990 Form

А в

Part I

Activities & Governance

Revenue

Expenses

Net Assets or Fund Balances

22

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2018

Open to Public

No

9

9

10

0

0

465

0

0

0

281,546

200

				_			
Under section	501(c), 527, o	or 4947(a)(1) of t	ne Internal	Revenue	Code	except private	foundations)
		()()					,

Do not enter social security numbers on this form as it may be made public.

Department of the Treasury Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Internal Revenue Service For the 2018 calendar year, or tax year beginning , 2018, and ending 07-01 06-30 ,2019 Check if applicable: C Name of organization Tucson Girls Chorus Association Inc D Employer identification no. Address change Doing business as 86-0505318 E Telephone number Name change Number and street (or P.O. box if mail is not delivered to street address) Room/suite Initial return 4020 E River Rd (520) 577-6064 Final return/terminated City or town, state or province, country, and ZIP or foreign postal code G Gross receipts Amended return Tucson, AZ 85718 490,228 \$ Х Application pending Name and address of principal officer: H(a) Is this a group return for subordinates? Yes H(b) Are all subordinates included? Yes No İХ Tax-exempt status: 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527 If "No," attach a list. (see instructions) Website: 🕨 Group exemption number www.tucsongirlschorus.org H(c) Χ Form of organization: Corporation Trust Association Other 1985 M State of legal domicile: L Year of formation: AZ Summary Briefly describe the organization's mission or most significant activities: The mission of the Tucson Girls Chorus is to 1 prepare a diverse group of young women to be confident leaders through participation in a well-constructed educational program that emphasizes music, performance, leadership training and community service. 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 3 Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 6 6 Total unrelated business revenue from Part VIII, column (C), line 12 7a 7a b Net unrelated business taxable income from Form 990-T, line 38 7b Prior Year **Current Year** 8 Contributions and grants (Part VIII, line 1h) 208,975 154,131 Program service revenue (Part VIII, line 2g) 9 229,023 232,946 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 37,050 29,864 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 420,204 472,250 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 13 14 Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 216,319 256,348 Professional fundraising fees (Part IX, column (A), line 11e) 16a Total fundraising expenses (Part IX, column (D), line 25) b 48,415 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 17 185,572 170,940 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 427,288 401,891 Revenue less expenses. Subtract line 18 from line 12 19 18,313 44,962 **Beginning of Current Year** End of Year Total assets (Part X, line 16) 20 260,237 357,176 21 Total liabilities (Part X, line 26) 28,042 75,630

Part II Signature Block

Net assets or fund balances. Subtract line 21 from line 20

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

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Sign		Signature of	officer							Da	ate	
Here		Melissa Tomlinson, Treasurer										
		Type or print	name and titl	e								
	Print/Type preparer's name Preparer's signature Jennifer J Phillips				Preparer's signature	Preparer's signature		Date	Check 🛛		PTIN	
Paid				03-01-2020				self-employed	P01607578			
Preparer	Firm's name Jennifer J Phillips CPA PLLC					CPA PLLC		Firm's EIN 🕨				
Use Only	Firm's address 5151 E. Broadway Blvd. Ste. 1600 Phone no.						no.					
	Tucson AZ 85711 520							520-	247-7087			
May the IRS	discu	uss this retu	urn with the	e preparer s	own above? (see i	nstructions)					🛛 Yes 🗌 No	່

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232.195

	990 (2018) Tucson Girls Chorus Association Inc	86-0505318	Page 2
Par	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III	<u></u>	
1	Briefly describe the organization's mission:		
	The mission of the Tucson Girls Chorus is to prepare a diverse group of young	women to be	•
	confident leaders through participation in a well-constructed educational prog	ram that	
	emphasizes music, performance, leadership training and community service.		
2	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?	· · · 🗌 Yes	x No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program		
	services?	••• Yes	X No
	If "Yes," describe these changes on Schedule O.		_
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured to	ру	
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to othe	rs,	
	the total expenses, and revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$ 331,932 including grants of \$) (Revenue	\$ 232	2,946)
	See attached PDF.		<u> </u>
4b	(Code:) (Expenses \$ including grants of \$) (Revenue	\$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue	\$)
	Other program convises (Describe in Schodule O.)		
4d	Other program services (Describe in Schedule O.))	
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses 331,932		

Form 990 (2018
Part IV	

8) Tucson Girls Chorus Association Inc 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	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 Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
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		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	-		
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more			
-	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
с	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more			
•	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
Ь	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
ŭ	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
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)? <i>If "Yes," complete Schedule D, Part X</i>	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		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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			
	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			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	-		
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	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	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	-		
-	If "Yes," complete Schedule G, Part III	19		Х
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	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		Х

<u></u>	Did the organization report more than \$5,000 of grants or other assistance to as far demostic individuals an		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? <i>If "Yes," complete Schedule I, Parts I and III</i>	22		Х
3	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the	- 22		
•	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		Х
4a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		Х
b	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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
Ба	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		Х
5	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		Х
	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		Х
	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1 · · · · · · · · · · · · · · · · · ·	34		Х
a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
,	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization?If "Yes," complete Schedule R, Part V, line 2	36		Х
	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
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O.	38	Х	
ar	V Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V		•••	<u> </u>
_			Yes	No
1a ⊾	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a			
n				1

c Did the organization comply with backup withholding rules for reportable payments to vendors and

reportable gaming (gambling) winnings to prize winners?

1c

EEA

Form 990 (2018) Tucson Girls Chorus Association Inc 86-0505318									
Pa	Int V Statements Regarding Other IRS Filings and Tax Compliance (continued)								
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		Yes	No					
2a	Statements, filed for the calendar year ending with or within the year covered by this return								
b									
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?								
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?								
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		X					
4a									
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?								
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?	5a		Х					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х					
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c							
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								
-	gifts were not tax deductible?	6b							
7	Organizations that may receive deductible contributions under section 170(c).								
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Х					
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b							
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	10							
Ū	required to file Form 8282?	7c		Х					
d	If "Yes," indicate the number of Forms 8282 filed during the year ••••••••••••••••••••••••••••••••••••								
е									
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?								
g	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?								
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h							
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?	9b							
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 · · · · · · · · · · · · · · · · · ·								
a		-							
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b								
11 a	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders								
a b	Gross income from other sources (Do not net amounts due or paid to other sources	-							
	against amounts due or received from them.)								
12a	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 12b								
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1							
а	Is the organization licensed to issue qualified health plans in more than one state?	13a							
	Note. See the instructions for additional information the organization must report on Schedule O.								
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								
14a	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 in Schedule O	14b							
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		X					
40	If "Yes," see instructions and file Form 4720, Schedule N.			37					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х					
	If "Yes," complete Form 4720, Schedule O.								

