Form **990**

Department of the Treasury

Return of Organization Exempt From Income Tax

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. Go to www.irs.gov/Form990 for instructions and the latest information. 2022

OMB No. 1545-0047

Quen to Public

Inspection Internal Revenue Service For the 2022 calendar year, or tax year beginning 2022, and ending 20 Check if applicable: C Name of organization MUSIC IN THE MOUNTAINS D Employer identification number Address change Doing business as 94-2507337 E Telephone number Name change Number and street (or P.O. box if mail is not delivered to street address) Room/suite Initial return PO BOX 1451 (530)265-6173 Final return/terminated City or town, state or province, country, and ZIP or foreign postal code G Gross receipts Amended return NEVADA CITY, CA 95959 881,359 Application pending F Name and address of principal officer: **H(a)** Is this a group return for subordinates? X No H(b) Are all subordinates included? X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527 If "No," attach a list. See instructions HTTPS://WWW.MUSICINTHEMOUNTAINS.ORG/ Website: H(c) Group exemption number X Corporation Trust Association Other L Year of formation: 1978 M State of legal domicile: **Summary** Part I Briefly describe the organization's mission or most significant activities: MUSIC IN THE MOUNTAINS' MISSION IS TO PRESERVE AND PERPETUATE THE TRADITION OF LIVE CLASSICAL MUSIC IN OUR RURAL COMMUNITY. OUR VISION IS OF Activities & Governance A DIVERSE COMMUNITY ENRICHED THROUGH CREATING AND EXPERIENCING LIVE CLASSICAL MUSIC IN INSPIRING SURROUNDINGS. Check this box | if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 3 16 4 16 5 Total number of individuals employed in calendar year 2022 (Part V, line 2a) 20 Total number of volunteers (estimate if necessary) 6 Total unrelated business revenue from Part VIII, column (C), line 12 (12,163)**b** Net unrelated business taxable income from Form 990-T, Part I, line 11 7b 0 **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) 444,503 668,029 Revenue 100,543 154,632 Investment income (Part VIII, column (A), lines 3, 4, and 7d) (9,987)21,586 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) **7,**050 36,733 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 571,792 851,297 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0 Benefits paid to or for members (Part IX, column (A), line 4) 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 367,645 472,793 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 234,660 350,699 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 602,305 823,492 (30,513) 27,805 **Beginning of Current Year** End of Year 20 Total assets (Part X, line 16) 695,437 665,575 21 Total liabilities (Part X, line 26) 15,231 13,174 Net assets or fund balances. Subtract line 21 from line 20 652,401 680,206 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge JENNY DARLINGTON-PERSON Sign Signature of officer Date Here JENNY DARLINGTON-PERSON, EXECUTIVE DIRECTOR Type or print name and title Print/Type preparer's name Preparer's signature Date X PTIN Check **Paid** 02-14-2024 Deborah Patterson Deborah Patterson self-employed XXXXXXXX Preparer Firm's name Patterson's Tax Practice Firm's EIN **Use Only** Firm's address 312 Colfax Avenue Phone no. Grass Valley CA 95945 530-615-4917 X No May the IRS discuss this return with the preparer shown above? See instructions Yes

4d Other program services (Describe on Schedule O.)

) (Revenue \$

(Expenses \$

4e Total program service expenses

including grants of \$

94-2507337

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	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, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
^	complete Schedule D, Part III	8		х
9	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 services? If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	9		Х
10	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	x	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10		
••	VII, VIII, IX, or X as applicable.			
а				
	complete Schedule D, Part VI	11a	x	
b				
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С				
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
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 in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	х	
f	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	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		Х
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	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate	441		
45	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	15		37
16	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
10	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	10		
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I See instructions	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	x	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
-	If "Yes," complete Schedule G, Part III	19		x
20 a		20a		x
b		20b		
21	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		x

Form	n 990 (2022) MUSIC IN THE MOUNTAINS 94-2	507337	F	Page
Pa	rt IV Checklist of Required Schedules (continued)			
			Yes	No
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		x
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			† <u></u> -
	\$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	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?			
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			-
·	to defease any tax-exempt bonds?	24c		
٨	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	-		<u> </u>
d 250		<u>24u</u>		+
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	25-		
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
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 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member or any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L,			
	Part IV, instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		x
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		х
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			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		x
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		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			† <u></u> -
•	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)?			x
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	000		
D	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	330		-
30		30		
27	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			
00	and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and			
	19? Note: All Form 990 filers are required to complete Schedule O	38	Х	
Par	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			П
	UNACK IT SCREAUIE LI CONTAINS A LESDONSE OF NOTE TO ANY LINE IN THIS PART V			1 1

					162	NO
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	43			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	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	

