## **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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



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

AF	For th	e 2019 calendar year, or tax year beginning $ { m JUL}1,2019$ and endi	ling JU	JN 30, 2020	
Ba	Check if pplicab	e: C Name of organization		D Employer identific	ation number
	Addre	AMERICAN COMPOSERS FORUM			
	Name chang			23-745268	38
	Initial		m/suite	E Telephone number	
	Final returr			(651) 228	
	termi ated			<b>G</b> Gross receipts \$	2,920,342.
	Amer returr	SI. PAUL, MN 55102		H(a) Is this a group re	turn
	Appli tion	F Name and address of principal officer: VANESSA ROSE-FRIDEMOR	RE	for subordinates	? Yes X No
	pendi	SAME AS C ABOVE		<b>H(b)</b> Are all subordinates in	cluded? Yes No
		empt status: 🗴 501(c)(3) 🗌 501(c) ( )◀ (insert no.) 🗌 4947(a)(1) or 🤇	527	If "No," attach a	list. (see instructions)
		te: WWW.COMPOSERSFORUM.ORG		H(c) Group exemption	
			L Year of	formation: 1976 N	State of legal domicile: MN
Pa	art I	Summary			
Activities & Governance	1	Briefly describe the organization's mission or most significant activities: $\underline{TO}$ SUPE MUSIC CREATORS.	PORT	AND ADVOCAT	'E FOR
nar	2	Check this box      if the organization discontinued its operations or disposed o	of more tl	nan 25% of its net ass	ets.
Nel	3	Number of voting members of the governing body (Part VI, line 1a)	3	29	
ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)		28	
8 8	5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)		12	
/itie	6	Total number of volunteers (estimate if necessary)			40
cti	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			0.
_ <	b	Net unrelated business taxable income from Form 990-T, line 39	<u></u>	7b	0.
				Prior Year	Current Year
¢	8	Contributions and grants (Part VIII, line 1h)		605,244.	1,462,137.
nue	9	Program service revenue (Part VIII, line 2g)		188,078.	234,330.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		300,171.	279,160.
Œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,093,493.	1,975,627.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		246,500.	235,353.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		746,069.	784,995.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
ğ	b	Total fundraising expenses (Part IX, column (D), line 25)  237, 145.		<u> </u>	
ш	1 "			611,401.	600,338.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,603,970.	1,620,686.
	19	Revenue less expenses. Subtract line 18 from line 12		-510,477.	354,941.
S OL			Begi	inning of Current Year	End of Year
Net Assets or	20	Total assets (Part X, line 16)		9,045,174.	9,452,588.
et A:	21	Total liabilities (Part X, line 26)		541,652.	635,753.
		Net assets or fund balances. Subtract line 21 from line 20		8,503,522.	8,816,835.
_	art II				
Und	er pen	alties of perjury, I declare that I have examined this return, including accompanying schedules and	i statemen	ts, 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.

Sign Here	Signature of officer VANESSA ROSE-PRIDEMORE Type or print name and title	, PRESIDENT & CEO	Date						
		Preparer's signature NEAL EVERT	Date Check PTIN 02/04/21 self-employed P00046853						
Preparer	Firm's name CARPENTER, EVERT		Firm's EIN ▶ 41-1534805						
Use Only	Firm's address 7760 FRANCE AVE	S, SUITE 940							
	BLOOMINGTON, MN	55435	Phone no. (952) 831-0085						
May the II	May the IRS discuss this return with the preparer shown above? (see instructions)								
932001 01-2	B32001 01-20-20 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2019)								

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	990 (2019) AMERICAN COMPOSERS FORUM t III Statement of Program Service Accomplishments	23-7452688	Page
			X
1	Check if Schedule O contains a response or note to any line in this Part III		[A
•	Briefly describe the organization's mission: AMERICAN COMPOSERS FORUM (ACF) SUPPORTS AND ADVOCATES FOR		
	CREATORS BY DEMONSTRATING THE VITALITY AND RELEVANCE OF T		6
	CONNECT ARTISTS WITH COLLABORATORS, ORGANIZATIONS, AUDIEN		
	RESOURCES. THROUGH STORYTELLING, PUBLICATIONS, RECORDINGS	S, HOSTED	
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	XNo
	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	XNo
	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 r	measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	s, the total expenses, ar	nd
	revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$1,145,651. including grants of \$235,353. ) (Revenue of \$235,353. )	ue\$ <u>327,</u>	055.
	ARTIST SUPPORT: ACF PROVIDES RESOURCES AND SUPPORT TO MUS	SIC CREATORS	
	FOR MULTIPLE POINTS IN THEIR CREATIVE LIVES. THROUGH COM	MISSIONS,	
	FELLOWSHIPS, AND SERVICES, ACF PROVIDES FINANCIAL SUPPORT	r, MENTORSHI	Ρ,
	CAREER DEVELOPMENT, AND COMMUNITY FOR MUSICAL ARTISTS. GI		
	SEED MONEY FOR THE DEVELOPMENT OF NEW WORK, UNRESTRICTED		
	MID-CAREER ARTISTS, AND COMMISSION SUPPORT FOR A ROTATING		ACH
	YEAR.		
	MEDIA: ACF IS THE HOME OF INNOVA RECORDINGS, A MUSIC LAN	BEL THAT	
	RELEASES 20+ TITLES EACH YEAR REPRESENTING A DIVERSE MIX		
	LIVING ARTISTS. DISTRIBUTED THROUGH NAXOS USA, THE CATA		
	OVER 650 TITLES AND IS FREQUENTLY FEATURED ON LEADING DIC		RMS
	SUCH AS ITUNES, APPLE MUSIC AND SPOTIFY. IMPORTANT TO THE		
4b	· · · · · · · · · · · · · · · · · · ·	ue\$	-
4c	(Code: ) (Expenses \$ including grants of \$ ) (Revenue	ie \$	
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ including grants of \$ ) (Revenue \$	)	
4e	Total program service expenses ► 1,145,651.	/	
		Form 9	<b>90</b> (2019
32002	SEE SCHEDULE O FOR CONTINUATION (S	)	
02002	•	/	
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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
_	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	-		v
e	similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	6		x
7	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		x
8	the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes." <i>complete</i>			
0	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			<u> </u>
5	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in 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, VII, 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		X
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		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	<u> </u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	<u> </u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes, " complete			
	Schedule D, Parts XI and XII	12a	X	├───
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			77
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> </u>
Ø	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			
		14b		x
15	or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
10	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	10		<u> </u>
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
-	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		x
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	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	L
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	- Continaca/		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		162	No
22	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
20	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		x
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	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		x
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		
25a	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		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
_	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
~~	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
-	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>	28a		x
h	"Yes," complete Schedule L, Part IV A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	20a 28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If	200		<u> </u>
•	"Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		x
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
00	and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i>	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	х	
Pa	Note: All Form 990 filers are required to complete Schedule O           Tt V         Statements Regarding Other IRS Filings and Tax Compliance	30	21	I
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
12	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 86		.03	
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
c				
5	(gambling) winnings to prize winners?	1c	х	
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Form	990 (2019)         AMERICAN COMPOSERS FORUM         23-7452	688	Р	<sub>age</sub> 5	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)				
			Yes	No	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return 2a 12				
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X		
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)				
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a				
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X	
b	If "Yes," enter the name of the foreign country				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X	
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X	
	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).	_		v	
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b			
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	_		v	
	to file Form 8282?	7c		X	
	If "Yes," indicate the number of Forms 8282 filed during the year 7d	_		v	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X X	
t	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f 7g			
g					
-	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?				
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the	8			
0	sponsoring organization have excess business holdings at any time during the year?	0			
9		9a			
a b		9b			
10	Section 501(c)(7) organizations. Enter:	30			
	Initiation fees and capital contributions included on Part VIII, line 12 10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b				
11	Section 501(c)(12) organizations. Enter:				
a	Gross income from members or shareholders				
b	Gross income from other sources (Do not net amounts due or paid to other sources against				
~	amounts due or received from them.)				
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.				
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		X	
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on 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	
	If "Yes," see instructions and file Form 4720, Schedule N.				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X	
	If "Yes," complete Form 4720, Schedule O.				

Form **990** (2019)

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Form 990 (	2019)
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#### AMERICAN COMPOSERS FORUM

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

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

		1 1		<b>~</b> ~ <sup>1</sup>		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		29			
	If there are material differences in voting rights among members of the governing body, or if the governing						
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.						
b	Enter the number of voting members included on line 1a, above, who are independent	1b		28			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	o with an	y other				
	officer, director, trustee, or key employee?				2		X
3	Did the organization delegate control over management duties customarily performed by or under the	e direct s	supervision				
	of officers, directors, trustees, or key employees to a management company or other person?				3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 9	90 was <sup>-</sup>	iled?		4		X X
5	Did the organization become aware during the year of a significant diversion of the organization's ass	ets?			5		Х
6	Did the organization have members or stockholders?				6	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	point or	e 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, st			ſ			
	persons other than the governing body?				7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the yea						
а	The governing body?	-	-		8a	X	
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 read						
Ŭ	organization's mailing address? If "Yes," provide the names and addresses on Schedule O				9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re			<u></u>	<u> </u>		
	tion B. Ponoicos (This Section B requests information about policies not required by the internal Re	venue C	ode.)			Vee	No
10-	Did the exercitive have lead charters brenches as efficience?			ſ	10-	Yes	No X
	Did the organization have local chapters, branches, or affiliates?				10a		
D	If "Yes," did the organization have written policies and procedures governing the activities of such ch				401		
			····	F	10b	v	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body	y before	filing the fo	rm?	11a	X	
	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	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise				12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	′es," des	cribe				
	in Schedule O how this was done			r	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	X	
15	Did the process for determining compensation of the following persons include a review and approva	l by inde	pendent				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?						
а	The organization's CEO, Executive Director, or top management official				15a	Х	
	Other officers or key employees of the organization				15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangen	nent with	na				
	taxable entity during the year?				16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat						
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	-	-				
	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 $\blacktriangleright$ MN						
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024 A, if applicable), 990, ar	nd 990-T	(Section 5	01(c)(3)s	only)	availal	hle
10	for public inspection. Indicate how you made these available. Check all that apply.	10 000 1	000000000	51(0)(0)5	only)	avana	
		an Cab					
19	▲       Own website       ▲       Upon request       Other (explain Describe on Schedule O whether (and if so, how) the organization made its governing documents, co		,	licy and	financ	ial	
13			interest poi	icy, and	man	nai	
	statements available to the public during the tax year.						
	State the name, address, and telephone number of the person who possesses the organization's boo PAUL HANSON $-(651)$ 228 $-1407$	oks and I	ecords	•			
20							
20	75 FIFTH STREET WEST, #522, ST. PAUL, MN 55102					990	

Form 990 (	2019)
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Part VII	Со	mpensation of Officers,	Directors, Truste	es, Key Employees	, Highest Compensated
	Em	ployees, and Independe	ent 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.