Form	990	(2018)	

Form	990 (2018) Tucson Girls Chorus Association Inc 86-0505		F	9age 6
Pa	rt 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
Sec	tion 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 1a 9	_		
	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 in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 9			
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, 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 governing documents since the prior Form 990 was filed?	4		X X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6 7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	0		A
/a	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,	10		
5	stockholders, or persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			- 73
Ū	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 in Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			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 in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
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,"			
	describe in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by			
~	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	15a	v	
a b	The organization's CEO, Executive Director, or top management official	15a	X	Х
D.	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	100		- 23
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
iou	with a taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	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		•	•
17	List the states with which a copy of this Form 990 is required to be filed			
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 in Schedule O)			
19	Describe in 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:			
	The Corporation (520)577-6064, 4020 E. River Rd, Tucson, AZ 85718			
		_	/	

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Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compe	nsated Employee	s, and							
	Independent Contractors									
	Check if Schedule O contains a response or note to any line in this Part VII		🗌							
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees									
•	1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.									
	 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid. 									

- List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee)

who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

 List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

102

					(C)					
(A)	(B)			Po	sition			(D)	(E)	(F)
Name and Title	Average					nan one		Reportable	Reportable	Estimated
Name and Tide	hours per					s both an /trustee)		compensation	compensation from	amount of
	week (list any					/11 (1316)		from	related	other
	hours for	<u> </u>	2		Ţ	<u>.</u> т	-	the	organizations	compensation
	related organizations	Individual trustee or director	Institutional trustee	Office	Key employee	ligh	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	below dotted	idua ecto	utio	<u>e</u>	due	est o	Ier			and related
	line)	, T	nal t		loye	e				organizations
		stee	ruste		e	bens				
			ě			Highest compensated employee				
								Ť		
(1) Amanda Jones	3.00									
President		X		X				0	0	0
(2) Melissa Tomlinson	3.00									
Treasurer	[Х		X		/		0	0	0
(3) Melissa Solyn	3.00									
Secretary		X		X				0	0	0
(4) Vanessa Helms	3.00									
President-Elect		X		X				o	0	0
(5) Karen Moody	1.00									
Director		X						о	0	0
(6) Jeannie Nguyen	1.00									
Director		Х						0	0	0
(7) Darlene Twiss	1.00									
Director		Х						0	0	0
(8) David Pietz	1.00									
Director	[Х						0	0	0
(9) Don Swann	1.00									
Director		Х						0	0	0
(10)Marcela Molina	40.00									
Director					Х			80,364	0	2,500
(11)										
	[
(12)										
	[
<u>(13)</u>										
<u>(14)</u>	L									
										Earma 000 (0010)

	90 (2018) Tucson Girls Chorus	s Associa	ation	Ir	nc					86-05053	818	Pa	age 8
Part	VII Section A. Officers, Directors, Trustees,	Key Employ	ees, ar	nd H	ighe	est C	Comp	ensa	ted Employees (c	ontinued)	1		
					(C Posi								
	(A)	(B)	(do no	ot che			nan one		(D)	(E)		(F)	
	Name and title	Average	box, u	Inless	s pers	on is	both an		Reportable	Reportable		stimated mount of	
		hours per week (list any	office	r and	a dire	ector/	trustee)		compensation from	compensation from related	a	other	
		hours for	or c	Inst	Officer	Kej	emp	For	the	organizations		npensatio	n
		related	Individual trustee or director	Institutional	Cer	Key employee	bloye	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)		from the ganizatior	n
		organizations below dotted	tor tr	onal		ploy	ĕg		(1099-10130)			nd related	
		line)	Jste	l trustee		ee	1pen				org	anization	IS
			œ	lee			Highest compensated employee						
							ä						
(15)													
<u> </u>													
(16)													
<u>(,,,,</u> ,													
(17)													
<u>()</u>		+											
(18)													
(10)													
(10)						—							
<u>(</u> 1 <u>9</u>)													
<u>(20</u>)													
<u>(21</u>)													
<u>(22)</u>													
							<u>^</u>						
(23)													
		[
(24)						1							
(25)													
<u> </u>													
1b	Sub-total							-					
c	Total from continuation sheets to Part VII, Section	nA.						2					
d	Total (add lines 1b and 1c)								80,364	0		2,5	500
2	Total number of individuals (including but not limited									0		2,3	
-	reportable compensation from the organization	10 11030 11310	u abov	C) W		0001	veu m			٥			
										0		Yes	No
•	Did the exemptation list any former officer director	or tructor la				امنعا	haata		anastad			res	NO
3	Did the organization list any former officer, director,			-		-					_		v
	employee on line 1a? If "Yes," complete Schedule J										3		Х
4	For any individual listed on line 1a, is the sum of rep												
	organization and related organizations greater than												
_	individual										4		Х
5	Did any person listed on line 1a receive or accrue co			-			-		on or individual				
0	for services rendered to the organization? If "Yes," of	omplete Sch	edule J	for	such	n per	rson				5		Х
Secti	on B. Independent Contractors												
1	Complete this table for your five highest compensate												
	compensation from the organization. Report compensation	nsation for the	e calen	dar	year	end	ling wi	th or	within the organiz	ation's tax			
	year.												
	(A)								(B)			(C)	
	Name and business address								Description of	services	Com	pensation	n
										1			
2	Total number of independent contractors (including l	out not limited	d to tho	se li	sted	abo	ve) w	no					

►

reaching more than	¢100 000 of com	nonaction from the organize	tion
received more than	\$100,000 of com	pensation from the organiza	alion

	0 (2018) Tucson Girls Chorus	Association	Inc		86-05053	18 Page 9
Part			5			F
	Check if Schedule O contains a response or no	ote to any line in this	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns 1a b Membership dues 1b c Fundraising events 1c d Related organizations 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 1f g Noncash contributions included in lines 1a-1f: \$ h h Total. Add lines 1a-1f	51,035 157,940	208,975		1	
Program Service Revenue	2a Engagement admin fees b Chorus Travel c Costume Sales d Performance Revenue e Tuition Revenue f All other program service revenue g Total. Add lines 2a-2f	Business Code 711130 711130 711130 711130 711130 711130 	8,387 56,395 8,585 26,239 132,231 1,109 232,946			
Other Revenue	 Investment income (including dividends, interest, and other similar amounts) Income from investment of tax-exempt bond proces Royalties Royalties Royalties (i) Real 6a Gross rents b Less: rental expenses c Rental income or (loss) c Gain or (loss) c Contributions reported on line 1c). c See Part IV, line 18 c Net income or (loss) from fundraising events c Net income or (loss) from gaming activities. c See Part IV, line 19 c Net income or (loss) from gaming activities c Net income or (loss) from sales of inventory 	eeds► (ii) Personal (ii) Other (ii) Other ►				
	Miscellaneous Revenue 11a b c d All other revenue e Total. Add lines 11a-11d	Business Code				
	12 Total revenue. See instructions		472,250	232,946	0	30,329

018) Tucson Girls Chorus Association Inc Statement of Functional Expenses Part IX