Par	Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
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 2	20		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2k	x	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	38		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3k)	
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)?	48		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).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	50		
6a	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?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	CI.		
7	gifts were not tax deductible?	. 6k)	
7	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
а	and services provided to the payor?	. 7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	-/-	^ ^	
·	required to file Form 8282?	. 70		x
d	If "Yes," indicate the number of Forms 8282 filed during the year			A
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	76		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			x
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			x
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			х
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9k	,	
0	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
_	against amounts due or received from them.)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12	1	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?	13		
а	Note: See the instructions for additional information the organization must report on Schedule O.	13	2	
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			
С	Enter the amount of reserves on hand			
I4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule Q		_	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		х
	If "Yes," see the instructions and file Form 4720, Schedule N.			
6	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		x
	If "Yes," complete Form 4720, Schedule O.			
7	Section 501(c)(21) organizations. Did the trust, or any any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			

Page 6

Part VI

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
Se	ction 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			
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain on Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 16			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2	Х	
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, trustees, or key employees to a management company or other person?	3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		х
6	Did the organization have members or stockholders?	6		х
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?	7a		х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	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	Х	
9	Is there any officer, director, 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 on Schedule Q	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			I
			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	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	40-		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	40-		
40	describe on Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13 14	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? The organization's CEO, Executive Director, or top management official	150	v	
a b	Other officers or key employees of the organization	15a 15b	Х	х
D	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	130		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
ıva	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	100		Λ
	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		
Sec	tion C. Disclosure	100		<u> </u>
17	List the states with which a copy of this Form 990 is required to be filed California			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)			
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,			
. •	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 records.			

CYNTHIA NULPH (530)265-6173, 131 S AUBURN STREET, GRASS VALLEY, CA 95945

Form 990 (2022)

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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.

See instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

				((C)					
(A)	(B)		Position (do not check more than one				(D)	(E)	(F)	
Name and title	Average					han one s both ar	1	Reportable	Reportable	Estimated amount
	hours					/trustee)		compensation	compensation	of other
	per week							from the organization (W-2/	from related organizations (W-2/	compensation from the
	(list any hours for	or director	Insti	Office	Key	High emp	Former	1099-MISC/	1099-MISC/	organization and
	related	rect.	Institutional trustee	ĕ	Key employee	Highest compensated employee	ner	1099-NEC)	1099-NEC)	related organizations
	organizations	or tru	nal t		loye	comp				
	below	stee	ruste		е	bens				
	dotted line)		ď			ated				
(1) RANDALL J NEWSOME	2.00									
DIRECTOR		Х						0	0	0
(2) GEORGE REBANE	2.00									
DIRECTOR		Х						0	0	0
(3) NANCY KENDRICK	2.00									
DIRECTOR		Х						0	0	0
(4) JOAN MOSLEY	2. 00									
DIRECTOR		Х						0	0	0
(5) MARILYN WHELAN	2.00									
DIRECTOR		Х						0	0	0
(6) JOHN JEFFERIES	2.00									
DIRECTOR		Х						0	0	0
(7) HARRIET DAVIS	2. 00									
DIRECTOR		Х						0	0	0
(8) MARK STRATE	2.00									
DIRECTOR		Х						0	0	0
(9) BARBARA HAMPTON	2.00									
DIRECTOR		X						0	0	0
(10)TERRY BROWN	2.00									
DIRECTOR		X						0	0	0
(11)RYAN MURRAY	30.00									
ARTISTIC DIRECTOR		X			Х			0	0	0
(12)JENNY DARLINGTON-PERSON	40.00									
EXECUTIVE DIRECTOR		Х				х		0	0	0
(13)JULIA AMARAL	2. 00									
DIRECTOR		х						0	0	0
(14)ANDY_BERNADETT	2. 00									
TREASURER		Х		х				0	0	0
FFA										Form 000 (2022)

Form 990 (2022) MUSIC IN THE MOUN									94-2507		Page	
Part VII Section A. Officers, Directors, T	rustees,	Key E	Emp	loy	ee.	s, and	d Hi	ighest Comp	ensated Empl	oyees	(continue	d)
(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	unless er and	Pos ck m	son is ector/	han one to both an (trustee) Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	cor fi orga	(F) ated amount of other npensation rom the nization and d organizations	S
(15)JUDITH CIPHERS PRESIDENT	2.00)		x				0	0		0	_
(16)CARA_JONES SECRETARY (17)TIMOTHY GECKLE	2.00			x				0	0		0	
VICE-PRESIDENT				х				0	0		0	_
(18)												
<u>(19)</u>												_
(20)												_
(21)												
(22)												
(23)												
(24)												
(25)												_
1b Subtotal	ion A .											_
d Total (add lines 1b and 1c)								0	0		0	_
2 Total number of individuals (including but not limit reportable compensation from the organization	ed to those I	isted a	bove)	wh	o re	ceived	l more	e than \$100,000	of			0
3 Did the organization list any former officer, direct		-				-				2	Yes No	_
 employee on line 1a? If "Yes," complete Schedu. For any individual listed on line 1a, is the sum of reorganization and related organizations greater th 	eportable co	mpensa	ation a	and	othe	er comp	pensa	ation from the		3	X	
individual	compensation	on from	any ι	unre	elate	ed orga	nizat	tion or individual		4	X	
for services rendered to the organization? If "Yes Section B. Independent Contractors	s," complete	Sched	lule J	for	SUC	h perso	on .		· · · · · · · · · · · · · · · · · · ·	5	X	_
Complete this table for your five highest compensa	ted independ	dent co	ntract	ors	that	receiv	ed m	nore than \$100,00	00 of			_
compensation from the organization. Report comp												
(A)								(B)		(C)		
Name and business addres	SS							Description of service	es	Compens	ation	_
												_
												_
												_
Total number of independent contractors (includin received more than \$100,000 of compensation fro	-		those	list	ted a	above)	who					