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

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

Name and title         Average hours per weak iteration and international international international international international international form international international international form international international form international international form internatinternational form internatinternational form interna	(A)	(B)	l	i ii Lu		C)	1001	out	(D)	(E)	(F)
hours per week (list any neuron and a metal-and organizations)         bounds persons is out any income and a metal-and organizations         compensation from the organizations         compensation from (W2/1099-MISC)         another organizations           (1) ANNE LEBARON         0.50         X         X         0.         0.         0.           (1) ANNE LEBARON         0.50         X         X         X         0.         0.         0.           (1) ANNE LEBARON         0.50         X         X         X         0.         0.         0.           (1) ANNE LEBARON         0.50         X         X         X         0.         0.         0.           (1) DEBOGARI FERMEN         0.50         X         X         X         0.         0.         0.           (1) DEBOGARI FERMEN         0.50         X         X         0.         0.         0.           (2) JELF GRAVES         0.50         X         X         0.         0.         0.           (3) VIVIAN FUNG         0.50         X         X         0.         0.         0.           (4) DEBOGARI FERMEN         X         X         0.         0.         0.         0.           PAST CHAIR         X         X <t< td=""><td></td><td></td><td>( - 1 -</td><td></td><td>Pos</td><td>itior</td><td></td><td></td><td></td><td></td><td></td></t<>			( - 1 -		Pos	itior					
Week (ist ary hours for leaded organizations below line)         Image and and related organizations (W2/1099-MISC)         Image and (W2/1099-MISC)         Image (W2/1099-MISC)         Image and (W2/1099-MISC)         Image and (W2/109-MISC)         Image and (W2/109-MISC)         Image and (W2/109-MISC)         Image and (W2/109-MISC)         Image and (W2/109-MISC)         Image and (W2/109-MISC)            Image and (W2/109-MISC) <th< td=""><td></td><td></td><td colspan="4">box, unless person is both an</td><td>s both</td><td>n an</td><td></td><td></td><td></td></th<>			box, unless person is both an				s both	n an			
(1) ANNE LEBARON         0.50         x		week		cer an	ıd a d	irecto	r/trus T	tee)	from	from related	other
(1) ANNE LEBARON         0.50         x			ector							U U	
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(8) JEFF CADWELL         0.50         X         0.	(7) ISAAC THOMPSON	0.50									
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(9)         LUCY DHEGRAE         0.50         X         0.	(8) JEFF CADWELL	0.50									
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DIRECTOR         X         0         0. <th< td=""><td>DIRECTOR</td><td></td><td>Х</td><td></td><td></td><td></td><td></td><td></td><td>0.</td><td>0.</td><td>0.</td></th<>	DIRECTOR		Х						0.	0.	0.
(11) GAO HONG       0.50       X       0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.	(10) LAURA KELLY JOHNSTON	0.50									
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DIRECTOR       X       0.       0.       0.       0.         (13) SCOTT LEGERE       0.50       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.         (14) MARY KOUYOUMDJIAN       0.50       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.         (15) LUTHER RANHEIM       0.50       X       0.       0.       0.         DIRECTOR       X       0.50       0.       0.       0.         (16) JANIS LANE-EWART       0.50       0.       0.       0.       0.         DIRECTOR       X       0.50       0.       0.       0.       0.         DIRECTOR       X       0.50       0.       0.       0.       0.         DIRECTOR       X       0.50       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.			Х						0.	0.	0.
(13) SCOTT LEGERE       0.50       X       0.0       0.0       0.0         DIRECTOR       X       0.50       0.0       0.0       0.0         (14) MARY KOUYOUMDJIAN       0.50       X       0.0       0.0       0.0         DIRECTOR       X       0.50       0.0       0.0       0.0         (15) LUTHER RANHEIM       0.50       0.0       0.0       0.0         DIRECTOR       X       0.0       0.0       0.0         (16) JANIS LANE-EWART       0.50       0.0       0.0       0.0         DIRECTOR       X       0.00       0.0       0.0         (17) SARAH LUTMAN       0.50       X       0.0       0.0         DIRECTOR       X       0.0       0.0       0.0	(12) KATHRINE HANDFORD	0.50									
DIRECTOR       X       0.       0.       0.       0.         (14) MARY KOUYOUMDJIAN       0.50       X       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         DIRECTOR       X       0.50       X       0.       0.       0.       0.         (15) LUTHER RANHEIM       0.50       X       0.       0.       0.       0.         DIRECTOR       X       0.50       X       0.       0.       0.         (16) JANIS LANE-EWART       0.50       X       0.       0.       0.         DIRECTOR       X       0.50       X       0.       0.       0.         DIRECTOR       X       0.50       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.			Х						0.	0.	0.
(14) MARY KOUYOUMDJIAN       0.50       X       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.         (15) LUTHER RANHEIM       0.50       X       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.         (16) JANIS LANE-EWART       0.50       X       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.         UIRECTOR       X       0.50       0.       0.       0.       0.         DIRECTOR       X       0.50       0.       0.       0.       0.         UTHECTOR       X       0.50       0.       0.       0.       0.	(13) SCOTT LEGERE	0.50									
DIRECTOR         X         0. <t< td=""><td></td><td></td><td>Х</td><td></td><td></td><td></td><td></td><td></td><td>0.</td><td>0.</td><td>0.</td></t<>			Х						0.	0.	0.
(15) LUTHER RANHEIM       0.50       X       0.       0.       0.       0.         DIRECTOR       X       0.50       0.       0.       0.       0.       0.         (16) JANIS LANE-EWART       0.50       X       0.       0.       0.       0.         DIRECTOR       X       0.50       0.       0.       0.       0.       0.         (17) SARAH LUTMAN       0.50       X       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.	(14) MARY KOUYOUMDJIAN	0.50									
DIRECTOR         X         0. <t< td=""><td>DIRECTOR</td><td></td><td>Х</td><td></td><td></td><td></td><td></td><td></td><td>0.</td><td>0.</td><td>0.</td></t<>	DIRECTOR		Х						0.	0.	0.
(16) JANIS LANE-EWART       0.50       X       0.       0.       0.         DIRECTOR       X       0.50       0.       0.       0.       0.       0.         (17) SARAH LUTMAN       0.50       X       0.       0.       0.       0.       0.         DIRECTOR       X       0.       0.       0.       0.       0.       0.	(15) LUTHER RANHEIM	0.50									
DIRECTOR         X         0. <t< td=""><td></td><td></td><td>Х</td><td></td><td></td><td></td><td></td><td></td><td>0.</td><td>0.</td><td>0.</td></t<>			Х						0.	0.	0.
(17) SARAH LUTMAN         0.50         X         0.	(16) JANIS LANE-EWART	0.50									
DIRECTOR X 0. 0. 0.			Х						0.	0.	0.
	(17) SARAH LUTMAN	0.50									_
	DIRECTOR		Х						0.	0.	0. Form <b>990</b> (2019)

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932007 01-20-20

2019.05040 AMERICAN COMPOSERS FORUM 101035\_1

Form 990 (2019) AMERICAN	COMPOSE	IRS	F	'OF	RΩW	1			23-745	5268	8 Р	'age <b>8</b>
Part VII Section A. Officers, Directors, Trust	tees, Key Emp	oloy	ees,	and	d Hig	ghes	t C	ompensated Employee	s (continued)			
(A)	(B)				C)	•		(D)	(E)		(F)	
Name and title	Average			Pos	sition			Reportable	Reportable		Estimate	ed
	hours per					than c is both		compensation	compensation		amount	
	week					or/trust		from	from related		other	
	(list any	ctor						the	organizations	c	ompensa	
	hours for	direc				p		organization	(W-2/1099-MISC)		from th	ne
	related	ee or	Istee			nsate		(W-2/1099-MISC)			organizat	tion
	organizations	trust	al tru		yee	om pe					and relat	ted
	below	Individual trustee or director	nstitutional trustee	ъ	mplc	est co oyee	er			c	organizati	ions
	line)	Indiv	Instit	Officer	Key employee	Highest compensated employee	Form					
(18) STEPHEN MILES	0.50											
DIRECTOR		x						0.	C	).		0.
(19) EVANS MIRAGEAS	0.50											
DIRECTOR		x						0.	C	).		0.
(20) FRED MOORE	0.50											
DIRECTOR		х						0.	C	).		0.
(21) REINALDO MOYA	0.50											-
DIRECTOR		x						0.	C	).		0.
(22) JOSEPH OHRT	0.50									-		•••
DIRECTOR		x						0.	C	).		0.
(23) GARRETT MCQUEEN	0.50									-		
DIRECTOR		x						0.	C	).		0.
(24) ANDREW PAULUS	0.50								-	-		•••
DIRECTOR		x						0.	C	).		0.
(25) NIRMALA RAJASEKAR	0.50									-		
DIRECTOR		x						0.	C	).		Ο.
(26) CAROL ANN CHEUNG	0.50									-		
DIRECTOR		x						0.	C	).		0.
1b Subtotal						-		0.		).		0.
c Total from continuation sheets to Part VI								178,594.		).	15,0	
								178,594.		).	15,0	
d Total (add lines 1b and 1c)								-		/ •	13,0	11.
2 Total number of individuals (including but no	ot limited to th	ose	liste	a ai	oove	e) wn	o re	eceived more than \$100,	JUU of reportable			1
compensation from the organization											Yes	<u>1</u> No
											Tes	NO
<b>3</b> Did the organization list any <b>former</b> officer,	-		•	•			Ŭ	• • •				v
line 1a? If "Yes," complete Schedule J for su										· 📙	3	X
4 For any individual listed on line 1a, is the su												37
and related organizations greater than \$150										卢	1	X
5 Did any person listed on line 1a receive or a									lual for services			
rendered to the organization? If "Yes," com	plete Schedule	e J fo	or su	ich .	pers	on .					5	X
Section B. Independent Contractors												
1 Complete this table for your five highest con	mpensated ind	lepe	nder	nt c	ontra	actor	s th	nat received more than \$	100,000 of comper	nsation	from	
the organization. Report compensation for t	he calendar ye	ear e	endin	ng w	/ith c	or wi	hin	the organization's tax ye	ear.			
(A)	addraaa			_				(B)	orviono		(C)	~
Name and business	address	NC	ONE	5			_	Description of s	ervices	Com	ipensatio	
							-					
							-					
		_										