Secti	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 n	ot include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	(D)		
	b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising 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	98,049	49,024	9,805	39,220		
6	Compensation not included above, to disqualified	50,015	157021	57000	33,220		
•	persons (as defined under section 4958(f)(1)) and						
	persons described in section 4958(c)(3)(B)						
7	Other salaries and wages	116,702	97,103	15,679	3,920		
8	Pension plan accruals and contributions (include	110,702	57,105	15,075	5,520		
-	section 401(k) and 403(b) employer contributions)	5,644	4,233	1,129	282		
9	Other employee benefits	19,189	14,392	3,838	959		
10	Payroll taxes	16,764	12,573	3,353	838		
11	Fees for services (non-employees):	10,704	12,573	3,333	636		
a	Management						
b							
c	Accounting	3,504		3,504			
d	Lobbying	3,304		5,504			
e	Professional fundraising services. See Part IV, line 17						
f	Investment management fees						
g	Other. (If line 11g amount exceeds 10% of line 25, column						
9	(A) amount, list line 11g expenses on Schedule O.)	20,426	20,426				
12	Advertising and promotion	10,202			1,059		
13	Office expenses		9,143	E 01E			
14	Information technology	25,076	18,807	5,015	1,254		
15	Royalties	5,426	5,426				
16	Occupancy	6,140		1 220	307		
17	Travel	56,395	4,605	1,228			
18	Payments of travel or entertainment expenses	56,395	56,395				
10	for any federal, state, or local public officials						
19	Conferences, conventions, and meetings	7 250	6 170	1 090			
20		7,259	6,170	1,089	<u> </u>		
21	Payments to affiliates						
22	Depreciation, depletion, and amortization	6,115	4,586	1,223	306		
23		5,332	3,999	1,223	267		
24	Other expenses. Itemize expenses not covered	5,352	5,999	1,000	207		
	above (List miscellaneous expenses in line 24e. If						
	line 24e amount exceeds 10% of line 25, column						
	(A) amount, list line 24e expenses on Schedule O.)						
а	Performance expense	12,001	12,001				
b	Music camp expense	517	517				
c	Engagement program	10,130	10,130		<u> </u>		
d	Costumes and apparel	2,357	2,357				
e	All other expenses	60	45	12	3		
25	Total functional expenses. Add lines 1 through 24e	427,288	331,932	46,941	48,415		
26	Joint costs. Complete this line only if the	721,200	551,352		40,413		
	organization reported in column (B) joint costs						
	from a combined educational campaign and fundraising solicitation. Check here						
	fundraising solicitation. Check here b if following SOP 98-2 (ASC 958-720)						

Form 990	(2018)
Part X	Bala

Fall A	Dalarice Sheet			
	Check if Schedule O contains a response or note to any line in this Part X		<u></u>	[
		(A)		(B)
		Beginning of year		End of year
1	Cash - non-interest-bearing	16,067	1	94,653
2	Savings and temporary cash investments	175,561	2	195,964
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4	1,949
5	Loans and other receivables from current and former officers, directors,			
	trustees, key employees, and highest compensated employees.			
	Complete Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined under section			
	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and			
	sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
	organizations (see instructions). Complete Part II of Schedule L		6	
_თ 7	Notes and loans receivable, net		7	
Assets	Inventories for sale or use		8	
8 9	Prepaid expenses and deferred charges	156	9	
10a	Land, buildings, and equipment: cost or			
	other basis. Complete Part VI of Schedule D 10a 167, 327			
1		68,453	10c	64,610
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 · · · · · · · · · · · · · · · · · ·		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	260,237	16	357,176
17	Accounts payable and accrued expenses	11,727	17	20,073
18	Grants payable		18	
19	Deferred revenue	16,315	19	55,557
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
<u>ອ</u> 22	Loans and other payables to current and former officers, directors,			
ilit	trustees, key employees, highest compensated employees, and			
ZZ ZZ	disqualified persons. Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24). Complete Part X			
	of Schedule D		25	
26	Total liabilities. Add lines 17 through 25	28,042	26	75,630
	Organizations that follow SFAS 117 (ASC 958), check here 🛛 🕨 🔀 and			
ces	complete lines 27 through 29, and lines 33 and 34.			
<u>u</u> 27	Unrestricted net assets	175,290	27	203,183
8 28	Temporarily restricted net assets	56,905	28	78,363
29	Permanently restricted net assets		29	
Net Assets or Fund Balances 65 88 15 75 87 87 87 88 87 88 87 88 87 88 88 88 88	Organizations that do not follow SFAS 117 (ASC 958), check here 🔹 🕨 and			
10 %	complete lines 30 through 34.			
30 Sets	Capital stock or trust principal, or current funds		30	
Ğ 31	Paid-in or capital surplus, or land, building, or equipment fund		31	
32 Not	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	232,195	33	281,546
34	Total liabilities and net assets/fund balances	260,237	34	357,176

Form 990 (2018)

EEA

	990 (2018) Tucson Girls Chorus Association Inc	86-0505318	3	Pa	age 12
Pai	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI			•••	<u>· 🗆 –</u>
1	Total revenue (must equal Part VIII, column (A), line 12)			172,2	
2	Total expenses (must equal Part IX, column (A), line 25)			127,2	
3	Revenue less expenses. Subtract line 2 from line 1	. 3		44,9	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	. 4	2	232,	195
5	Net unrealized gains (losses) on investments	. 5			
6	Donated services and use of facilities	. 6			
7	Investment expenses	. 7			
8	Prior period adjustments	. 8		4,3	389
9	Other changes in net assets or fund balances (explain in Schedule O)	. 9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
Da	33, column (B))	. 10	2	281,	546
Fai	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				÷⊔_
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
-	Schedule O.		-		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				57
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	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?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in				
_	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
_	the Single Audit Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	//	
EEA			Form	990 (2	2018)