94-2507337

Form 990 (2022) MUSIC IN T

· ui ·	V	Check if Schedule O contains a respons	se or n	ote to any line in this	Part VIII			
		Charles Consumer Cons			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
	1a	Federated campaigns	1a	829				
	b		1b					
ants ınts	С	Fundraising events	1c					
ָהָ הַ פֿרָ	d	Related organizations	1d					
iifts ar A	е	Government grants (contributions)	1e	160,106				
is, G	f	All other contributions, gifts, grants,						
ri Si		and similar amounts not included above	1f	507,094				
ribu Othe	g	Noncash contributions included in						
Contributions, Gifts, Grants and Other Similar Amounts		lines 1a-1f	1g					
	h	Total. Add lines 1a-1f			668,029			
				Business Code				
ø,		CHORUS FUND		711190	7,169	7,169		
و چ		EDUCATION		711190	16,100	16,100		
Program Service Revenue		CONCERT TICKETS		711190	131,363	131,363		
Rev		SALES & RENTAL		711190				
rog	e f	All other program service revenue						
ъ.		Total. Add lines 2a-2f			154,632			
					154,632			
	3	Investment income (including dividends, into other similar amounts)			21,326	21,326		
	4	Income from investment of tax-exempt bone		-	21,520	21,323		
	5	Royalties		F				
		(i) Rea		(ii) Personal				
	6a							
	b	Less: rental expenses 6b						
	С	Rental income or (loss) 6c						
	d	Net rental income or (loss)						
	7a	Gross amount from (i) Securit	ies	(ii) Other				
		sales of assets						
		other than inventory 7a		260				
	b	Less: cost or other basis						
e		and sales expenses 7b						
venue	С	Gain or (loss)		260				
Re		Net gain or (loss)			260	260		
Other Re	8a	Gross income from fundraising						
δ		events (not including \$	-					
		of contributions reported on line						
	١.	1c). See Part IV, line 18	8a	,				
		Less: direct expenses	_ 8b		(10.140)		(10.110)	
		Net income or (loss) from fundraising even	ts .		(12,163)		(12,163)	
	9a	Gross income from gaming	00					
	h	activities, See Part IV, line 19 Less: direct expenses	9a 9b					
		Net income or (loss) from gaming activities						
		, , , ,	<u> </u>					
	10a	Gross sales of inventory, less returns and allowances	10a					
	b	Less: cost of goods sold	10k					
	1	Net income or (loss) from sales of inventor						
		()	, . .	Business Code				
<u>δ</u>	11a	OP UNREAL CHG IN VALUE		711190	(36,690)	(36,690)		
nor		ENDOWMENT UNREALIZED		711190	(42,809)			
ella		ERC CREDIT		711190	99,712	99,712		
Miscellanous Revenue		All other revenue		711190	(1,000)			
≥	е	Total. Add lines 11a-11d	<u></u> .		19,213			
	12	Total revenue. See instructions			851 297	195 431	(12 163)	n

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).

	Check if Schedule O contains a response or note to	any line in this Part IX			_
Do r	not include amounts reported on lines 6b, 7b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
8b, 9	9b, and 10b of Part VIII.	Total oxpolloce	expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
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				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	130,686		130,686	
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 salaries and wages	296,166	296,535	(369)	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	4,171		4,171	
10	Payroll taxes	41,770	30,957	10,813	
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
С	Accounting	19,804		19,804	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17 .				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)	12,278		12,278	
12	Advertising and promotion	42,227			42,227
13	Office expenses	29,018	14,510	7,254	7,254
14	Information technology	13,394	6,698	3,348	3,348
15	Royalties				
16	Occupancy	57,455	39,503	12,876	5,076
17	Travel				
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				
22	Depreciation, depletion, and amortization	16,900		16,900	
23	Insurance	5,171	2,587	1,292	1,292
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A), amount, list line 24e expenses on Schedule O.)				
а	CONCERTS	92,035	92,035		
b	EDUCATION	57,391	57,391		
С	STEWARDSHIP & DEVELOPMENT	5,026	5,026		
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	823,492	545,242	219,053	59,197
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)				