 2
 Total number of independent contractors (including but not limited to those listed above) who received more than

 \$100,000 of compensation from the organization
 ●
 0

 SEE
 PART
 VII,
 SECTION
 A
 CONTINUATION
 SHEETS

Form 990 (2019)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Hijdert Compensate Employees (continued) (A) Name and the Average Average (context) (C) Position (concentration from related (congenization from related (congenization from related (congenization from related (congenization from related congenization from related (congenization from related congenization from related congenization from related (congenization from related congenization from related congenization from related congenization from related congenization from related from related congenization from rel		N COMPOSE	ERS	F	'OR	UM	[			23-745	2688
Name and title     Average box per werk (ltst any related organizations below in all below in al	Part VII Section A. Officers, Directors, T	rustees, Key Er	nplo	yee	s, a	nd H	ligh	est (	Compensated Employe	ees (continued)	
Hours week (gistary burstor burstor burstor regarization (%2/1098-MISC)         Compensation from related organizations (%2/1098-MISC)         anount of other compensation from related organizations (%2/1098-MISC)         anount of other compensation from related organizations (%2/1098-MISC)         anount of other compensation from related organizations           (27) STANFORD THOMESON         0.50 X         X         0         0.         0.         0.           (27) STANFORD THOMESON         0.50 X         X         0         0.         0.         0.           (27) STANFORD THOMESON         0.50 X         X         0         0.         0.         0.           (27) STANFORD THOMESON         0.50 X         X         107,671.         0.         4,332.           (28) STEPERIN USERY         0.50 X         X         107,071.         0.         4,332.           1018 FORCR         0.         0.         0.         0.         0.           PRETOR         X         X         107,071.         0.         4,332.           1018 FORCR         40.00         X         X         10,712.           Intercox         Intercox         Intercox         Intercox         Intercox         Intercox           Intercox         Intercox         Intercox         Intercox		(B)								(E)	(F)
per (lift any related organizations below below related organizations (W2/1099.MISC)         other organization (W2/1099.MISC)         other compensation (W2/1099.MISC)         other compensation (W2/1099.MISC)           (27) STANFORD THORESON DERECTOR         0.50         x         0         0.         0.         0.           (27) STANFORD THORESON DERECTOR         0.50         x         0         0.         0.         0.           (28) STEPHEN USERY         0.50         x         0         0.         0.         0.           (29) VARISEA ROSE - PRIDEMORE         60.00         x         x         107,671.         0.         4,332.           (29) VARISEA ROSE - PRIDEMORE         60.00         x         x         107,671.         0.         4,332.           (21) PAUE RANCON         40.00         x         x         70,923.         0.         10,712.	Name and title										
Week Include Difference         Week Include organization below Include Difference         Image of Difference         Image of Difference         Image of Difference <thimage difference<="" of="" th="">         Image of Difference</thimage>			(Cl	heck I	all :	that	app I	ly)			
Idia any related organizations below line         g g g g g g g g g g g g g g g g g g g							ee				
(27) STANFORD THOMPSON       0.50       x       0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.			ctor				nploy				
(27) STANFORD THOMPSON       0.50       x       0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.			or dire	Ð			ited ei		(W-2/1099-MISC)		
(27) STANFORD THOMPSON       0.50       x       0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.			Istee	truste		e	bensa				
(27) STANFORD THOMPSON       0.50       x       0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.			ual tri	tional		n ploye	tcom	_			organizations
(27) STANFORD THOMPSON       0.50       x       0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.			ndivid	nstitu	Officer	key en	Highes	-orme			
DIRECOR         X         0.         0.         0.         0.           (28) STEPHEN USERY         0.50         X         0.         0.         0.         0.           (28) STEPHEN USERY         0.50         X         0.         0.         0.         0.           (28) STEPHEN USERY         0.50         X         0.         0.         0.         0.           (30) MAPEUSZ TROICKI         0.50         X         X         0.         0.         0.           JERECOR         40.00         X         70,923.         0.         10,712.           Image: Color         X         70,923.         0.         10,712.           Image: Color         Image: Color         Image: Color         Image: Color         Image: Color           Image: Color	(27) STANFORD THOMPSON	0.50		_	-		-				
C28) STEPEREN USERY         0.50         x         0. <td>DIRECTOR</td> <td></td> <td>х</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>0.</td> <td>0.</td> <td>0.</td>	DIRECTOR		х						0.	0.	0.
DIRECTOR     X     0.     0.     0.     0.       (23) VANEUSA ROSE PRIDEMORE     60.00     x     x     107,671.     0.     4,332.       (30) MAREUSZ TROICKI     0.50     x     0.     0.     0.     0.       (31) FAUL HANSON     40.00     x     70,923.     0.     10,712.       (31) FAUL HANSON     40.00     10.00     10.00     10.00     10.00       (32) FAUL HANSON     40.00     10.00     10.00     10.00     10.00       (32) FAUL HANSON     (33) FAUL HANSON     (30) FAUL HANSON     (30) FAUL HANSON     (30) FAUL HANSON     (30) FAUL HANSON       (31) FAUL HANSON     (31	(28) STEPHEN USERY	0.50									
(29) VANESSA ROBE-PRIDEMORE       60.00       x       x       x       107,671.       0.       4,332.         (30) MATESSA ROBE-PRIDEMORE       0.50       x       x       0.       0.       0.         (31) FAUL HANSON       40.00       x       70,923.       0.       10,712.         (31) FAUL HANSON         (31) FAUL HANSON       (31) FAUL HANSON       (31) FAUL HANSON       (31) FAUL HANSON       (31) FAUL HANSON         (31) FAUL HANSON       (31) FAUL HANSON       (31) FAUL HANSON       (31) FAUL HANSON       (31) FAUL HANSON         (31) FAUL HANSON       (31) FA	DIRECTOR		х						0.	0.	0.
(30) MATEUSZ TROICKI     0.50     x     0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.	(29) VANESSA ROSE-PRIDEMORE	60.00									
(30) MATEUSZ TROICKI     0.50     x     0.     0.     0.       DIRECTOR     40.00     x     70,923.     0.     10,712.       VP OF FINANCE AND ADMINIST     x     70,923.     0.     10,712.	PRESIDENT & CEO		Х		Х				107,671.	0.	4,332.
(31) PAUL HANSON     40.00     x     70,923.     0.     10,712.	(30) MATEUSZ TROICKI	0.50									
VP OP PINANCE AND ADMINIST       X       70,923.       0.       10,712.         Image: Constraint of the second	DIRECTOR		Х						0.	0.	0.
		40.00									
Image: Constraint of the second se	VP OF FINANCE AND ADMINIST				Х				70,923.	0.	10,712.
Image: Section A, line 1c         178, 594.         15, 044.											
Image: Section A, line 1c       178, 594.       15, 044.											
Image: Constraint of the second sec											
Image: Section A, line 1c     178, 594.     15, 044.											
Image: Constraint of the sector A, line 1c     178,594.     15,044.			-								
Image: Construction of the section							-				
						-					
Total to Part VII, Section A, line 1c											
Total to Part VII, Section A, line 1c											
Total to Part VII, Section A, line 1c											
Image: Constraint of the section A, line 1c     178, 594.     15, 044.											
Total to Part VII, Section A, line 1c     178, 594.     15, 044.											
Total to Part VII, Section A, line 1c     178, 594.     15, 044.			-								
Total to Part VII, Section A, line 1c     178, 594.     15, 044.											
Total to Part VII, Section A, line 1c											
Total to Part VII, Section A, line 1c     178, 594.     15, 044.											
Total to Part VII, Section A, line 1c         178, 594.         15,044.			-								
Total to Part VII, Section A, line 1c         178, 594.         15,044.						-					
Total to Part VII, Section A, line 1c         178,594.         15,044.			1								
Total to Part VII, Section A, line 1c         178,594.         15,044.											
Total to Part VII, Section A, line 1c			1								
Total to Part VII, Section A, line 1c		I			1						
	Total to Part VII, Section A, line 1c								178,594.		15,044.

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Pa	rt V	/111									
			Check if Schedule O c	contains	s a respo	nse c	or note to any line	<u>e in this Part VIII</u> (A) Total revenue	<b>(B)</b> Related or exempt	<b>(C)</b> Unrelated	(D) Revenue excluded
									function revenue	business revenue	from tax under sections 512 - 514
ង ស	1	а	Federated campaigns		. 1a						
ran		b					84,032.				
Contributions, Gifts, Grants and Other Similar Amounts		с	Fundraising events		. 1c						
ar /		d	Related organizations		. 1d						
js, (			Government grants (contri				107,925.				
ero		f	All other contributions, gifts,				1 0-0 100				
de de de de de de de de de de de de de			similar amounts not included				1,270,180.				
ont		-	Noncash contributions included in I				51,052.	1,462,137.			
0 0		n	Total. Add lines 1a-1f				Business Code	1,402,137.			
•	2	а	PROGRAM SERVICE FEES	5			511140	234,330.	234,330.		
vice	2	a b		-				,			
Program Service Revenue		c									
		d									
2 B C C C C C C C C C C C C C C C C C C		е									
Ъ,		f	All other program service	revenue	·						
		g	Total. Add lines 2a-2f				►	234,330.			
	3		Investment income (includ	•							
			other similar amounts) $\dots$				🕨	186,435.			186,435.
	4		Income from investment o				· · ·				
	5		Royalties								
			<b>a</b>		(i) Real		(ii) Personal				
	6		Gross rents	6a 6b							
		b c	Less: rental expenses Rental income or (loss)	6c							
			Net rental income or (loss)	· · · ·							
	7		Gross amount from sales of		i) Securit		(ii) Other				
			assets other than inventory	7a 🗆	1,037,4	40.					
		b	Less: cost or other basis								
ne			and sales expenses	7b	944,7	/15.					
Revenue		с	Gain or (loss)	7c	92,7	25.					
Re			Net gain or (loss)				►	92,725.	92,725.		
Other	8	а	Gross income from fundraisir								
ō			including \$								
			contributions reported on	,							
		L.	Part IV, line 18			8a 8b					
			Less: direct expenses Net income or (loss) from t								
	q		Gross income from gamin		•		▶				
	Ŭ	u	Part IV, line 19			9a					
		b	Less: direct expenses			9b					
			Net income or (loss) from			s	►				
	10	а	Gross sales of inventory, l	ess retu	urns						
			and allowances			10a					
		b	Less: cost of goods sold			10b					
		С	Net income or (loss) from	sales of	invento	ry					
S							Business Code				
noa	11	а									
evenue		b				_					
Miscellaneous Revenue		C d				—					
Ë			All other revenue				•				
	12		Total. Add lines 11a-11d Total revenue. See instructio					1,975,627.	327,055.	0.	186,435.
93200							F	, ,			Form <b>990</b> (2019)

AMERICAN COMPOSERS FORUM

Form 990 (2019)

Page **9** 

23-7452688

AMERICAN COMPOSERS FORUM Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	t include amounts reported on lines 6b, , 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses
	rants and other assistance to domestic organizations nd domestic governments. See Part IV, line 21				
	arants and other assistance to domestic ndividuals. See Part IV, line 22	235,353.	235,353.		
0	arants and other assistance to foreign governments, and foreign				
	ndividuals. See Part IV, lines 15 and 16				
	enefits paid to or for members				
	compensation of current officers, directors,	107 671	60 074	10 704	27 002
	ustees, and key employees	107,671.	60,074.	19,704.	27,893
	ompensation not included above to disqualified				
	ersons (as defined under section 4958(f)(1)) and				
	ersons described in section 4958(c)(3)(B)	557,973.	311,317.	102,111.	144,545
	other salaries and wages	557,975.	511,517.	102,111.	144,545
	ension plan accruals and contributions (include				
	ection 401(k) and 403(b) employer contributions)	69,123.	38,566.	12,650.	17 907
	Other employee benefits	50,228.	28,024.	9,192.	<u>17,907</u> 13,012
	ayroll taxes ees for services (nonemployees):	J0,220.	20,024.	9,192.	15,012
	( , , ,				
	lanagement				
	rofessional fundraising services. See Part IV, line 17				
	hvestment management fees				
-	Other. (If line 11g amount exceeds 10% of line 25,	122,820.	65,989.	50,473.	6,358
	olumn (A) amount, list line 11g expenses on Sch 0.)	19,831.	2,100.	14,503.	3,228
	dvertising and promotion	12,286.	8,998.	500.	2,788
	Office expenses	29,232.	24,333.	2,221.	2,700
	nformation technology	29,232.	24,333.	4,441.	2,070
		62,009.	48,047.	6,330.	7,632
		68,786.	58,595.	5,910.	4,281
	ravel	00,700.		5,510.	4,201
	or any federal, state, or local public officials				
	Conferences, conventions, and meetings	28,774.	17,656.	8,148.	2,970
	· · ·	20,1140	±7,050•	0,140.	2,570
	ayments to affiliates				
	Depreciation, depletion, and amortization	8,537.	6,233.	1,045.	1,259
		5,602.	2,945.	2,657.	1,255
	ther expenses. Itemize expenses not covered	5,0021		2,007.	
at lir	here expenses, nemize expenses no covered bove (List miscellaneous expenses on line 24e. If ne 24e amount exceeds 10% of line 25, column (A) mount, list line 24e expenses on Schedule 0.)				
	RECORDING PRODUCTION	85,330.	85,330.		
	PANEL HONORARIUM	33,750.	33,750.		
	RIGHTS	31,640.	31,640.		
	PERFORMER FEES AND PER	26,442.	26,442.		
	Il other expenses	65,299.	60,259.	2,446.	2,594
	otal functional expenses. Add lines 1 through 24e	1,620,686.	1,145,651.	237,890.	237,145
	oint costs. Complete this line only if the organization				•
	eported in column (B) joint costs from a combined				
	ducational campaign and fundraising solicitation.				
	heck here b if following SOP 98-2 (ASC 958-720)				

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2019.05040 AMERICAN COMPOSERS FORUM 101035\_1

Form 990 (2019)

Total liabilities. Add lines 17 through 25

and complete lines 27, 28, 32, and 33.

and complete lines 29 through 33.