SCHEDULE A

Public Charity Status and Public Support

OMB No. 1545-0047 2010

(Ear	m 00	0 or 990 E7)	Complete if the organiza	ation is a section 501	2010						
•		0 or 990-EZ) of the Treasury		Atta	Open to Public						
		enue Service	▶	Go to www.irs.gov/Form990 for instructions and the latest information					Inspection		
Name	e of the	organization						Employer identifica	tion number		
			rus Association					86-050531			
Pa	rt I	Reason	for Public Charity	y Status (All or	ganizations must co	omplete	this part	.) See instructions	S.		
The	orgar	nization is not a	private foundation beca	ause it is: (For lines	1 through 12, check only	one box.)					
1		A church, conv	ention of churches, or a	association of churc	ches described in sectior	n 170(b)(1)	(A)(i).				
2		A school descr	ibed in section 170(b)	(1)(A)(ii). (Attach So	chedule E (Form 990 or 9	90-EZ).)					
3		A hospital or a	cooperative hospital se	ervice organization	described in section 170	(b)(1)(A)(ii	i).				
4		A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the									
		hospital's name	e, city, and state:								
5		An organizatio	n operated for the bene	fit of a college or u	niversity owned or operat	ed by a go	vernmenta	l unit described in			
		section 170(b))(1)(A)(iv). (Complete F	Part II.)							
6		A federal, state	e, or local government c	or governmental uni	t described in section 17	′0(b)(1)(A)	(v).				
7		An organizatio	n that normally receives	s a substantial part	of its support from a gove	ernmental u	unit or from	the general public			
		described in se	ection 170(b)(1)(A)(vi).	(Complete Part II.)							
8		A community to	rust described in sectio	on 170(b)(1)(A)(vi).	(Complete Part II.)						
9		An agricultural	research organization of	described in sectio	n 170(b)(1)(A)(ix) operat	ed in conju	nction with	a land-grant college			
		or university or	a non-land-grant colle	ge of agriculture (se	e instructions). Enter the	name, city	, and state	of the college or			
		university:									
10	Х	An organizatio	n that normally receives	s: (1) more than 33	1/3% of its support from	contribution	ns, membe	rship fees, and gross			
		receipts from a	activities related to its ex	kempt functions - sι	ubject to certain exception	ns, and (2)	no more th	nan 33 1/3% of its			
		support from g	ross investment income	e and unrelated bus	siness taxable income (le	ss section	511 tax) fro	om businesses			
	_	acquired by the	e organization after Jun	e 30, 1975. See se	ction 509(a)(2). (Comple	te Part III.)					
11	Ц	-	•		st for public safety. See s						
12		•	•		ne benefit of, to perform t			• • •			
					d in section 509(a)(1) or						
		_	•		e type of supporting organ				lg.		
	а				ed, or controlled by its su		-				
					appoint or elect a majority	y of the dire	ectors or tr	ustees of the			
		_	organization. You mus								
	b				trolled in connection with		-				
					n vested in the same per	sons that c	ontrol or m	anage the supported			
			on(s). You must compl								
	С				ization operated in conne			, ,			
	-			,	must complete Part IV,						
	d				organization operated in c						
					enerally must satisfy a dis		•	and an attentiveness			
					Part IV, Sections A and						
	е	_	J. J		determination from the IR		a Type I, I	ype II, Type III			
	, ·				egrated supporting orgar						
	f				· · · · · · · · · · · · · · · · · · ·				· · · · ·		
	<u>g</u>		lowing information abou						(D. A		
	(1) Name of supported	lorganization	(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the o listed in you	rganization Ir governing	(v) Amount of monetary support (see	(vi) Amount of other support (see		
					above (see instructions))	docum	nent?	instructions)	instructions)		
						Yes	No				
						100					
(A)											
(B)											
(C)											
(D)											
						1					
(E)											
Tota	ıl										

	ule A (Form 990 or 990-EZ) 2018 Tucso	on Girls Cho	rus Associat	ion Inc		86-0505318	Page 2
Pa							
	(Complete only if you check						under
	Part III. If the organization f	ails to qualify ເ	under the tests	listed below, p	lease complete	e Part III.)	
Sec	tion A. Public Support						
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not						
	include any "unusual grants.") • • • • •						
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 · · · · · ·						
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)						
6	Public support. Subtract line 5 from line 4 • •						
	tion B. Total Support						
	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4 • • • • • • • • • • • •	(-)	(3)-1.1	(0) = 0.0	((0) = 0.10	()
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources		2				
9	Net income from unrelated business activities, whether or not the business is regularly carried on			$\boldsymbol{\wedge}$			
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) • • • • • • • • • • • •		C				
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc. (se	e instructions)				12	
13	First five years. If the Form 990 is for the or	anization's first, s	econd, third, fourth,	or fifth tax year as	a section 501(c)(3)	
	organization, check this box and stop here						· · · · ► 🗌
Sec	tion C. Computation of Public Su						
14	Public support percentage for 2018 (line 6, co	olumn (f) divided b	y line 11, column (f))		14	%
15	Public support percentage from 2017 Schedu	ule A, Part II, line 1	4			15	%
16a	33 1/3% support test - 2018. If the organization	tion did not check	the box on line 13, a	and line 14 is 33 1/	3% or more, check	this	
	box and stop here. The organization qualifie	s as a publicly sup	ported organization				· · · 🕨 🔲
b	33 1/3% support test - 2017. If the organization	tion did not check	a box on line 13 or [.]	16a, and line 15 is	33 1/3% or more, o	check	
	this box and stop here. The organization qua	alifies as a publicly	supported organiza	ation • • • • • •			· · · ► 🔲
17a	10%-facts-and-circumstances test - 2018.	If the organization	did not check a box	on line 13, 16a, o	or 16b, and line 14 i	S	
	10% or more, and if the organization meets t	ne "facts-and-circu	mstances" test, che	eck this box and st	op here. Explain ir		
	Part VI how the organization meets the "facts						
	organization • • • • • • • • • • • • • • • • • • •						▶ □
b	10%-facts-and-circumstances test - 2017.						
-	15 is 10% or more, and if the organization me	-					
	Explain in Part VI how the organization meets				-	v	
						, 	🕨 🗖
18	Private foundation. If the organization did no					-	
.0	instructions						🕨 🗖

Schedule A (Form 990 or 990-EZ) 2018

Sche	dule A (Form 990 or 990-EZ) 2018 Tucs	on Girls Cho	rus Associat	ion Inc		86-0505318	Page 3
Pa	rt III Support Schedule for Org						
	(Complete only if you check						Part II.
_	If the organization fails to q	ualify under th	e tests listed be	elow, please co	mplete Part II.))	
Sec	ction A. Public Support						
Cale	endar year (or fiscal year beginning in) 🕨 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees						
-	received. (Do not include any "unusual grants.")	84,306	139,252	169,566	154,131	208,975	756,230
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose • • • • •	234,793	264,305	240,583	229,023	232,946	1,201,650
3	Gross receipts from activities that are not an unrelated trade or business under section 513 •	70 227	E0 117	E4 04E	E1 007	47 040	204 649
	unrelated trade of pusitiess under section 515	79,337	52,117	54,345	51,007	47,842	284,648
4	Tax revenues levied for the						
	organization's benefit and either paid to or expended on its behalf						
							<u>_</u>
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	398,436	455,674	464,494	434,161	489,763	2,242,528
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						
h	Amounts included on lines 2 and 3						
D D	received from other than disgualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year • •		59,609				199,993
С	Add lines 7a and 7b		59,609	47,717	47,500	45,167	199,993
8	Public support. (Subtract line 7c from						0 040 505
Sec	tion B. Total Support						2,042,535
	endar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6	398,436					2,242,528
		550,450	433,074	101/101	454,101	405,705	2,242,520
10a	Gross income from interest, dividends, payments received on securities loans, rents,						
	royalties, and income from similar sources		135	307		465	907
D	Unrelated business taxable income (less section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b		135	307		465	907
11	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 VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)	398,436	455,809	464,801	434,161	490,228	2 242 425
4.4	,					490,228	2,243,435
14	First five years. If the Form 990 is for the org organization, check this box and stop here						
Sec	ction C. Computation of Public Su						<u>U_</u>
15	Public support percentage for 2018 (line 8, co	olumn (f), divided b	y line 13, column (f))		15	91.04 %
16	Public support percentage from 2017 Schedu					16	99.98 %
Sec	ction D. Computation of Investme	nt Income Per	centage				
17	Investment income percentage for 2018 (line	10c, column (f), div	vided by line 13, col	umn (f)) • • • • •	· · · · · · · · · · ·	17	0.00 %
18	Investment income percentage from 2017 Sc	hedule A, Part III, li	ne 17 • • • • • •			18	0.00 %
19a	33 1/3% support tests - 2018. If the organization						. —
	17 is not more than 33 1/3%, check this box a	ind stop here. The	organization qualif	ies as a publicly su	pported organizatio	on •••••••	•••• 🕨
b	33 1/3% support tests - 2017. If the organization of the set many them 22 1/2% should think						L []
20	line 18 is not more than 33 1/3%, check this b	-	•				=
20	Private foundation. If the organization did no	n check a box on III	IC 14, 198, OF 19D,	CHECK THIS DOX and	SEE INSTRUCTIONS		•••• 🗖 📋