Part X Balance Sheet

		Check if Schedule O contains a response or note	e to an	y line in this Part X		<u>.</u>	
					(A)		(B)
					Beginning of year		End of year
	1	Cash - non-interest-bearing			115,002	1	228,145
	2	Savings and temporary cash investments			470,506	2	398,324
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net		[2,535	4	8,277
	5	Loans and other receivables from any current or former	officer,	director,			
		trustee, key employee, creator or founder, substantial co	ntributo	or, or 35%			
		controlled entity or family member of any of these perso	ns .			5	
	6	Loans and other receivables from other disqualified pers	ons (as	s defined			
		under section 4958(f)(1)), and persons described in sec		6			
	7	Notes and loans receivable, net		7			
Assets	8	Inventories for sale or use			1,183	8	1,635
As	9	Prepaid expenses and deferred charges		[9	
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	684,447			
	b	Less: accumulated depreciation	10b	626,836	74,511	10c	57,611
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line 11 .				12	
	13	Investments - program-related. See Part IV, line 11 .				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			1,838	15	1,445
	16	Total assets. Add lines 1 through 15 (must equal line 3	33)		665,575	16	695,437
	17	Accounts payable and accrued expenses			10,607	17	11,553
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities		20			
	21	Escrow or custodial account liability. Complete Part IV of	of Sche	dule D		21	
S	22	Loans and other payables to any current or former office	er, direc	ctor,			
Liabilities		trustee, key employee, creator or founder, substantial co	ntributo	or, or 35%			
iabi		controlled entity or family member of any of these perso	ns .			22	
_	23	Secured mortgages and notes payable to unrelated thir	d parti	es		23	
	24	Unsecured notes and loans payable to unrelated third p	arties			24	
	25	Other liabilities (including federal income tax, payables t	to relat	ed third			
		parties, and other liabilities not included on lines 17-24).	Comp	lete Part X			
		of Schedule D			2,567	25	3,678
	26	Total liabilities. Add lines 17 through 25			13,174	26	15,231
		Organizations that follow FASB ASC 958, check here	e X				
S		and complete lines 27, 28, 32, and 33.					
nce	27	Net assets without donor restrictions			302,455	27	330,260
ala	28	Net assets with donor restrictions			349,946	28	349,946
d B		Organizations that do not follow FASB ASC 958, che	ck her	·e 🗌			
Fun		and complete lines 29 through 33.					
orl	29	Capital stock or trust principal, or current funds				29	
ets	30	Paid-in or capital surplus, or land, building, or equipment	t fund			30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or	funds		31		
let,	32	Total net assets or fund balances			652,401	32	680,206
_	33	Total liabilities and net assets/fund balances			665,575	33	695,437

EEA Form **990** (2022)

required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits

2c

3a

3b

Х

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? .

If the organization changed either its oversight process or selection process during the tax year, explain on

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

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

Schedule O.

SCHEDULE A (Form 990)

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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information. **Open to Public** Inspection

Name of the organization **Employer identification number** MUSIC IN THE MOUNTAINS 94-2507337 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990).) 2 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross 10 receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. C Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV. Sections A. D. and E. d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported organization (ii) EIN (iii) Type of organization (iv) Is the organization (v) Amount of monetary (vi) Amount of (described on lines 1-10 listed in your governing support (see other support (see instructions) above (see instructions)) document? instructions) Yes No (A) (B) (C) (D) (E) Total

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	534,380	516,913	633,734	434,791	672,967	2,792,785
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	534,380	516,913	633,734	434,791	672,967	2,792,785
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)						102,564
6	Public support. Subtract line 5 from line 4.						2,690,221
	on B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	534,380	516,913	633,734	434,791	672,967	2,792,785
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties, and income from						
•	similar sources	4,870	5,296	3,952	(9,987)	20,553	24,684
9	Net income from unrelated business						
	activities, whether or not the business						
40	is regularly carried on						
10	Other income. Do not include gain or						
	loss from the sale of capital assets						
44	(Explain in Part VI.)				46,445	21,246	67,691
11	Total support. Add lines 7 through 10	(a. a. i.a. atm ati.a.				40	2,885,160
12	Gross receipts from related activities, etc.					12	-)(2)
13	First 5 years. If the Form 990 is for the or						
Socti	organization, check this box and stop heron C. Computation of Public Support						· · · · · · <u></u>
	Public support percentage for 2022 (line 6			1 column (f))		14	93.24 %
15	Public support percentage from 2021 Sch					15	98.18 %
16a	33 1/3% support test - 2022. If the organ						
IVa	box and stop here. The organization qua						
b	33 1/3% support test - 2021. If the organ	•		•			_
	this box and stop here. The organization						
17a	10%-facts-and-circumstances test - 20	-		_			
	10% or more, and if the organization mee	_					
	Part VI how the organization meets the fa					-	
	organization			•	•		_
b	10%-facts-and-circumstances test - 20						
~	15 is 10% or more, and if the organization	_					
	in Part VI how the organization meets the					-	•
	organization			-	=		· · —
18	Private foundation. If the organization di						
-	instructions						

Schedule A (Form 990) 2022 EEA

94-2507337

(Complete only if you checked the box on line 10 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.)