Total liabilities and net assets/fund balances

#### controlled entity or family member of any of these persons 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 29,338. Notes and loans receivable, net 7 64,845. Inventories for sale or use 8 6,627. Prepaid expenses and deferred charges 9 **10a** Land, buildings, and equipment: cost or other \_\_\_\_\_<u>10</u>a 135,311. basis. Complete Part VI of Schedule D 126,202. 13,808. b Less: accumulated depreciation 10b 10c 8,205,421. 8,720,028. Investments - publicly traded securities 11 Investments - other securities. See Part IV, line 11 12 Investments - program-related. See Part IV, line 11 13 Intangible assets 14 Other assets. See Part IV, line 11 15 9,045,174. 9,452,588. 16 **Total assets.** Add lines 1 through 15 (must equal line 33) 57,647. Accounts payable and accrued expenses 17 233,599. 18 Grants payable 19 Deferred revenue Tax-exempt bond liabilities 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% 22 controlled entity or family member of any of these persons Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties

AMERICAN COMPOSERS FORUM eet Check if Schedule O contains a response or note to any line in this Part X

Cash - non-interest-bearing

Savings and temporary cash investments

Pledges and grants receivable, net

Accounts receivable, net

Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X

Organizations that follow FASB ASC 958, check here  $\blacktriangleright$   $\overline{X}$ 

of Schedule D

Net assets without donor restrictions

Net assets with donor restrictions

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building, or equipment fund

Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

Organizations that do not follow FASB ASC 958, check here

(B)

345,628.

211,103.

583,567.

8,069.

11,972.

66,095.

11,624.

9,109.

24,929.

200,825.

132,421.

277,578.

635,753.

1,317,909.

7,498,926.

End of year

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(A) Beginning of year

124,112.

73,402.

9,331.

3,683.

1

2

3

4

9,452,588. Form 990 (2019)

8,816,835.

250,406.

541,652.

1,346,287.

7,157,235.

8,503,522.

9,045,174.

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#### Loans and other receivables from any current or former officer, director, 5 trustee, key employee, creator or founder, substantial contributor, or 35%

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Liabilities

Net Assets or Fund Balances

Assets

Form 990 (	
Part X	Balance Sh

Form	990 (2019) AMERICAN COMPOSERS FORUM	23-745	2688	Pag	<sub>je</sub> 12
Pa	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>	<u></u>		
1	Total revenue (must equal Part VIII, column (A), line 12)		1,975		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,620		
3	Revenue less expenses. Subtract line 2 from line 1	3	354		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))		<u>8,503</u>		
5	Net unrealized gains (losses) on investments	5	-41	,62	<u> 28 -</u>
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	8,816	, 83	35.
Pa	t 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 C	).			
2a			2a		
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed of	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis			37	
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:				
	X 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			<b>.</b>	
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Scher				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing	le Audit			v
	Act and OMB Circular A-133?		3a		<u>X</u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2019)

932012 01-20-20

SCH	IED	ULE	Α
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Department of the Treasury Internal Revenue Service

(Form	990	or	990-	EZ)
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# **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047
2019
Open to Public Inspection

Name of the o	organization
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Nam	le or	the organization 入Mでつ	TCAN COMPOS	CEDC FODIM					3-7452688	
Ра	rt I	Beason for Public (	Charity Status	OSERS FORUM (All organizations must complete this part.) See instruction				<u>ک</u>	J-74J2000	-
								•		-
1 <b>1</b>	ligan	ization is not a private found					()( A )(i)			
2		A church, convention of ch					I)(A)(I)-			
2		A school described in <b>sect</b> A hospital or a cooperative					::)			
3 1		A medical research organiz						(iiii) Enter	the hospital's name	
4		city, and state:	ation operated in cor	ijunction with a nospital	uescribeu	III Sectio			the hospital s hame,	
5		An organization operated for	or the benefit of a col	leae or university owned	l or operat	ed by a do	vernmental ur	nit describe	ad in	-
5		section 170(b)(1)(A)(iv). (C		lege of university owned		cu by a go	verninental u			
6		A federal, state, or local gov		ontal unit described in	soction 17	70(b)(1)(A)	(v)			
	X	An organization that norma	-					e general r	public described in	
'		section 170(b)(1)(A)(vi). (C			on a gove	minenta		e general j		
8		A community trust describe		1)(A)(vi) (Complete Par	+ 11 )					
9		An agricultural research org				ad in coniu	inction with a	land-arant	college	
5		or university or a non-land-g								
		university:	fram boliege of agric			iame, ony	, and state of	the conege		
10		An organization that norma	lly receives: (1) more	than 33 1/3% of its sup	oort from c	ontributio	ns, membersh	nip fees, an	d aross receipts from	-
		activities related to its exem								
		income and unrelated busir								
		See section 509(a)(2). (Co					, ,			
11		An organization organized a	-	vely to test for public sat	fety. See	section 50	09(a)(4).			
12		An organization organized a	and operated exclusi	vely for the benefit of, to	perform tl	he functio	ns of, or to ca	rry out the	purposes of one or	
		more publicly supported or	ganizations describe	d in section 509(a)(1) o	r section	509(a)(2).	See section 5	509(a)(3).	Check the box in	
		lines 12a through 12d that	describes the type of	f supporting organizatior	n and com	plete lines	12e, 12f, and	12g.		
а		<b>Type I.</b> A supporting orga	anization operated, su	upervised, or controlled	by its supp	ported org	anization(s), ty	pically by	giving	
		the supported organization	on(s) the power to reg	gularly appoint or elect a	majority o	f the direc	tors or trustee	es of the su	Ipporting	
		organization. You must o	complete Part IV, Se	ections A and B.						
b		<b>Type II.</b> A supporting org	anization supervised	or controlled in connect	tion with its	s supporte	ed organization	n(s), by hav	ving	
		control or management o	f the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or manaç	ge the supp	ported	
	_	organization(s). You mus	t complete Part IV,	Sections A and C.						
С		<b>Type III functionally inte</b>	grated. A supporting	g organization operated	in connect	ion with, a	and functional	ly integrate	d with,	
	_	its supported organization	n(s) (see instructions)	. You must complete I	Part IV, Se	ctions A,	D, and E.			
d		Type III non-functionally	integrated. A supp	orting organization oper	ated in cor	nnection w	vith its suppor	ted organiz	zation(s)	
		that is not functionally int		• •	•		-	an attentiv	/eness	
		requirement (see instructi								
е		Check this box if the orga					Туре I, Туре I	I, Type III		
_		functionally integrated, or		nally integrated supporting	ng organiz	ation.			[	-
f		er the number of supported o	•							-
g		vide the following informatior (i) Name of supported	i about the supporte (ii) EIN	d organization(s). (iii) Type of organization	(iv) Is the orga	inization listed	(v) Amount of	monetary	(vi) Amount of other	-
		organization		(described on lines 1-10	in your governi Yes	ng document? No	support (see in	-	support (see instructions)	
				above (see instructions))	103					-
										-
										-
										-
Tota										

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 932021 09-25-19 Schedule A (Form 990 or 990-EZ) 2019 20

#### Schedule A (Form 990 or 990-EZ) 2019 AMERICAN COMPOSERS FORUM Part II

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Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	Section A. Public Support							
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	<b>(e)</b> 2019	<b>(f)</b> Total	
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")	1259571.	999,586.	1276738.	605,244.	1462137.	5603276.	
2	Tax revenues levied for the organ-							
	ization's benefit and either paid to							
	or expended on its behalf							
3	The value of services or facilities							
	furnished by a governmental unit to							
	the organization without charge							
4	Total. Add lines 1 through 3	1259571.	999,586.	1276738.	605,244.	1462137.	5603276.	
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)						1955678.	
	Public support. Subtract line 5 from line 4.						3647598.	
Sec	ction B. Total Support							
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	<b>(e)</b> 2019	(f) Total	
7	Amounts from line 4	1259571.	999,586.	1276738.	605,244.	1462137.	5603276.	
8	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties,							
	and income from similar sources $\dots$			316,130.	183,595.	279,160.	778,885.	
9	Net income from unrelated business							
	activities, whether or not the							
	business is regularly carried on							
10	Other income. Do not include gain							
	or loss from the sale of capital							
	assets (Explain in Part VI.)							
11	Total support. Add lines 7 through 10						6382161.	
12	Gross receipts from related activities,	etc. (see instructio	ons)			12	598,000.	
13	First five years. If the Form 990 is for	r the organization's	first, second, thire	d, fourth, or fifth ta	x year as a sectior	n 501(c)(3)		
_	organization, check this box and stop							
Sec	ction C. Computation of Publi	c Support Per	centage			r		
	Public support percentage for 2019 (I		-			14	57.15 %	
	Public support percentage from 2018					15	57.86 %	
16a	33 1/3% support test - 2019. If the o	organization did no	t check the box or	n line 13, and line <sup>-</sup>	14 is 33 1/3% or m	ore, check this boy		
	stop here. The organization qualifies		•					
b	33 1/3% support test - 2018. If the o							
	and <b>stop here.</b> The organization qual							
17a	10% -facts-and-circumstances test	- 2019. If the org	anization did not c	check a box on line	e 13, 16a, or 16b, a	and line 14 is 10% o	or more,	
	and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization							
	meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization							
b	10% -facts-and-circumstances test	- 2018. If the org	anization did not c	check a box on line	e 13, 16a, 16b, or 1	7a, and line 15 is <sup>-</sup>	10% or	
	more, and if the organization meets the	ne "facts-and-circur	mstances" test, ch	eck this box and	stop here. Explair	n in Part VI how the	)	
	organization meets the "facts-and-circ	cumstances" test.	The organization q	ualifies as a public	ly supported organ	nization		
18	Private foundation. If the organization	on did not check a	box on line 13, 16a	a, 16b, 17a, or 17b	, check this box a	nd see instructions		
					Sche	dule A (Form 990	or 990-EZ) 2019	