Schedul	e A (Form 990 or 990-EZ) 2018 Tucson Girls Chorus Association Inc 86-050531	в	P	age 4
Part				
	(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete S			
	and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, com		•	
	Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Par	t V.)		
Sect	ion A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing			
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by			
	class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	(b) and (c) 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.	3c		
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 (b) and (c) 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 P_{1} and P_{2} a			
	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)	4.5		
5-	purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"			
	answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action;			
	(iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	Fo		
h	Type I or Type II only. Was any added or substituted supported organization part of a class already	5a		
U	designated in the organization's organizing document?	5b		
~	Substitutions only. Was the substitution the result of an event beyond the organization's control?	50 50		
ĥ	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to	50		
0	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 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?	-		
•	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	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 in 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 in 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 .	9c		
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		
b	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		
EEA	Schedule A (Fo		or 990-F	7) 2018

-	LIE A (Form 990 or 990-EZ) 2018 Tucson Girls Chorus Association Inc 86-0505318		P	age 5
Pa	t IV 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 in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
с	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
	organizations and what conditions of restrictions, if any, applied to such powers during the tax year.	<u> </u>		
•	Did the exercise tion exercise for the bonefit of any expression institution other that the exercise tion			
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations	<u> </u>		
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (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 (2), did the organization's supported organizations have a			
•	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations	<u> </u>		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see ins	tructi	onal	
	The organization satisfied the Activities Test. Complete line 2 below.	uucu	unsj.	
a k				
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>	:		
c	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see ins		
2	Activities Test. Answer (a) and (b) 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			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
		<u> </u>		

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-	ule A (Form 990 or 990-EZ) 2018 Tucson Girls Chorus Association Inc		86-050	5318	Page 6
	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Org				0
1	Check here if the organization satisfied the Integral Part Test as a qualifying t			,	
	instructions. All other Type III non-functionally integrated supporting organization	ation	s must complete Sections		
Sec	tion A - Adjusted Net Income		(A) Prior Year	(B) Curre (optic	
_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				
	llection of gross income or for management, conservation, or				
ma	intenance of property held for production of income (see instructions)	6			
7	Other expenses (see instructions)	7			
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8			
Sec	tion B - Minimum Asset Amount		(A) Prior Year	(B) Curre (optic	
1	Aggregate fair market value of all non-exempt-use assets (see				
ins	tructions 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				
fa	ctors (explain in detail in Part VI):				
2	Acquisition indebtedness applicable to non-exempt-use assets	2			
3	Subtract line 2 from line 1d.	3			
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,				
se	e instructions).	4			
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5			
6	Multiply line 5 by .035.	6			
7	Recoveries of prior-year distributions	7			
8	Minimum Asset Amount (add line 7 to line 6)	8			
Sec	tion C - Distributable Amount			Current	Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1			
2	Enter 85% of line 1.	2			
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			
	Income tax imposed in prior year	5			
6	Distributable Amount. Subtract line 5 from line 4, unless subject to				
en	nergency temporary reduction (see instructions).	6			
7	Check here if the current year is the organization's first as a non-functionally i	integ	rated Type III supporting of	organization	(see
	instructions).	0		-	

Schedule A (Form 990 or 990-EZ) 2018

Schedu	ule A (Form 990 or 990-EZ) 2018 Tucson Girls Chorus Assoc:	iation Inc Supporting Organiz	86-050 ations (continued)	05318 Page 7			
Sec	tion D - Distributions		· · · · ·	Current Year			
1	Amounts paid to supported organizations to accomplish exem						
2							
	organizations, in excess of income from activity						
3	Administrative expenses paid to accomplish exempt purposes	of supported organizati	ons				
4	Amounts paid to acquire exempt-use assets						
5	Qualified set-aside amounts (prior IRS approval required)						
6	Other distributions (describe in Part VI). See instructions.						
7	Total annual distributions. Add lines 1 through 6.						
8	Distributions to attentive supported organizations to which the	organization is respons	ive				
	(provide details in Part VI). See instructions.						
9	Distributable amount for 2018 from Section C, line 6						
10	Line 8 amount divided by Line 9 amount						
S	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018			
1	Distributable amount for 2018 from Section C, line 6						
2	Underdistributions, if any, for years prior to 2018						
	(reasonable cause required - explain in Part VI). See						
	instructions.						
3	Excess distributions carryover, if any, to 2018						
а	From 2013						
b	From 2014						
С	From 2015						
d	From 2016						
е	From 2017						
f	Total of lines 3a through e						
g	Applied to underdistributions of prior years		V				
h	Applied to 2018 distributable amount						
i	Carryover from 2013 not applied (see instructions)						
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.						
4	Distributions for 2018 from						
	Section D, line 7: \$						
а	Applied to underdistributions of prior years						
b	Applied to 2018 distributable amount						
С	Remainder. Subtract lines 4a and 4b from 4.						
5	Remaining underdistributions for years prior to 2018, 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 2018. Subtract lines 3h						
	and 4b from line 1. For result greater than zero, explain in						
	Part VI. See instructions.						
7	Excess distributions carryover to 2019. Add lines 3j						
	and 4c.						
8	Breakdown of line 7:						
а	Excess from 2014						
	Excess from 2015						
	Excess from 2016						
	Excess from 2017						
	Excess from 2018						
EEA			Sched	ule A (Form 990 or 990-EZ) 2018			
			Coneu				

