Federal Tax Payment System).	<u></u>		
<u>See</u>	instructions.	l	3c \$ N/A		
Caution.	If you are going to m	nake an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8	879-EO for payment instructions.		

LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev. 4-2009)

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Form 8868 (Rev. 4-2009)			Page 2
If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II	and check this bo	x	
Note. Only complete Part II if you have already been granted an automatic 3-month extension on			
• If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).			··
Part II Additional (Not Automatic) 3-Month Extension of Time. Only file	the original (no co	opies needed).	
Name of Exempt Organization		Employer iden	itification number
Print GALEREFORMANCE TRUST FUND NO.2			
C/O_SALIBELLO & BRODER		13-640	
extended Number, street, and room or suite no. If a P.O. box, see instructions.		For IRS use on	ły
due date for 633 3RD AVENUE, 13TH FLOOR		l	
return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. Instructions NEW YORK, NY 10017			
Check type of return to be filed (File a separate application for each return):	_		
X Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust)	Form 1041-A	Form 5227	Form 8870
Form 990-BL Form 990-PF Form 990-T (trust other than above)	Form 4720	Form 6069	
STOPI Do not complete Part II if you were not already granted an automatic 3-month extens	lon on a previou	sly filed Form 8	868.
JOHN C. HALL JR.			
• The books are in the care of 1501 BROADWAY - NEW YORK, NY 1	0036-5503		
Telephone No. ▶ <u>212-575-7900</u> FAX No. ▶	0000 0000		
 If the organization does not have an office or place of business in the United States, check this 	s box		
 If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) 			
box . If it is for part of the group, check this box . and attach a list with the name			
4 I request an additional 3-month extension of time until MAY 17, 2010			
5 For calendar year, or other tax year beginning JUL 1, 2008	, and ending	JUN 30,	2009
	Final return	Change in	accounting period
7 State in detail why you need the extension			
INFORMATION NECESSARY TO FILE A COMPLETE AND	ACCURATE	RETURN I	<u>S NOT YET</u>
AVAILABLE.			
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, i	less any		
nonrefundable credits. See instructions.		8a \$	
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and			
tax payments made. include any prior year overpayment allowed as a credit and any amoun	nt paid		
previously with Form 8868.		<u>8b</u> \$	
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if requi			NT / N
with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).	See instructions.	8c \$	N/A
Signature and Verification			
Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and sta it is true, correct, and complete, and that Lam authorized to prepare this form.	atements, and to the	Dest of my knowle	age and belief,
win manufally and		Data N	122/10
Signature	<u></u>	Date	- 2000 Pay 4 2000)
			n oooor(nev. 4-2009)
/			
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