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# Schedule A (Form 990 or 990-EZ) 2019 AMERICAN COMPOSERS FORUM Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) 🕨	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
in a second s						
4 Tax revenues levied for the organ- ization's benefit and either paid to						
5 The value of services or facilities						
furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and						
3 received from disqualified persons <b>b</b> Amounts included on lines 2 and 3 received						
from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
<b>c</b> Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						
Section B. Total Support	·					
Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9 Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
<b>b</b> Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
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.)						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is fo	r the organization's	s first, second, thi	rd, fourth, or fifth t	tax year as a sectio	n 501(c)(3) organiz	ation,
check this box and <b>stop here</b>	-			-		
Section C. Computation of Publ						
15 Public support percentage for 2019 (	line 8, column (f), d	livided by line 13,	column (f))		15	%
16 Public support percentage from 2018	3 Schedule A, Part	III, line 15			16	%
Section D. Computation of Inves						
17 Investment income percentage for 2	019 (line 10c, colur	mn (f), divided by	line 13, column (f))		17	%
<b>18</b> Investment income percentage from					18	%
19a 33 1/3% support tests - 2019. If the					3 1/3%, and line 1	7 is not
more than 33 1/3%, check this box a						
b 33 1/3% support tests - 2018. If the						and
line 18 is not more than 33 1/3%, che						
20 Private foundation. If the organization			•		•	
932023 09-25-19						0 or 990-EZ) 2019
		22	2		•	

<sup>2019.05040</sup> AMERICAN COMPOSERS FORUM 101035\_1

### Schedule A (Form 990 or 990-EZ) 2019 AMERICAN COMPOSERS FORUM

#### Part IV Supporting Organizations

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

#### Section A. All Supporting Organizations

- 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.
- 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).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **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.
- c 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.
- **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.*
- **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.*
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 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).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* **Part VI.**
- 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)*.
- 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).*
- **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.**
- **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.**
- c 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.
- **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.*
- **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.)

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1 2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c

Yes No

Schedule A (Form 990 or 990-EZ) 2019

10a

10b

23

# Schedule A (Form 990 or 990-EZ) 2019 AMERICAN COMPOSERS FORUM Part 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		
	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		
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	_		
			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 <b>Part VI</b> 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 <b>Part VI</b> 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 <b>Part VI</b> the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations	-		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see inst	ructions		
2	Activities Test. Answer (a) and (b) below.	uolionoj	Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify</b>			
	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				
	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.			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? <i>Provide details in</i> <b>Part VI.</b>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	3b		
-				

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Schedule A (Form 990 or 990-EZ) 2019

	(Form 990 or 990-EZ) 2019				
Part v	Type III Non-Function	onally integrat	ed 509(a)(3) Su	pporting Or	ganizations

Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Secti	on A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Secti	on B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in <b>Part VI</b> ):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Secti	on C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the ourrent year in the organization's first as a new functional	· · ·		/

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990 or 990-EZ) 2019

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## Schedule A (Form 990 or 990-EZ) 2019 AMERICAN COMPOSERS FORUM

	t V Type III Non-Functionally Integrated 509(	a)(3) Supporting Orga	nizations (continued)	
Sect	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	3		
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	ne organization is responsive		
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
а	From 2014			
b	From 2015			
с	From 2016			
d	From 2017			
е	From 2018			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D, line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount			
с	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
_	than zero, explain in <b>Part VI.</b> See instructions.			
6	Remaining underdistributions for 2019. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			
	Excess from 2018			
e	Excess from 2019			Earm 000 or 000 EZ) 2010

Schedule A (Form 990 or 990-EZ) 2019

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Schedule A	(Form 990 or 990-EZ) 2019 AMERICAN COMPOSERS FORUM	23-7452688	Page 8
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, lin Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section E line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any (See instructions.)	e 17a or 17b; Part III, line 12; 8, lines 1 and 2; Part IV, Section 1; Part V, Section B, line 1e; Par	C,
932028 09-25-	<sup>19</sup> 27	Schedule A (Form 990 or 990-E	E <b>Z)</b> 2019

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Department of the Treasury Internal Revenue Service

Supplemental Financial Statements ► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► Go to www.irs.gov/Form990 for instructions and the latest information.



Nam	e of the organization AMERICAN COMPOSERS	FORIM		Employer identification number
Pa			r Similar Fund	
1 4	organization answered "Yes" on Form 990, Part IV, lin			
	organization answered fes on Form 990, Part IV, in	(a) Donor ad	lvised funds	(b) Funds and other accounts
	Tatal mumber at and afterna			
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			l
5	Did the organization inform all donors and donor advisors in	-		
~	are the organization's property, subject to the organization's			
6	Did the organization inform all grantees, donors, and donor a for charitable purposes and not for the benefit of the donor o			
		,	, , ,	Ň m m
Pa	impermissible private benefit? <b>t II Conservation Easements.</b> Complete if the org	appization answord	"Voc" on Form 000	
1	·			, r art iv, inte 7.
•	Purpose(s) of conservation easements held by the organization Preservation of land for public use (for example, recreation of land for public use)			of a historically important land area
	Protection of natural habitat	ation of education)		of a historically important land area of a certified historic structure
	Preservation of open space			or a certified historic structure
2	Complete lines 2a through 2d if the organization held a qualit	fied conservation cor	tribution in the form	n of a conservation essement on the last
2	day of the tax year.			Held at the End of the Tax Year
а				
	Number of conservation easements on a certified historic structure			
	Number of conservation easements included in (c) acquired a			
ŭ	listed in the National Register	,		
3	Number of conservation easements modified, transferred, rel			
-	year ►			
4	Number of states where property subject to conservation eas	sement is located		
5	Does the organization have a written policy regarding the per		pection, handling o	– f
	violations, and enforcement of the conservation easements it	t holds?		
6	Staff and volunteer hours devoted to monitoring, inspecting,			
	▶			
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, an	d enforcing conserv	ration easements during the year
	►\$			
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirer	nents of section 17	D(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports conservation	on easements in its r	evenue and expens	e statement and
	balance sheet, and include, if applicable, the text of the footr	note to the organizati	on's financial stater	nents that describes the
Dee	organization's accounting for conservation easements.		<del>.</del>	
Pa	t III Organizations Maintaining Collections of	-	reasures, or C	otner Similar Assets.
	Complete if the organization answered "Yes" on Form			
<b>1</b> a	If the organization elected, as permitted under FASB ASC 95	, 1		
	of art, historical treasures, or other similar assets held for put			
	service, provide in Part XIII the text of the footnote to its finar			
b	If the organization elected, as permitted under FASB ASC 95			
	art, historical treasures, or other similar assets held for public	exhibition, educatio	n, or research in fur	therance of public service,
	provide the following amounts relating to these items:			
	(i) Revenue included on Form 990, Part VIII, line 1			<b>N A</b>
~				
2	If the organization received or held works of art, historical tre			iai gain, provide
_	the following amounts required to be reported under FASB A	-		► ¢
	Revenue included on Form 990, Part VIII, line 1			
	Assets included in Form 990, Part X For Paperwork Reduction Act Notice, see the Instructions			Schedule D (Form 990) 2019