Schedule A (Form 990 or 990-EZ) 2018 Page 8 Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part Part VI 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 B (Form 990, 990-EZ,

or 990-PF) Department of the Treasury

Internal Revenue Service

Name of the organization

Organization type (check one):

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

Employer identification number 86-0505318

OMB No. 1545-0047

2018

Tucson Girls Chorus Association Inc

Filers of:	Section:
Form 990 or 990-EZ	501(c)(3) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

🛛 For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

\$

Name of organization

Page 2

Employer identification number

Tucson Girls Chorus Association Inc

86-0505318

Part I	Contributors (see instructions). Use duplicate copies of F	Part I if additional space is ne	eded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Arizona Commission on the Arts 417 W. Roosevelt St. Phoenix, AZ 85003	\$17,100	Person Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	The Stonewall Foundation <u>3125 Melpomene Way</u> <u>Tucson, AZ 85749</u>	\$35,000	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	Victor & Regina Fresolone 994 W Tortolita Mountain C Tucson, AZ 85755	\$10,167	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	Zuckerman Community Outreach Founda 2250 E Broadway Blvd Tucson, AZ 85719	\$5,000	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	Janice F Levin Irrevocable Trust 6964 E Century Park Dr Tucson, AZ 85756	\$ <u>7,500</u>	Person Image: Complete Noncash Image: Complete (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	Levin Family Irrevocable Trust 6964 E Century Park Dr Tucson, AZ 85756	\$ <u>7,500</u>	Person Image: Complete Part II for noncash contributions.)

Part I	Contributors (see instructions). Use duplicate copies of P	Part I if additional space is ne	eded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	SBK Stearns Family Foundation 6840 N.Los Leones Dr Tucson, AZ 85718	\$	Person Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number 86-0505318

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization

Tucson Girls Chorus Association Inc

SCHEDULE D (Form 990)		Suppler	nental Financial Statements		OMB No. 1545-0047
		Complete if the organization answered "Yes" on Form 990,			2018
		Part IV, line 6, 7	8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b		2010
			Attach to Form 990.		Open to Public
-	I Revenue Service	Go to www.irs.gov/F	orm990 for instructions and the latest informati		Inspection
	of the organization	Chorus Association	The		r identification number $\cdot 0505318$
			d Funds or Other Similar Funds or Accou		.0303310
		if the organization answered "Ye			
		5	(a) Donor advised funds	(b) Fur	nds and other accounts
1	Total number at en	d of year • • • • • • • • • • • • • • • • • • •			
2	Aggregate value of	f contributions to (during year) •			
3	Aggregate value of	f grants from (during year) ••			
4	Aggregate value at	end of year			
5	-		in writing that the assets held in donor advised		
_	-	nization's property, subject to the organ	_		· · · · · · · · · · · · · · · · · · ·
6	-	•	or advisors in writing that grant funds can be used		
	-		donor or donor advisor, or for any other purpose		Yes No
Pa		vation Easements.			Yes No
l'u		e if the organization answered "Ye	es" on Form 990. Part IV. line 7.		
1		ervation easements held by the organ			
	_	f land for public use (e.g., recreation o	<u> </u>	ally important I	land area
	Protection of n	atural habitat	Preservation of a certified	historic struct	ture
	Preservation of	f open space			
2	Complete lines 2a	through 2d if the organization held a q	ualified conservation contribution in the form of a co	onservation	
	easement on the la	ast day of the tax year.			eld at the End of the Tax Year
а		nservation easements		•• 2a	
b		icted by conservation easements	•••••••••••••••••••••••••••••	· · 2b	
c		vation easements on a certified historic	.,	· · 2c	
d		vation easements included in (c) acquir bted in the National Register	ed after 7/25/06, and hot on a	24	
3		sted in the National Register	, released, extinguished, or terminated by the orga	•• 2d	a tho
3	tax year	auon easements mouned, transferred	, released, extinguished, or terminated by the orga		y ule
4	· · ·	where property subject to conservation	easement is located		
5			periodic monitoring, inspection, handling of		
	-	prcement of the conservation easemer			Yes 🗌 No
6	Staff and volunteer	hours devoted to monitoring, inspecti	ng, handling of violations, and enforcing conservation	on easements	during the year
	►				
7	Amount of expense	es incurred in monitoring, inspecting, h	andling of violations, and enforcing conservation ea	asements duri	ng the year
	▶\$				
8			above satisfy the requirements of section 170(h)(4)		
	and section 170(h)				Yes No
9			vation easements in its revenue and expense state		
		bunting for conservation easements.	ootnote to the organization's financial statements th	at describes tr	ne
Pa			ions of Art, Historical Treasures, or C	Other Simil	lar Assets.
<u> </u>		te if the organization answered "			
1a			(ASC 958), not to report in its revenue statement a	nd balance sh	neet
	-		eld for public exhibition, education, or research in f		
	public service, prov	vide, in Part XIII, the text of the footnot	e to its financial statements that describes these ite	ms.	
b	If the organization	elected, as permitted under SFAS 116	(ASC 958), to report in its revenue statement and I	palance sheet	
	works of art, histori	cal treasures, or other similar assets h	eld for public exhibition, education, or research in f	urtherance of	
	•	vide the following amounts relating to t			
					▶ \$
2	0		treasures, or other similar assets for financial gain	, provide the	
	Ũ	required to be reported under SFAS 1			• •
a		,			
b For I			ar Form 900		
101	UDCI WOLK NEUUCII	on Act Notice, see the Instructions f			Schedule D (Form 990) 2018