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities fumished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513		-				
4	Tax revenues levied for the organization's benefit and either paid to						
_	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
_	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .						
b	Amounts included on lines 2 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						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, .						
	payments received on securities loans, rents,						
	royalties, and income from similar sources .						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included on 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 VI.)						
13	Total support. (Add lines 9, 10c, 11,						
.0	and 12.)						
14	First 5 years. If the Form 990 is for the or	ranization's fi	ret second thi	rd fourth or fi	fth tay year as	a section 501/	2)(3)
17	organization, check this box and stop her	•			-	,	· · · ·
Sacti	on C. Computation of Public Suppor			<u> </u>		<u> </u>	· · · · · · <u> </u>
15	Public support percentage for 2022 (line 8			13 column (f))		15	%
16	Public support percentage from 2021 Sch		•			16	
	on D. Computation of Investment Inc					10	
	•			u line 40 eelu	(f))	47	0/
17	Investment income percentage for 2022 (I			-		17	<u>%</u>
18	Investment income percentage from 2021					18	%
19a	33 1/3% support tests - 2022. If the orga						
_	17 is not more than 33 1/3%, check this be	-	-	=	-		
b	33 1/3% support tests - 2021. If the organizati						
_	line 18 is not more than 33 1/3%, check this bo	-	_			-	
20	Private foundation. If the organization did	d not check a	box on line 14,	19a, or 19b, c	check this box a	and see instruc	tions 🗌

Part IV **Supporting Organizations**

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

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

	ion A. All Supporting Organizations		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing		103	110
•	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		
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			
0-	organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer	_		
_	lines 3b and 3c below.	3a		
b	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		
С	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.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If			
	"Yes," and if you checked 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
b	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 or supervised by or in connection with its supported organizations.	4b		
С	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		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"			
	answer lines 5b and 5c 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		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already	Ja		
D	designated in the organization's organizing document?	5b		
_				
C	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			
	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited			
	by one or more of its supported organizations, or (iii) 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			
	(as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity			
	with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line			
	7? If "Yes," complete Part I of Schedule L (Form 990).	8		
9a	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		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which			
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
С	Did a disqualified person (as defined on line 9a) 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.	9с		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section			
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			
	supporting organizations)? If "Yes," answer 10b below.	10a		

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

Part I	V Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	, , , , , , , , , , , , , , , , , , , ,	11a		
		11b		
С	A 35% controlled entity of a person described on 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
		11c		
Section	on B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	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 officers, 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		
Section	on 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		
Section	on D. All Type III Supporting Organizations			Г
			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, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
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 line 2, above, 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		
Section	n 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	inst	ructio	ons).
а	The organization satisfied the Activities Test. <i>Complete line 2 below.</i>			
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instruct	ions)		
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	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			
		2a		
b	Did the activities described on line 2a, above, 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			
	<u> </u>	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	··· •	3a		
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		

94-2507337

(see instructions).

Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	gan	izations	
1	$\ \ \ \ \ \ \ \ \ \ \ \ \ $	trus	st on Nov. 20, 1970 <i>(expl</i>	ain in Part VI). See
	instructions. All other Type III non-functionally integrated supporting organi	izati	ons must complete Section	ons A through E.
Socti	on A - Adjusted Net Income		(A) Prior Year	(B) Current Year
36011	on A - Adjusted Net Income		(A) Filor real	(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		
Conti	on D. Minimum Accet Amount		(A) Drier Veer	(B) Current Year
Secti	on B - Minimum Asset Amount		(A) Prior 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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	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 0.015 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 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Secti	on C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
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-functiona	lly ir	ntegrated Type III support	ing organization

EEA Schedule A (Form 990) 2022

Part	V Type III Non-Functionally Integrated 509(a)(3	3) Supporting Organ	izations (continu	ed)	
Sect	ion D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish e	xempt purposes		1	
2	Amounts paid to perform activity that directly furthers exer	mpt purposes of support	ed		
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpo	oses of supported organ	izations	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required)	- provide details in Part	VI)	5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which	the organization is resp	onsive		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
			(ii)		(iii)

Section	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2022			
	(reasonable cause required - explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2022			
a	From 2017			
b	From 2018			
C	From 2019			
d	From 2020			
	From 2021			
f	Total of lines 3a through 3e			
	Applied to underdistributions of prior years			
	Applied to 2022 distributable amount			
	Carryover from 2017 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2022 from			
	Section D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2022 distributable amount			
C	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2022, if			
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2022. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
	Excess distributions carryover to 2023. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
	Excess from 2018			
	Excess from 2019			
	Excess from 2020			
	Excess from 2021			
e	Excess from 2022			

EEA Schedule A (Form 990) 2022

Schedule A (Form 990) 2022 Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990 for instructions and the latest information. Name of the organization Employer identification number