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Partial       Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued).         3       Using the organization accession, and other records, check any of the following that make significant use of its contaction terms (check all that apply):       d       Loan or exchange program         b       Diffee exhibition       d       Loan or exchange program         b       Diffee exhibition       d       Loan or exchange program         c       Provide a description of the organization is oblication and explain how they further the organization is description of the organization is description of them of the maintain as part of the organization answered "Yes" on Form 900, Part XII.         Partial Escrow and Custodial Arrangements. Complete the following table:       Yes:       No         l       The organization and the organization and explain how they further the organization answered "Yes" on Form 900, Part XI, Ine 9, or reported an anount on form 990, Part X, Ine 21, for secrew or outstoldial account liability?       Yes:       No         b       If the organization include an amount on Form 900, Part X, Ine 21, for secrew or outstoldial account liability?       Yes:       No         b       Job the organization include an amount on Form 900, Part X, Ine 21, for secrew or outstoldial account liability?       Yes:       No         d       Additions during the year.       1d       1d       1d         D the organization include an amount on Form 900, Pa	Sche		N COMPOSERS					23 - 74			age <b>2</b>
collection lems (check all that apply):       a       b       b       Scholarly research       c       Other	Par	t III   Organizations Maintaining C	ollections of Art,	Historical Tre	asures, or Oth	er Si	imilar	Assets	(continu	ued)	
a       Public exhibition       d       □ can or exchange program         b       Scholary research       e       Other	3	Using the organization's acquisition, accession	on, and other records,	check any of the f	ollowing that make	signit	ficant u	ise of its			
b       Scholary research       e       Other         c       Previde a description of houre generations       Provide a description of the organization solicit or receive donations of art, historical treasures, or other similar assets       tota on the organization solicit or receive donations or art, historical treasures, or other similar assets       tota       No.         Particle a description of the organization assisted the organization answered 'Yes' on Form 990, Part X, line 21.       Yes       No.         Part W       Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' on Form 990, Part X, line 21.       Is to arganization an agent, trustee, custodian or other intermediary for contributions or other assets not included on form 990, Part X, line 21.       Yes       No         b       If 'Yes', explain the arrangement in Part XIII and complete the following table:       Amount       1d         c       Beginning balance       1d       1d       1d         a bit for organization include an amount on Form 990, Part X, line 21, for escrew or custodial account liability?       Yes       No         b       If 'Yes' explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII       Provide the answer of Yes' on Form 900, Part X, line 21.       No         b       If 'Yes' explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII       Provide the estimated partis and tablance (10 Poreray back (10 Prevers back (0 Prevers back)		collection items (check all that apply):									
c       Preservation for future generations         4       Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.         5       During the year, did the organization is collections and explain how they further the organization's exempt purpose in Part XIII.         6       Perit MI       Exercise and Custodial Arrangements. Complete if the organization answered 'Yes' on Form 990, Part K, line 9, or reported an amount on Form 990, Part X, line 21.         1a       Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21.       Amount         c       Beginning balance	а	Public exhibition	d	Loan or exc	hange program						
Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.     During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets     to be add to raise funds rather than to be maintained as part of the organization's collection?     Part W Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or     reported an amount on Form 990, Part X, line 21.     Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included     on Form 900, Part X?     Is a list the organization angent, trustee, custodian or other intermediary for contributions or other assets not included     on Form 900, Part X?     Is a list the organization in agent, trustee, custodian or other intermediary for contributions or other assets not included     on Form 900, Part X?     Is a list organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?     Is a list management in Part XIII. Check here if the explanation has been provided on Part XIII Part V Endowment Funds. Complete if the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?     Is a list investment earnings, gains, and bases     174, 992.     Sta3, 471.     274, 194.     444, 040.     2792, 051.     Grants or scholarships     e other expenditures for facilities     a drograms <u>318, 358.         267, 019.         274, 493.         288, 040.         252, 340.         <u>446, 040.         259, 040.         252, 340.         <u>5, 065, 065.         6, 145, 371.         5, 824, 593.         5, 824, 593.         5, 824, 593.         5, 824, 593.         5, 824, 593.         5, 824, 593.         5, 824, 593.         5, 824, 593.         5, 824, 593.         5, 824, 593.         5, 824, 593.         5, 824, 593.         5, 824, 593.         5, 824, 593.   </u></u></u>	b	Scholarly research	е	Other							
5       During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be solid to raise funds rather than to be maintained as part of the organization answered 'Yes' on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.         1       Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?       Ves       No         b If 'Yes,'' explain the arrangement in Part XIII and complete the following table:       Intermediary for contributions or other assets not included on Form 990, Part X?       Intermediary for contributions or other assets not included on Form 990, Part X?       No         b If 'Yes,'' explain the arrangement in Part XIII and complete the following table:       Intermediary for contributions of any for the organization answered 'Yes' on Form 990, Part X.       No         2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       Yes       No         b If 'Yes.' explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII.       Intermediary for contributions       No         b If 'Yes.' explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII.       Intermediary for contributions       No         fart Beginning of year balance       (a) Current year 'log 10 Prom year 10 Prom 950, Part X, line 10.       Intermediary for contributions       Sec32, S82, S5, S58, 473.       Sec42, S82, S5, S58, 473.	С	Preservation for future generations									
tops rold to raise funds rather than to be maintained as part of the organization's collection?         Yes         No.           Part IV         Escrow and Custodial Arrangements. Complete if the organization answared 'Yes' on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.         Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 890, Part X, line 21.         Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 890, Part X, line 21.         Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21, for escrow or custodial account liability?         Is the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?         Ives         No           0         If 'Yes, '' explain the arrangement in Part XIII. Check here if the explanation insis been provided on Part XIII         Image: Complete if the organization answered 'Yes' on Form 990, Part V, line 10.         Ives         No           10         If 'the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?         Ives         No           11         Image: Complete if the organization answered 'Yes' on Form 990, Part X, line 21, for escrow are custodial account liability?         Ives         No           12         Dedribute organizations         3, 000, 4, 226, 3, 900, 3, 224, 27, 554, 453, 5, 622, 688, 473, 3, 000, 3, 224, 27, 554, 473, 2, 604, 923, 5, 621, 9	4	Provide a description of the organization's co	ellections and explain	how they further th	e organization's ex	empt	purpos	se in Part i	XIII.		
Part W       Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.         1a       Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X (Wes). No       Ves       No         b       If "Yes," explain the arrangement in Part XIII and complete the following table:       Image: Complete the complete the organization answered "Yes" on Form 990, Part IV, line 10.       Image: Complete the complete the organization answered "Yes" on Form 990, Part IV, line 10.       Image: Complete the organization answered "Yes" on Form 990, Part IV, line 10.       Image: Complete the complete the organization answered "Yes" on Form 990, Part IV, line 10.       Image: Complete the complete table:       Image: Complete the complete table:       Image: Complete table:       Image: C	5								-		-
reported an amount on Form 990, Part X, line 21.         1a Is the organization an agent, truste, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21, low service assets not included on Form 990, Part X, line 21, low service assets not included on Form 990, Part X, line 21, for escrew or custodial account liability?         c Beginning balance       1c         d Additions during the year       1e         2a Did the organization include an amount on Form 990, Part X, line 21, for escrew or custodial account liability?       Yes       No         b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII.       Part V       Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part X, line 10.         Part V       Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part X, line 10.       (e) Current year (b) Priver (c) Viroy years back (c) Four ye									_		No
on Form 990, Part X?       Yes       No         b       If "Yes," explain the arrangement in Part XIII and complete the following table:       Amount         c       Beginning balance       1d         d       Additions during the year       1d         e       Distributions during the year       1d         a       Distributions during the year       1d         d       Additions during the year       1d         d       Distributions during the year       1d         d       Distributions during the year       1d         d       Endowment Funds. Complete If the organization naswered 'Yes' on Form 990, Part X, line 10.         Part V       Endowment Funds. Complete If the organization answered 'Yes' on Form 990, Part X, line 10.         f       Beginning of year balance       (a) Current versit (b) (Vrey versit (c) Nrey versit back (d) Intree versits back (e) Four versits back (e) Fou	Par			e if the organizatio	n answered "Yes"	on Foi	rm 990	, Part IV, I	ine 9, or		
b       If "Yes," explain the arrangement in Part XIII and complete the following table:	1a	Is the organization an agent, trustee, custodia	an or other intermedia	ry for contributions	s or other assets no	ot inclu	uded				
b       If "Yes," explain the arrangement in Part XIII and complete the following table:		on Form 990, Part X?		-					Yes		No
c       Beginning balance       1c         d       Additions during the year       1c         d       Distributions during the year       1c         f       Ending balance       1f         2a       Did the organization include an amount on Form '900, Part X, line 21, for escrew or custodial account liability?       Ves       No         b       If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XII       Ves       No         b       If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XII       Ves       No         fa       Beginning of year balance       (a) Current year       (b) Prior year       (c) 1/20 years back       (d) Thre years back       (e) Four years back         for ants or scholarships       174, 992, 583, 471, 274, 104, 444, 040, 239, 001, 4, 226, 3, 000, 3, 294, 27, 554, 3, 000, 3, 294, 27, 554, 174, 992, 583, 471, 274, 104, 444, 040, 239, 001, 4, 216, 371, 5, 824, 593, 5, 821, 982, 5, 662, 688, 3, 60, 025, 005, 6, 145, 371, 5, 824, 593, 5, 821, 982, 5, 662, 688, 2         e       Other expenditures for facilities and programs       318, 358, 267, 019, 274, 493, 288, 040, 252, 340, 252, 340, 4, 249, 340, 248, 040, 252, 340, 4, 249, 340, 248, 040, 252, 340, 4, 249, 340, 248, 040, 252, 340, 246, 343, 371, 5, 824, 593, 5, 821, 982, 5, 662, 688, 2         e for dry arbaiance       6, 005, 005, 6, 145, 371, 5, 824, 593, 5, 821, 982, 5, 662, 688, 2	b										
d Additions during the year       1d         e Distributions during the year       1d         f Ending balance       1t         2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       Yes       No         Part V       Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.       (e) Turve year       (b) Prior year       (c) Turve years back       (e) Four years back       (e) F									Amount		
e       Distributions during the year       1e         f       Ending balance       1f         2a       Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       Yes       No         b       If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII       Part V       Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.         1a       Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back.       (d) Three years back.       (e) Four years back.         1a       Beginning of year balance       (a) A.3.26.       3,000.       4,326.       3,000.       3,234.       27,554.         b       Contributions       3,000.       4,326.       3,000.       3,234.       27,554.         c       Net investment earnings, gains, and losses       174,992.       583,471.       274,104.       444,060.       259,001.         c       Other expenditures for facilities       and programs       46,005,005.       6,145,371.       5,824,933.       5,821,982.       5,662,688.         g       End of year balance	с	Beginning balance					1c				
f       Ending balance	d	Additions during the year					1d				
2a       Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       Yes       No         b       If 'Yes," explain the arrangement in Part XIII. Check here if the explanation has wered 'Yes' on Form 990, Part IV, line 10.       Image: Complete if the organization answered 'Yes' on Form 990, Part X, line 21, for escrow or custodial account liability?       Image: Complete if the organization answered 'Yes' on Form 990, Part X, line 10.         1a       Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         1a       Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         1a       Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back         1a       Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back         1d       Contributions       3,000.       4,3256.       3,000.       3,294.       27,554.         1d       Grants or scholarships       318,358.       267,019.       274,493.       288,040.       252,340.         2       For of year balance       6,005,005.       6,145,371.       5,824,593.	е	Distributions during the year					1e				
b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII.         Part V       Endowment Funds. Complete if the organization answered "Yes" on Form 900, Part IV, line 10.         1a       Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         1a       Beginning of year balance       (a) Lurent year       (b) Prior years       (c) Two years back       (d) Three years back       (e) Four years back         a       Contributions       3,000.       4,326.       3,000.       3,294.       27,554.         c       Net investment earnings, gains, and losses       174,992.       583,471.       274,104.       4444,040.       299,001.         c       Other expenditures for facilities and programs       318,358.       267,019.       274,493.       288,040.       252,340.         g       End of year balance       6,005,005.       6,145,371.       5,824,593.       5,821,982.       5,662,688.         2       Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:       a       Board designated or quasi-endowment >											
Part V         Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.           1a         Beginning of year balance         (a) Current year         (b) Prior year         (c) Two years back         (d) Three years back         (e) Four years back           1a         Beginning of year balance         (a) Our years back         (b) Prior year         (c) Two years back         (d) Three years back         (e) Four years back         (f) Fouryears back         (		C C		-		-		L	Yes		No
(a) Current year         (b) Prior year         (c) Two years back         (d) Three years back         (e) Four years back           1a         Beginning of year balance         6,145,371.         5,821,982.         5,622,688.         5,558,473.           b         Contributions         3,000.         4,326.         3,000.         3,294.         27,554.           c         Net investment earnings, gains, and losses         174,992.         583,471.         274,104.         444,040.         299,001.           d         Grants or scholarships         14         444,040.         299,001.         299,001.           e         Other expenditures for facilities         318,358.         267,019.         274,493.         288,040.         252,340.           f         Administrative expenses         6,005,005.         6,145,371.         5,824,593.         5,821,982.         5,662,688.           2         Provide the estimated percentage of the current year end balance (line 1g, column (al) held as:         Board designated or quasi-endowment >								<u></u>			
1a       Beginning of year balance       6,145,371.       5,824,593.       5,621,982.       5,662,688.       5,588,473.         b       Contributions       3,000.       4,326.       3,000.       3,294.       27,554.         c       Net investment earnings, gains, and losses       174,992.       583,471.       274,104.       444,040.       299,001.         d       Grants or scholarships	Far	<b>Elidowillent Funds.</b> Complete r									<u> </u>
b       Contributions       3,000.       4,326.       3,000.       3,294.       27,554.         c       Net investment earnings, gains, and losses       174,992.       583,471.       274,104.       444,040.       299,001.         d       Grants or scholarships											
c       Net investment earnings, gains, and losses       174,992.       583,471.       274,104.       444,040.       299,001.         d       Grants or scholarships             29,001.         e       Other expenditures for facilities and programs       318,358.       267,019.       274,493.       288,040.       252,340.         g       End of year balance       6,005,005.       6,145,371.       5,824,593.       5,821,982.       5,662,688.         2       Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:       a       a       baard designated or quasi-endowment ▶      %         c       Term endowment ▶      %       %       term endowment ▶      %         c       Term endowment ▶      %       3a(i)       X         i)       Unrelated organizations       iit * Yes* on lines 2a, 2b, and 2c should equal 100%.       3a       3a(i)       X         3a       Are there endowment funds not in the possession of the organization that are held and administered for the organization by:       iii       Nelated organizations       3a(i)       X         ii)       Related organizations       iisted as required on Schedule R?       4       Description of property       (a)	-				, ,	-	5,0		э,		
d Grants or scholarships			· · · · ·	,	,	-	1	,			
e       Other expenditures for facilities and programs       318,358.       267,019.       274,493.       288,040.       252,340.         f       Administrative expenses			1/4,992.	565,471.	274,104	•	4	44,040.		299,	<u> </u>
and programs       318,358.       267,019.       274,493.       288,040.       252,340.         f Administrative expenses       6,005,005.       6,145,371.       5,824,593.       5,821,982.       5,662,688.         g End of year balance       6,005,005.       6,145,371.       5,824,593.       5,821,982.       5,662,688.         2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:       a       Board designated or quasi-endowment >%         b Permanent endowment >%      %      %      %         c Term endowment >%      %      %      %      %         i) Unrelated organizations      %      %      %      %         ii) Related organizations      %      %      %      %         j) Unrelated organizations      %      %      %      %         j) Unrelated organizations      %      %      %      %      %         j) Unrelated organizations      %      %      %      %      %      %      %      %      %      %      %						-					
f       Administrative expenses       6,005,005.       6,145,371.       5,824,593.       5,821,982.       5,662,688.         2       Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:       a       Board designated or quasi-endowment      %         b       Permanent endowment      %      %         c       Term endowment      %         me percentages on lines 2a, 2b, and 2c should equal 100%.       3a       Are there endowment funds not in the possession of the organization that are held and administered for the organization by:	е		318 358	267 019	274 493		2	88 040		252	340
g End of year balance       6,005,005, 6,145,371, 5,824,593, 5,821,982, 5,662,688.         2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:       a Board designated or quasi-endowment ▶%         b Permanent endowment ▶%      %         c Term endowment ▶%      %         3a Are there endowment I on the possession of the organization that are held and administered for the organization by:      %         (i) Unrelated organizations      %         3a(ii) X       3a(ii) X         b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?      %         4 Describe in Part XIII the intended uses of the organization's endowment funds.	f		510,550.	207,019.	2,1,155	•				,	<u> </u>
2       Provide the estimated percentage of the current year end balance (line 1g, column (al) held as:         a       Board designated or quasi-endowment ▶%         b       Permanent endowment ▶%         c       Term endowment ▶%         d       The percentages on lines 2a, 2b, and 2c should equal 100%.         3a       Are there endowment funds not in the possession of the organization that are held and administered for the organization by:         (i)       Unrelated organizations         (ii)       Related organizations         3a(i)       X         3b       If "Yes" on line 3a(ii), are the related organization's endowment funds.         Part VI       Land, Buildings, and Equipment.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.         Description of property       (a) Cost or other         basis (investment)       basis (other)         basis (other)       depreciation         abasis (investment)       basis (other)         basis (other)       59, 641.         basis of the cup for the set set set set set set set set set se			6 005 005.	6 145 371.	5 824 593		5 8	21 982.	5	662	688.
a Board designated or quasi-endowment ▶%         b Permanent endowment ▶%         c Term endowment ▶%         c Term endowment ▶%         c Term endowment ▶%         a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:         (i) Unrelated organizations						·				,	
b       Permanent endowment ▶      %         c       Term endowment ▶      %         The percentages on lines 2a, 2b, and 2c should equal 100%.       3a       Are there endowment funds not in the possession of the organization that are held and administered for the organization by: <ul> <li>(i) Unrelated organizations</li> <li>(ii) Related organizations</li> <li>(iii) Related organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.</li> </ul> Part VI     Land, Buildings, and Equipment.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.         Description of property       (a) Cost or other basis (other)         b       Buildings         c       Leasehold improvements         75, 670.       68, 290.	- a		•								
c       Term endowment       >       %         The percentages on lines 2a, 2b, and 2c should equal 100%.       3a       Are there endowment funds not in the possession of the organization that are held and administered for the organization by: <ul> <li>(i) Unrelated organizations</li> <li>(ii) Related organizations</li> <li>(iii) Related organizations</li> <li>(ii) Related organizations</li> <li>(ii) are the related organizations listed as required on Schedule R?</li> <li>4 Describe in Part XIII the intended uses of the organization's endowment funds.</li> </ul> Part VI Land, Buildings, and Equipment.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.         Description of property       (a) Cost or other basis (other)         b Buildings          c Leasehold improvements       75,670.       68,290.       7,380.         c Leasehold improvements       59,641.       57,912.       1,729.         e Other       Other       59,641.       57,912.       1,729.	b	-		-/~							
The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations (ii) Related organizations (iii) Related organization's endowment funds.  Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  A Land (b Buildings (c Leasehold improvements (75, 670. 68, 290. 7, 380. (c Leasehold improvements (c) Restrict on Form, 990, 641. 57, 912. 1, 729. (c) Other (c) Other (c) Restrict on Form, 990, 641. 57, 912. 1, 729. (c) Other (c) Restrict on Form, 990, 641. 57, 912. 1, 729. (c) Other (c) Restrict on Form, 990, 641. 57, 912. 1, 729. (c) Other (c) Restrict on Form, 990, 641. 57, 912. 1, 729. (c) Other (c) Restrict on Form, 990, 641. 57, 912. 1, 729. (c) Other (c) Restrict on Form, 990, 641. 57, 912. 1, 729. (c) Other (											
3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:       Yes       No         (i) Unrelated organizations       3a(i)       X         (ii) Related organizations       3a(ii)       X         b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?       3b       3b         4 Describe in Part XII the intended uses of the organization's endowment funds.       Bet Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.       (d) Book value         Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.       (d) Book value         1a Land       b Buildings       50       57, 670.       68, 290.       7, 380.         c Leasehold improvements       75, 670.       68, 290.       7, 380.       1, 729.         e Other       0       59, 641.       57, 912.       1, 729.			uld equal 100%.								
(i)       Unrelated organizations       3a(i)       X         (ii)       Related organizations       3a(ii)       X         b       If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?       3b       3b         4       Describe in Part XII the intended uses of the organization's endowment funds.       3b       3b       3b         Part VI       Land, Buildings, and Equipment.       3b       3b       3b       3b         Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.       (d) Book value       3b         Description of property       (a) Cost or other basis (other)       (c) Accumulated depreciation       (d) Book value         1a       Land       55,670.       68,290.       7,380.         c       Leasehold improvements       75,670.       68,290.       7,380.         d       Equipment       59,641.       57,912.       1,729.         e       Other       0       0       0       0	3a			on that are held ar	d administered for	the o	rganiza	tion			
(ii) Related organizations       Ja(ii) X         b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?       Ja(ii) X         4 Describe in Part XIII the intended uses of the organization's endowment funds.       Ja(ii) X         Part VI       Land, Buildings, and Equipment.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.       (d) Book value         Description of property       (a) Cost or other basis (other)       (c) Accumulated depreciation         1a Land       Description of properts       (d) Book value         b Buildings       Total Action Provements       Total Action Provements         c Leasehold improvements       75,670.       68,290.       7,380.         d Equipment       59,641.       57,912.       1,729.         e Other       Description       Description       Description		by:								Yes	No
(ii)       Related organizations       3a(ii)       X         b       If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?       3b       3b         4       Describe in Part XIII the intended uses of the organization's endowment funds.       Fart VI       Land, Buildings, and Equipment.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.       (d) Book value         Description of property       (a) Cost or other basis (investment)       (b) Cost or other basis (other)       (c) Accumulated depreciation         1a       Land       59, 670.       68, 290.       7, 380.         c       Leasehold improvements       75, 670.       68, 290.       7, 380.         d       Equipment       59, 641.       57, 912.       1, 729.         e       Other       0ther       0ther       0ther       0ther		(i) Unrelated organizations							3a(i)		Х
b       If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?       3b         4       Describe in Part XIII the intended uses of the organization's endowment funds.         Part VI       Land, Buildings, and Equipment.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.         Description of property       (a) Cost or other basis (other)       (c) Accumulated depreciation         1a       Land									3a(ii)		Х
Part VI       Land, Buildings, and Equipment.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.         Description of property       (a) Cost or other basis (investment)       (b) Cost or other basis (other)       (c) Accumulated depreciation         1a       Land	b	If "Yes" on line 3a(ii), are the related organization	tions listed as require	d on Schedule R?					3b		
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.         Description of property       (a) Cost or other basis (investment)       (b) Cost or other basis (other)       (c) Accumulated depreciation       (d) Book value         1a       Land	4			ment funds.							
Description of property       (a) Cost or other basis (investment)       (b) Cost or other basis (other)       (c) Accumulated depreciation       (d) Book value         1a Land	Par	t VI Land, Buildings, and Equipm	ent.								
Image: basis (investment)         basis (other)         depreciation           1a Land		Complete if the organization answered	d "Yes" on Form 990,			X, line	e 10.				
b Buildings         75,670.         68,290.         7,380.           c Leasehold improvements         75,670.         68,290.         7,380.           d Equipment         59,641.         57,912.         1,729.           e Other         0         0         0	_	Description of property	1	• • •				d	<b>(d)</b> Book	value	Э
b Buildings         75,670.         68,290.         7,380.           c Leasehold improvements         75,670.         68,290.         7,380.           d Equipment         59,641.         57,912.         1,729.           e Other         0         0         0	1a	Land									
c Leasehold improvements         75,670.         68,290.         7,380.           d Equipment         59,641.         57,912.         1,729.           e Other											
e Other	с										
	d	Equipment		5	9,641.	5	7,91	L2.	1	,72	29.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)	e	Other									
	Tota	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part X	. column (B), line 1	0c <u>.</u> )				9	,1	)9.