For	Paperwork	Reduction	Act Notice,	, see the	Instructions	tor For

	ule D (Form 990) 2018 Tucson Girls Choru					86-05053			Page 2
Pai	rt III Organizations Maintaining Colle	ctions of A	rt, Historical Tre	easures, o	r Othe	er Similar Asse	ets (con	tinue	ed)
3	Using the organization's acquisition, accession, and o	ther records, ch	eck any of the followi	ng that are a s	ignifica	nt use of its			
	collection items (check all that apply):								
а	Public exhibition	d 🗌 Loai	n or exchange progra	ims					
b	Scholarly research	e 🗌 Othe							
с	Preservation for future generations								
4	Provide a description of the organization's collections	and explain hov	v they further the orga	anization's exe	mpt pu	rpose in Part			
	XIII.		, ,						
5	During the year, did the organization solicit or receive	donations of art	historical treasures	or other simila	ar				
Ŭ	assets to be sold to raise funds rather than to be main						. П у	'es	□ No
Par	rt IV Escrow and Custodial Arrangem		r ine organization e				· _ ·	00	
	Complete if the organization answe		Form 990 Part	IV line 9 d	or repo	orted an amour	nt on Fo	rm	
	990, Part X, line 21.			1 v , into 0, v	or rop.				
12	Is the organization an agent, trustee, custodian or othe		or contributions or of	hor accots not					
1a		-						/a.a.	
					7.		· 🗆 ĭ	es	No
b	If "Yes," explain the arrangement in Part XIII and comp	piete the following	ig table:						
	Amount								
С									
d									
е	5 5			••••	• 1e				
f	Ending balance				• 1f				
2a	Did the organization include an amount on Form 990,				•		· . 🗌 Ү		
b	If "Yes," explain the arrangement in Part XIII. Check h	ere if the explan	ation has been provid	ded on Part XI					
Par									
	Complete if the organization answe	red "Yes" or	Form 990, Part	IV, line 10.					
	(a) Current year	(b) Prior year	(c) Two years I	back	(d) Three years back	(e) Four	years b	ack
1a	Beginning of year balance								
b	Contributions								
С	Net investment earnings, gains, and								
	losses				Ť				
d	Grants or scholarships								
е	Other expenditures for facilities and								
	programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of the current year	end balance (lin	e 1g, column (a)) hel	d as:					
а	Board designated or quasi-endowment	%							
b	Permanent endowment %								
с	Temporarily restricted endowment	%							
	The percentages on lines 2a, 2b, and 2c should equal	100%.							
3a	Are there endowment funds not in the possession of the		that are held and adn	ninistered for t	he				
	organization by:	J.						Yes	No
	(i) unrelated organizations						3a(i)		
	(ii) related organizations						3a(ii)		
b	If "Yes" on line 3a(ii), are the related organizations list	ed as required o	n Schedule R?				3b		
4	Describe in Part XIII the intended uses of the organization	•					0.5		
<u> </u>	t VI Land, Buildings, and Equipment.								
. u	Complete if the organization answe		Form 990 Part	IV line 11a	a See	Form 990 Par	t X line	10	
	· · · · ·								
	Description of property	(a) Cost or othe (investme		r other basis other)	• •	Accumulated epreciation	(d) Boo	k value	
4-	Land	linestile	((
1a									
b	Buildings								
c	Leasehold improvements			124,001		62,756		61,2	
d				13,403		11,322		2,0	
e	Other			29,923		28,639		1,2	
Total	. Add lines 1a through 1e. (Column (d) must equal For	m 990, Part X, c	olumn (B), line 10c.)					64,6	610

Schedule D (Form 990) 2018

Schedule D (Form		S Chorus Association Inc	86-0505318	Page 3
Part VII	Investments - Other Securities.			
	Complete if the organization answ	Vered "Yes" on Form 990, Part I	V, line 11b. See Form 990, Part X, li	ne 12.
	(a) Description of security or category	(b) Book value	(c) Method of valuation:	
(1) Einancial	(including name of security) derivatives		Cost or end-of-year market value	
	eld equity interests	••		
(2) Closely-In (3) Other				
(A)				
(R)				
(C)				
(D)				
(E)				
(F)				
(G)				
(U) (H)				
Part VIII	Investments - Program Related			
i ait viii	-		V, line 11c. See Form 990, Part X, lir	ne 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)				
) must equal Form 990, Part X, col. (B) line 13.)		V	
Part IX	Other Assets.			
		vered "Yes" on Form 990. Part I	V, line 11d. See Form 990, Part X, liı	ne 15.
		(a) Description		ok value
(1)				JK Value
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, col. (B) line	15)		
Part X	Other Liabilities.			
Turtx		vered "Yes" on Form 990 Part I	V, line 11e or 11f. See Form 990, Pa	art X
	line 25.			
1.				
	(a) Description of liability	(b) Book value		
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	must equal Form 990, Part X, col. (B) line 25.)			
	uncertain tax positions. In Part XIII, provide th	_		_
organization's	liability for uncertain tax positions under FIN 4	8 (ASC 740). Check here if the text of the	e footnote has been provided in Part XIII • • •	<u>····</u>

		6-0505318	Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Statements With Revenue per	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 •••••••••• 2a		
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	
Pa	rt XII Reconciliation of Expenses per Audited Financial Statements With Expenses p	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:		
а	Donated services and use of facilities 2a		
b	Prior year adjustments		
С	Other losses		
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 IX, line 25, 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 expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	
Pa	rt XIII Supplemental Information.		

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

SCHEDULE G	Supplemer	ntal Informatio	on Regar	ding Fur	draising or Gan	ning Act	ivities _	OMB No. 1545-0047
(Form 990 or 990-EZ)	Complete	the	2018					
Department of the Treasury	organization ente		Open to Public					
Internal Revenue Service Name of the organization	F(50 to www.irs.gov/Fo	orm990 for in	istructions a	nd the latest information	n.	Employer ide	Inspection ntification number
Tucson Girls Choru	is Associat	ion Inc					86-05	05318
Part I Fundraisi	ng Activities	. Complete if th	ne organi	zation an	swered "Yes" on	Form 99	0, Part IV,	line 17.
Form 990-E	Z filers are not	required to com	plete this	part.				
1 Indicate whether the	organization rais	ed funds through a	· _	-	ities. Check all that ap			
a Mail solicitations			=		of non-government gra	ants		
b Internet and email			=		of government grants			
c Phone solicitation			g ∐	Special fun	draising events			
d In-person solicitati 2a Did the organization I		oral agreement wit	h any indivi	dual (includ	ing officers directors t	rustoes		
		-	-		sional fundraising ser			es 🗌 No
b If "Yes," list the 10 hig		, ,		•	J			
compensated at least			,.					
							-	
(i) Name and address	of individual			draiser have	(iv) Gross receipts		ount paid to ained by)	(vi) Amount paid to
or entity (fundrai		(ii) Activity		r control of utions?	from activity	fundrais	er listed in	(or retained by) organization
						C	ol. (i)	
1			Yes	No				
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
Total								
3 List all states in which	the organization	is registered or lice	ensed to sol	icit contribut	i tions or has been notifi	ed it is exe	mpt from	
registration or licensin		5						
·								

Tucson Girls Chorus Association Inc

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Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