MUSIC	IN THE MOUNTAINS	94-2507337
Par	t I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accou	nts.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
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 advised	
	funds are the organization's property, subject to the organization's exclusive legal control?	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used	
	only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose	
	conferring impermissible private benefit?	
Part		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
-		prically important land area
	Protection of natural habitat Preservation of a cert	
	Preservation of open space	med moterie du dotare
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a co	nservation
_	easement on the last day of the tax year.	Held at the End of the Tax Year
а	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after July 25, 2006, and not on a	10
ű	historic structure listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organ	
Ū	tax year	"Zation dailing 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	
3	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation	- -
	etali ana volanosi nedie devetos te mentering, mepeering, naraming et violatione, and emeeting economical	in sacomeria daming the year
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation ea	sements during the year
-	The state of the s	oomena damig me you
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)((B)(i)
	and section 170(h)(4)(B)(ii)?	п., п.,
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense state	
	balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that	
	organization's accounting for conservation easements.	
Part		er Similar Assets.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and ba	lance sheet works
	of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtheral	
	service, provide in Part XIII the text of the footnote to its financial statements that describes these items.	·
b	If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance	e sheet works of
	art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance	
	provide the following amounts relating to these items:	•
	(i) Revenue included on 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 financial gain.	
	following amounts required to be reported under FASB ASC 958 relating to these items:	•
а	Revenue included on Form 990, Part VIII, line 1	\$
h	Assets included in Form 990 Part X	•

Par	t III Organizations Maintaining C	collections of A	rt, Historical T	reasures, or	Other Similar A	Assets (continued)
3	Using the organization's acquisition, accession	n, and other records,	check any of the fo	llowing that mak	e significant use of its	;
	collection items (check all that apply):					
а	Public exhibition		d Loan or	exchange prog	ram	
b	Scholarly research		e Other			
С	Preservation for future generations					
4	Provide a description of the organization's coll	lections and explain	how they further the	organization's	exempt purpose in Pa	ırt
	XIII.					
5	During the year, did the organization solicit or	receive donations of	art, historical treasu	ures, or other sin	nilar	
	assets to be sold to raise funds rather than to		ert of the organization	on's collection?.		🗌 Yes 🗌 No
Par	t IV Escrow and Custodial Arran	•				
	Complete if the organization a	nswered "Yes" c	on Form 990, Pa	art IV, line 9,	or reported an a	mount on Form
	990, Part X, line 21.					
1a	Is the organization an agent, trustee, custodiar		-			
						U Yes U No
b	If "Yes," explain the arrangement in Part XIII a	and complete the follo	owing table:			
					A	mount
С	Beginning balance				1c	
d	Additions during the year				1d	
е	Distributions during the year				1e	
f	Ending balance				1f	
2a	Did the organization include an amount on For				•	
b	If "Yes," explain the arrangement in Part XIII.	Check here if the exp	olanation has been I	provided on Part	XIII	
Par		1 113 / 11	E 000 B			
	Complete if the organization a		on Form 990, Pa			
	_	(a) Current year	(b) Prior year	(c) Two years bac	1 1 1	
1a	Beginning of year balance	406,262	438,384	412,75	373,26	382,611
b	Contributions					
С	Net investment earnings, gains, and					
	losses	(58,172)	(32,122)	25,62	39,49	(9,345)
d	Grants or scholarships					
е	Other expenditures for facilities and					
	programs					
f	Administrative expenses					
g	End of year balance	348,090	406,262	438,38	34 412,75	373,266
2	Provide the estimated percentage of the curre	-	(line 1g, column (a)) held as:		
a	Board designated or quasi-endowment	%				
b	Permanent endowment%					
С	Term endowment%					
_	The percentages on lines 2a, 2b, and 2c shoul					
3a	Are there endowment funds not in the posses	sion of the organizat	ion that are held an	d administered for	or the	
	organization by:					Yes No
	(i) Unrelated organizations					3a(i) X
_	(ii) Related organizations					3a(ii) X
b	If "Yes" on line 3a(ii), are the related organiza	•			• • • • • • • • • •	3b
4	Describe in Part XIII the intended uses of the		wment funds.			
Par			. F 000 B	(IV / P 4.4	- O F 000	N D = (1 V 1 ! 40
	Complete if the organization a					
	Description of property	(a) Cost or other I	` '	other basis	(c) Accumulated	(d) Book value
		(investment) (C	other)	depreciation	
1a	Land					
b	Buildings	•				
C	Leasehold improvements					
d	Equipment			84,447	626,836	57,611
e	Other					
Total.	Add lines 1a through 1e. (Column (d) must eq	ual Form 990, Part	X, column (B), line	10c.)		57,611