Schedule D (Form 990) 2019

Schedule D (Form 990) 2019 AMERICAN COMPOSERS FORU
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#### Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		

#### Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

#### Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	
Part X Other Liabilities.	
Complete if the organization answered "Ves" on Form 990 Part IV, line 11e or 11f, See Form 990 Part X, line 25	

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	FUNDS HELD FOR OTHERS	277,578.
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	277,578.

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

Schedule D (Form 990) 2019

932053 10-02-19

Sche	dule D (Form 990) 2019 AMERICAN COMPOSERS FORUM			23-'	7452688	Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Staten	nents With	Revenue per Re	eturn.		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 1	2a.				
1	Total revenue, gains, and other support per audited financial statements			1	1,933,	999.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments	2a	-41,628.			
b	Donated services and use of facilities	2b				
с	Recoveries of prior year grants					
d	Other (Describe in Part XIII.)	2d				
е	Add lines 2a through 2d			2e	-41,	628.
3	Subtract line 2e from line 1			3	1,975,	627.
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.)	4b				
с	Add lines 4a and 4b			4c		0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	1,975,	627.
Pa	t XII Reconciliation of Expenses per Audited Financial State		Expenses per l	Returr	n.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 1	2a.				
1	Total expenses and losses per audited financial statements			1	1,620,	686.
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	2b				
С	Other losses	2c				
d	Other (Describe in Part XIII.)	2d				
е	Add lines 2a through 2d			2e		0.
3	Subtract line 2e from line 1			3	1,620,	686.
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.)	4b				
с	Add lines 4a and 4b			4c		0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	1,620,	686.
Pa	t 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.