			ψ3,000.			
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			Duets/Dinner	Family FR	None	(add col. (a) through
			(event type)	(event type)	(total number)	col. (c))
ue						
Revenue	1	Gross receipts	68,067	30,810		98,877
Re						
	2	Less: Contributions	51,035			51,035
	3	Gross income (line 1 minus				
		line 2)	17,032	30,810		47,842
		,	,			
	4	Cash prizes				
	•					
	5	Noncash prizes				
	J					
6	6	Pont/facility agets				
sea	6	Rent/facility costs • • • • • • • •				
pen	_					
EXI	7	Food and beverages • • • • • •	8,735			8,735
Direct Expenses						
Dir	8	Entertainment • • • • • • • • •		· ·		
	9	Other direct expenses • • • • •	9,243			9,243
	10	Direct expense summary. Add lines	4 through 9 in column (d)			17,978
	11	Net income summary. Subtract line				29,864
Pa	rt II	Gaming. Complete if the o	rganization answered "	Yes" on Form 990, Part	IV, line 19, or reported r	nore
			-EZ, line 6a.			
-				(b) Pull tabs/instant		(d) Total gaming (add
Ψ						
л			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
evenu			(a) Bingo	bingo/progressive bingo	(c) Other gaming	
Revenue	1	Gross revenue		bingo/progressive bingo	(c) Other gaming	
Revenu	1	Gross revenue		bingo/progressive bingo	(c) Other gaming	
	1			bingo/progressive bingo	(c) Other gaming	
		Gross revenue		bingo/progressive bingo	(c) Other gaming	
	2	Cash prizes		bingo/progressive bingo	(c) Other gaming	
				bingo/progressive bingo	(c) Other gaming	
	2 3	Cash prizes		bingo/progressive bingo	(c) Other gaming	
Direct Expenses Revenu	2	Cash prizes	(a) piliĝo	bingo/progressive bingo	(c) Other gaming	
	2 3 4	Cash prizes		bingo/progressive bingo	(c) Other gaming	
	2 3	Cash prizes				
	2 3 4 5	Cash prizes	%	%	%	
	2 3 4	Cash prizes				
	2 3 4 5	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor	% Yes%	%	%	
	2 3 4 5	Cash prizes	% Yes%	%	%	
	2 3 4 5 6 7	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines	Yes% No 2 through 5 in column (d)	□ Yes% □ No	☐ Yes% ☐ No	
	2 3 4 5	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor	Yes% No 2 through 5 in column (d)	□ Yes% □ No	☐ Yes% ☐ No	
	2 3 4 5 6 7 8	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines Net gaming income summary. Subtr	Yes % No %	Yes % No %	☐ Yes% ☐ No	
	2 3 4 5 6 7 8 8	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines Net gaming income summary. Subtr ter the state(s) in which the organizati	Yes % No %	Yes % No % inn (d)	□ Yes% □ No	col. (a) through col. (c))
Direct Expenses	2 3 4 5 6 7 8 8 En Ist	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines Net gaming income summary. Subtr ter the state(s) in which the organizati the organization licensed to conduct g	Yes % No %	Yes % No % inn (d)	☐ Yes% ☐ No	col. (a) through col. (c))
6 Direct Expenses	2 3 4 5 6 7 8 8 En Ist	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Other direct expenses Volunteer labor Direct expense summary. Add lines Net gaming income summary. Subtr ter the state(s) in which the organizati the organization licensed to conduct g	Yes % No %	Yes % No % ies:	□ Yes% □ No	col. (a) through col. (c))
Direct Expenses	2 3 4 5 6 7 8 8 En Ist	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Other direct expenses Volunteer labor Direct expense summary. Add lines Net gaming income summary. Subtr ter the state(s) in which the organizati the organization licensed to conduct g	Yes % No %	Yes % No % ies:	□ Yes% □ No	col. (a) through col. (c))
Direct Expenses	2 3 4 5 6 7 8 En Ist If"	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines Direct expense summary. Add lines Net gaming income summary. Subtr ter the state(s) in which the organizati the organization licensed to conduct g No," explain:	Yes % No %	Yes % No % in (d) ies:	<pre> Yes% No No</pre>	col. (a) through col. (c))
g b Clirect Expenses	2 3 4 5 6 7 8 En Is 1 If "	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines Direct expense summary. Add lines Net gaming income summary. Subtr ter the state(s) in which the organizati the organization licensed to conduct g No," explain:	Yes % No %	Yes % No % in (d) ies:	<pre> Yes% No No</pre>	col. (a) through col. (c))
g b Clirect Expenses	2 3 4 5 6 7 8 En Is 1 If "	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines Direct expense summary. Add lines Net gaming income summary. Subtr ter the state(s) in which the organizati the organization licensed to conduct g No," explain:	Yes % No %	Yes % No % in (d) ies:	<pre> Yes% No No</pre>	Yes No

SCHEDULE O (Form 990 or 990-EZ)

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

Department of the Treasury Internal Revenue Service Name of the organization Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ. ► Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047
2018
Open to Public
Inspection
Employer identification number

86-0505318

Tucson Girls Chorus Association Inc

01. Form 990 governing body review (Part VI, line 11)

The draft 990 will be reviewed and reconciled to the general ledger by the finance

committee. Once the draft is approved by finance committee it will be presented to the

board for review and questions and approved at our regular monthly meeting.

02. Conflict of interest policy compliance (Part VI, line 12c)

The conflict of interest statement is reviewed at one board meeting each year. All board

members and the director complete the conflict of interest questionnaire at this board

meeting.

03. CEO, executive director, top management comp (Part VI, line 15a)

A committee of board members periodically reviews compensation for directors, executive

directors and artistic directors for other similar organizations, using information

available on Guidestar, and adjusting for regional differences. In between these periodic

reviews, compensation is adjusted for changes in responsiblity and cost of living.

04. Form 990 availability to public (Part VI, line 18)

The Form 990 is available to the public on Guidestar and upon request.

05. Governing documents, etc, available to public (Part VI, line 19)

All board policies, reports, and minutes are available upon request at the main office.

They are maintained in an online document sharing program.

06. List of other fees for services expenses (Part IX, line 11g)

Other fees for service include conductors, accompanists, and camp staff.

Part III Line 4a – Statement of Program Accomplishments:

In the past year, we have increased participation in our 2 engagement choirs at Title 1 schools serving 73 young women in low-income communities. We expanded our footprint by launching a satellite location in the Northwest side of our city offering programming for young women grades k-6. During the 2019 (January-December) the TGC served 248 singers through weekly programming and 4886 in outreach programs (includes informational sessions/open rehearsals, in-classroom services, choral festivals, community events, and summer camp). The modest cost of the engagement program tuition opens the opportunity for all girls to participate in the TGC, girls from the main location sing next to and build relationships with girls from underserved areas, eliminating racial and financial barriers, cultivating compassion and community. Classroom support and free of charge professional development for teachers is part of our outreach services. In 2019 (Spring and Fall) we supported 2435 students in 45 schools.

In August 2019, we held our annual Choral Music Reading Session (a workshop to provide repertoire and programming resources) for 24 music educators.

We offered our annual Children's Choral Festival and Young Women's Choral festival successfully providing a high-quality musical opportunity 86 young singers. These festivals came to be as a direct result of requests from Tucson music teachers.

New partnerships with established organizations such as the Tucson Symphony Orchestra and the University of Arizona's Choral Department enabled the TGC to leverage capital and provide bigger impact both through performance opportunities and diverse services in the community.

In addition to carefully tracking data, holding regular staff meetings to evaluate and implement programs, and supervising all engagement program conductors, the TGC conducts a survey for all parents to gain insight on the actual impact our organization delivers. In 2019 out of 247 respondents, 83% reported an increase in self-confidence, 78% noticed an increase in their daughters a sense of responsibility, and 93% expressed that their daughter made new social connections within the program. In July 2019 our Director was awarded Choral Director of the Year by the state chapter of the American Choral Directors Association.