Part VII	Investments - Other Securities. Complete if the organization answered	"Yes" on Form 990	Part IV line	11b See Form 990 Part X line 12
	(a) Description of security or category (including name of security)		Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial	derivatives			·
(2) Closely-he	eld equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)	on (b) much a wal Farm 000 Bart V and (B) line 40	1		
Part VIII	nn (b) must equal Form 990, Part X, col. (B) line 12., Investments - Program Related.)		
rait viii	Complete if the organization answered	"Yes" on Form 990	Part IV line	11c See Form 990 Part X line 13
	(a) Description of investment	(b)	Book value	(c) Method of valuation: Cost or end-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Colum	nn (b) must equal Form 990, Part X, col. (B) line 13.)		
Part IX	Other Assets.			
	Complete if the organization answered	"Yes" on Form 990	, Part IV, line	11d. See Form 990, Part X, line 15
	(a) Des	scription		(b) Book value
(1)DEPOSI	TS			1,4
(2)PRPAID	EXPENSES			
(3)				
(4)				
(5)				
(6)				
(8)				
(9)				
	nn (b) must equal Form 990, Part X, col. (B) line 15.	<u>) </u>		1,4
Part X	Other Liabilities.	"Voo" on Form 000	Dort IV line	11a or 11f Coo Form 000 Port V
	Complete if the organization answered line 25.	res on Form 990	, Part IV, line	The of Th. See Form 990, Part X,
1		(In) Deadership		
1. (1) Fodoral	(a) Description of liability income taxes	(b) Book value		
	ERTIFICATES	1,6	42	
(3TAX PA		2,0		
(4)	TABLE	2,0	30	
(5)				
(6)				
(7)				
(8)				
(9)				
	(h) must equal Form 990, Part X, col. (B) line 25.)	3.6	7.8	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII.

Part :		Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
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 (losses) on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
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 XIII.)		
С	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	
Part 1		er Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
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:		
a	Donated services and use of facilities	_	
b	Prior year adjustments	-	
C	Other losses	-	
d	Other (Describe in Part XIII.) 2d Add lines 2a through 2d	20	
e	Subtract line 2e from line 1	2e	
3 4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	3	
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
a b	Other (Describe in Part XIII.)	-	
C	Add lines 4a and 4b	4c	
	Add into the cities to the cit	40	
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	
5 Part	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	
Part :	XIII Supplemental Information.		
Part Provide	XIII Supplemental Information. 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; F		
Part Provide	XIII Supplemental Information.		
Part Provide	XIII Supplemental Information. 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; F		
Part Provide	XIII Supplemental Information. 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; F		
Part Provide	XIII Supplemental Information. 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; F		
Part Provide	XIII Supplemental Information. 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; F		
Part Provide	XIII Supplemental Information. 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; F		
Part Provide	XIII Supplemental Information. 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; F		
Part Provide	XIII Supplemental Information. 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; F		
Part Provide	XIII Supplemental Information. 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; F		
Part Provide	XIII Supplemental Information. 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; F		
Part Provide	XIII Supplemental Information. 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; F		
Part Provide	XIII Supplemental Information. 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; F		
Part Provide	XIII Supplemental Information. 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; F		
Part Provide	XIII Supplemental Information. 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; F		
Part Provide	XIII Supplemental Information. 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; F		
Part Provide	XIII Supplemental Information. 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; F		
Part Provide	XIII Supplemental Information. 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; F		
Part Provide	XIII Supplemental Information. 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; F		
Part Provide	XIII Supplemental Information. 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; F		
Part Provide	XIII Supplemental Information. 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; F		
Part Provide	XIII Supplemental Information. 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; F		
Part Provide	XIII Supplemental Information. 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; F		

EEA Schedule D (Form 990) 2022

SCHEDULE G (Form 990)

Department of the Treasury

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public

Internal Revenue Service Inspection Employer identification number Name of the organization MUSIC IN THE MOUNTAINS 94-2507337 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. 1 Mail solicitations Solicitation of non-government grants а Internet and email solicitations Solicitation of government grants b Phone solicitations Special fundraising events С d In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, 2a Yes No or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be b compensated at least \$5,000 by the organization. (v) Amount paid to (iii) Did fundraiser have (vi) Amount paid to (iv) Gross receipts (i) Name and address of individual (or retained by) custody or control of (or retained by) (ii) Activity from activity or entity (fundraiser) fundraiser listed in contributions? organization col. (i) Yes No 1 2 3 4 5 6 7 8 9 10 Total List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II

Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more

		gross receipts greater than	\$5 OOO			
		gross receipts greater triain	(a) Event #1 MIM ALLIANCE (event type)	(b) Event #2 (event type)	(c) Other events NONE (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1	Gross receipts	17,899			17,899
	2	Less: Contributions				
	3	Gross income (line 1 minus	15 000			15.000
		line 2)	17,899			17,899
	4	Cash prizes				
	5	Noncash prizes				
enses	6	Rent/facility costs				
Direct Expenses	7	Food and beverages	363			363
Dire	8	Entertainment				
	9	Other direct expenses	29,699			29,699
	10 11	Direct expense summary. Add lin Net income summary. Subtract lin				30,062
Pa	rt III	Gaming. Complete if the or	ganization answered "	Yes" on Form 990. Part	V. line 19. or reported m	(12,163) nore than
		\$15,000 on Form 990-EZ, I			,,,	
ē						
venu			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1	Gross revenue	(a) Bingo		(c) Other gaming	
Revenu	1	Gross revenue	(a) Bingo		(c) Other gaming	
	1	Gross revenue	(a) Bingo		(c) Other gaming	
			(a) Bingo		(c) Other gaming	
Direct Expenses Revenu	2	Cash prizes	(a) Bingo		(c) Other gaming	
ect Expenses	2	Cash prizes		bingo/progressive bingo		
ect Expenses	2 3 4	Cash prizes	(a) Bingo Yes % No		(c) Other gaming Yes % No	
ect Expenses	2 3 4 5	Cash prizes	☐ Yes%	bingo/progressive bingo Yes% No	☐ Yes% No	
ect Expenses	2 3 4 5	Cash prizes	Yes % No es 2 through 5 in column (a	bingo/progressive bingo Yes % No	☐ Yes% No	
ect Expenses	2 3 4 5 6 7 8	Cash prizes	Yes % No es 2 through 5 in column (abtract line 7 from line 1, co	bingo/progressive bingo Yes% No d)	☐ Yes% No	
Direct Expenses	2 3 4 5 6 7 8	Cash prizes	Yes % No es 2 through 5 in column (aubtract line 7 from line 1, co	bingo/progressive bingo Yes % No blumn (d)	☐ Yes% No	col. (a) through col. (c))
Direct Expenses	2 3 4 5 6 7 8 Err	Cash prizes	Yes % No es 2 through 5 in column (oubtract line 7 from line 1, contact gaming act at gaming activities in each	bingo/progressive bingo Yes % No d)	☐ Yes% No	col. (a) through col. (c))
Direct Expenses	2 3 4 5 6 7 8 Err	Cash prizes	Yes % No es 2 through 5 in column (aubtract line 7 from line 1, co	bingo/progressive bingo Yes % No d)	☐ Yes% No	col. (a) through col. (c))
Direct Expenses	2 3 4 5 6 7 8 Er a Is b If'	Cash prizes	Yes % No es 2 through 5 in column (aubtract line 7 from line 1, co	bingo/progressive bingo Yes% No blumn (d)	☐ Yes % ☐ No	col. (a) through col. (c))

SCHEDULE O (Form 990)

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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

Employer identification number

MUSIC IN THE MOUNTAINS 94-2507337 01. Officer, directors, etc. family relationship (Part VI, line 2) DIRECTOR AMARAL AND DIRECTOR STRATE ARE MARRIED. 02. Form 990 governing body review (Part VI, line 11) FORM 990 IS PROVIDED TO AND APPROVED BY THE BOARD OF DIRECTORS PRIOR TO FILING. 03. Conflict of interest policy compliance (Part VI, line 12c) BOARD MEMBERS ARE REQUIRED TO DISCLOSE CONFLICTS. 04. CEO, executive director, top management comp (Part VI, line 15a) BOARD OF DIRECTORS REVIEW AND APPROVE SALARY FOR EXECUTIVE DIRECTOR AND ARTISTIC DIRECTOR. COMPARABILITY DATA AND BOARD MINUTES DOCUMENT THE PROCESS. 05. Governing documents, etc, available to public (Part VI, line 19) FORM 990 IS PROVIDED ON GUIDESTAR.COM. ALL OTHER DOCUMENTS ARE AVAILABLE UPON REQUEST.

Form **4562**

Department of the Treasury

Name(s) shown on return

Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

Attach to your tax return.

Go to www.irs.gov/Form4562 for instructions and the latest information.

Business or activity to which this form relates

OMB No. 1545-0172 **2022**

Attachment Sequence No. 179

Identifying number

MUSIC IN THE MOUNTAINS FORM 990 - 1 94-2507337 **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 1 Total cost of section 179 property placed in service (see instructions) 2 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 4 4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing 6 (a) Description of property (b) Cost (business use only) Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 9 9 10 10 Carryover of disallowed deduction from line 13 of your 2021 Form 4562 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions 11 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 Carryover of disallowed deduction to 2023. Add lines 9 and 10, less line 12 . . . Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service 14 15 16 13,508 Part III MACRS Depreciation (Don't include listed property. See instructions.) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2022 3,392 18 If you are electing to group any assets placed in service during the tax year into one or more general Section B - Assets Placed in Service During 2022 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property placed in (business/investment use (e) Convention (f) Method (g) Depreciation deduction 19a 3-year property b 5-year property 7-year property d 10-year property e 15-year property 20-year property g 25-year property 25 yrs. S/L h Residential rental 27.5 yrs. MM S/I 27.5 yrs. MM S/L property S/L i Nonresidential real 39 yrs. MM MM S/L property Section C - Assets Placed in Service During 2022 Tax Year Using the Alternative Depreciation System 20a Class life S/L S/L 12 yrs. **b** 12-year С 30-year 30 yrs. MM S/L S/L d 40-vear 40 vrs. Part IV Summary (See instructions.) 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instructions 16,900 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 23