\_\_\_\_\_

## PART X, LINE 2:

THE ORGANIZATION HAS A TAX-EXEMPT STATUS UNDER SECTION 501(C)(3) OF THE
INTERNAL REVENUE CODE AND HAS ADOPTED ACCOUNTING FOR UNCERTAINTY IN INCOME
TAXES, ASC 740-10. THE ORGANIZATIONS POLICY IS TO EVALUATE UNCERTAIN TAX
POSITIONS, AT LEAST ANNUALLY, FOR THE POTENTIAL FOR INCOME TAX EXPOSURE
FROM UNRELATED BUSINESS INCOME OR FROM LOSS OF NONPROFIT STATUS. THE
ORGANIZATION CONTINUES TO OPERATE CONSISTENT WITH ITS ORIGINAL EXEMPTION
APPLICATION AND EACH YEAR TAKES THE NECESSARY ACTIONS TO MAINTAIN ITS
EXEMPT STATUS. IT HAS BEEN CLASSIFIED AS AN ORGANIZATION THAT IS NOT A
PRIVATE FOUNDATION UNDER THE INTERNAL REVENUE CODE AND CHARITABLE
CONTRIBUTIONS BY DONORS ARE TAX DEDUCTIBLE. IN COMPLIANCE WITH ITS EXEMPT
STATUS, THE ORGANIZATION ANNUALLY FILES A RETURN OF ORGANIZATION EXEMPT
932054 10-02-19 Schedule D (Form 990) 2019 31
15500204 310390 101035 2019.05040 AMERICAN COMPOSERS FORUM 101035_

Schedule	D (Form 990)	2019	A	MERICAN tion <sub>(continue</sub>	COMPOSERS	FORUM		23-7452688	Page <b>5</b>
Part X	III   Suppler	nenta	l Informa	tion <sub>(continue</sub>	ed)				
FROM	INCOME	TAX	(FORM	990).					
								Schedule D (Form	0001 2010
932055 10-	02-19								550) 20 19

2019.05040 AMERICAN COMPOSERS FORUM 101035\_1

SCHEDULE I (Form 990)	Go	rants and Oth vernments, an ete if the organization	d Individual	s in the Ŭni	ted States		OMB No. 1545-0047
Department of the Treasury			Attach to For				Open to Public
Internal Revenue Service		Go to www.ir	s.gov/Form990 fo	r the latest inform	nation.		Inspection
Name of the organization AMERICAN	COMPOSERS	FORUM					Employer identification number $23 - 7452688$
Part I General Information on Grants a	and Assistance						
<ol> <li>Does the organization maintain records criteria used to award the grants or assi</li> <li>Describe in Part IV the organization's pr</li> </ol>	stance?				-		
Part II Grants and Other Assistance to					anization answered "Y	es" on Form 990 Parl	IV line 21 for any
recipient that received more than	-						
<b>1 (a)</b> Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
NATIONAL LUTHERAN CHOIR 121 HENNEPIN AVE MINNEAPOLIS, MN 55401	36-3490571		7,500.	0.	CASH		COMPOSER FEE
<ul> <li>2 Enter total number of section 501(c)(3) a</li> <li>3 Enter total number of other organization</li> </ul>	ns listed in the line 1	table					

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

Schedule I (Form 990) (2019)

Page 2

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	<b>(c)</b> Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
COMPOSER FEE	23	217,500.	0.		

**Part IV** Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

#### SCHEDULE M (Form 990)

# **Noncash Contributions**

OMB No. 1545-0047

Department of the Treasury	
Internal Revenue Service	

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

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

010
2019
Open to Public
Inspection

Employer identification number

23 - 7452688

Name of the organization			
	AMERICAN	COMPOSERS	FORUM

Pa	t I Types of Property							
		<b>(a)</b> Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	<b>(d)</b> Method of de noncash contribu		•	3
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	Х	3	51,052.	FAIR MARKET	VAI	LUE	
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ► ()							
26	Other ► ()							
27	Other ► ()							
28	Other 🕨 (							
29	Number of Forms 8283 received by the organiz	ation during	the tax year for co	ontributions				
	for which the organization completed Form 828	33, Part IV, [	Donee Acknowledg	gement				
							Yes	No
30a	During the year, did the organization receive by	o contributio	n any property rep	orted in Part I, lines 1 throug	h 28, that it			
	must hold for at least three years from the date	of the initia	l contribution, and	which isn't required to be us	ed for			
	exempt purposes for the entire holding period?					30a		<u>X</u>
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance p	olicy that re	equires the review of	of any nonstandard contribut	ions?	31		Х
32a	Does the organization hire or use third parties of contributions?		•	· · ·		32a		x
h	If "Yes," describe in Part II.					JLa		
33	If the organization didn't report an amount in co	olumn (c) fo	a type of property	( for which column (a) is chec	ked			
	describe in Part II.							
ΙНΔ	For Paperwork Beduction Act Notice see	the Instruct	tions for Form 990	n	Schedule M	(Eorn	n 000)	2010

edule M (Form 990) 2019

932141 09-27-19

Schedule N	l (Form 990) 2019	AMERICAN	COMPOSERS	FORUM	
Part II	Supplementa	Information.	Provide the informa	tion required by Pa	rt I, lines 30b, 32b, and 33, a
					f items received, or a combin
	this part for any a	dditional information	on.		

932142 09-27-19	Schedule M (Form 990) 2019

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ▶ Attach to Form 990 or 990-EZ. ▶ Go to www.irs.gov/Form990 for the latest information.



23-7452688

AMERICAN COMPOSERS FORUM

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

GATHERINGS, AND INDUSTRY LEADERSHIP, WE ACTIVATE EQUITABLE

OPPORTUNITIES FOR ARTISTS. WE PROVIDE DIRECT FUNDING AND MENTORSHIP TO

A BROAD AND DIVERSE FIELD OF MUSIC CREATORS, HIGHLIGHTING THOSE WHO

HAVE BEEN HISTORICALLY EXCLUDED FROM PARTICIPATION.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

THE ORGANIZATION, 100% OF SALES GOES DIRECTLY TO THE ARTISTS. ACF ALSO

PRODUCES A DAILY RADIO SHOW IN PARTNERSHIP WITH MINNESOTA PUBLIC RADIO

CALLED COMPOSERS DATEBOOK, CARRIED ON 150 STATIONS NATIONWIDE.

YOUTH PROGRAMS: BANDQUEST AND CHORALQUEST COMMISSION NEW WORK FROM

LEADING AMERICAN COMPOSERS FOR MIDDLE SCHOOL- LEVEL STUDENTS, DEVELOPED

IN A RESIDENCY PERIOD. TO SUPPORT THE NEXT GENERATION OF COMPOSERS

NEXTNOTES IS A NATIONAL COMPETITIVE PROGRAM FOR HIGH SCHOOL MUSIC

CREATORS THAT ANNUALLY OFFERS AWARDS, MENTORSHIP, AND PERFORMANCE

OPPORTUNITIES.

FORM 990, PART VI, SECTION A, LINE 1:

LINE 1A EXPLANATION - THE EXECUTIVE COMMITTEE CONSISTS OF THE CHAIR OF THE BOARD OF DIRECTORS, AND ALL OTHER OFFICERS OF THE CORPORATION AND THE CHAIRS OF THE COMMITTEES. AT LEAST ONE MEMBER OF THE COMMITTEE MUST BE A COMPOSER. THIS COMMITTEE SERVES AS THE CENTRAL PLANNING BODY FOR THE ORGANIZATION. IT HAS THE FULL AUTHORITY TO ACT FOR THE BOARD IN MANAGING THE AFFAIRS OF THE CORPORATION DURING THE INTERVALS BETWEEN MEETINGS OF THE BOARD, AND SHALL REPORT ITS ACTIONS TO THE BOARD.

LHAFor Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.Schedule O (Form 990 or 990-EZ) (2019)93221109-06-19

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Schedule O (Form 990 or 990-EZ) (2019)	Page <b>2</b>
Name of the organization           AMERICAN         COMPOSERS         FORUM	Employer identification number $23 - 7452688$
THE GOVERNANCE COMMITTEE CONSISTS OF AT LEAST ONE COMPOSER	, AT LEAST ONE
NON-COMPOSER, THE PRESIDENT AND CHIEF EXECUTIVE OFFICER AN	D ANY OTHER
INDIVIDUALS APPOINTED THERETO BY THE CHAIR OF THE BOARD OF	DIRECTORS IN
CONSULTATION WITH THE EXECUTIVE COMMITTEE. THE GOVERNANCE	COMMITTEE IS
RESPONSIBLE FOR A) IDENTIFYING PROSPECTIVE DIRECTORS OF TH	E CORPORATION,
ASSESSING THEIR CREDENTIALS, AND FORMALLY NOMINATING THEM	FOR ELECTION BY
THE BOARD, B)NOMINATING OFFICERS FOR ELECTION BY THE BOARD	AT ITS ANNUAL
MEETING C) ESTABLISHING CRITERIA FOR BOARD MEMBERS' PERFOR	MANCE AND
EVALUATING THEIR PERFORMANCE ON THE BASIS OF THOSE CRITERI	A AND
PERIODICALLY REVIEWING THE STRUCTURES AND MECHANISMS OF TH	E CORPORATION'S
GOVERNANCE, INCLUDING THOSE BYLAWS AND PROPOSING REVISIONS	OF AND ADDITIONS
TO THOSE STRUCTURES AND MECHANISMS TO THE BOARD FOR ITS CO	NSIDERATION AND
ADOPTION.	

FORM 990, PART VI, SECTION A, LINE 6:

LINE 6 EXPLANATION - COMPOSER FORUM MEMBERS ARE MOSTLY COMPOSERS, MUSIC CREATORS, AND/OR PERFORMERS OF MUSIC.

ALL MEMBERS OF THE AMERICAN COMPOSERS FORUM ARE DUES PAYING MEMBERS.

MEMBERS IN THIS ORGANIZATION DO NOT HAVE VOTING RIGHTS.

FORM 990, PART VI, SECTION B, LINE 11B:

LINE 11B EXPLANATION - THE FORM 990 IS PRESENTED TO MANAGEMENT, THE FINANCE

COMMITTEE OF THE BOARD AND FULL BOARD OF DIRECTORS FOR REVIEW AND APPROVAL

PRIOR TO FILING WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

ANNUALLY, EACH OFFICER, EMPLOYEE AND MEMBER OF THE BOARD OF DIRECTORS IS
932212 09-06-19
Schedule O (Form 990 or 990-EZ) (2019)
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Schedule O (Form 990 or 990-EZ) (2019)	Page <b>2</b>
Name of the organization AMERICAN COMPOSERS FORUM	Employer identification number 23-7452688
REQUIRED TO REVIEW THE FORUM'S CONFLICT OF INTEREST POLICY	AND TO COMPLETE
A DISCLOSURE FORM. THIS INFORMATION IS MONITORED BY THE PR	ESIDENT AND CEO.
THE CHAIR OF THE BOARD OF DIRECTORS, AND THE CHAIR OF THE	GOVERNANCE
COMMITTEE. ANY RELEVANT CONFLICTS ARE DISCLOSED PRIOR TO B	OARD
CONSIDERATION OF A CONTRACT OR TRANSACTION, AND THE PERSON	WITH THE
CONFLICT IS NOT ALLOWED TO PARTICIPATE IN DISCUSSION, EXER	T PERSONAL
INFLUENCE, OR VOTE ON THE ISSUE. MATTERS REGARDING CONFLIC	TS ARE DOCUMENTED
IN THE MINUTES OF THE MEETING OR IN A SEPARATE MEMORANDUM	FILED WITH THE
ORIGINAL MEETING MINUTES.	

FORM 990, PART VI, SECTION B, LINE 15:

IN COMPLIANCE WITH INTERNAL REVENUE SERVICE GUIDELINES FOR APPROVAL OF SENIOR MANAGEMENT COMPENSATION, THE AMERICAN COMPOSERS FORUM (ACF) BOARD OF DIRECTORS OR A DELEGATED COMMITTEE OF THE BOARD (REFERRED TO AS THE APPROVAL BODY BELOW) WILL USE THE FOLLOWING PROCESS AND GUIDELINES TO REVIEW AND APPROVE SENIOR MANAGEMENT COMPENSATION: 1. COVERED INDIVIDUALS. A WRITTEN LIST OF SENIOR MANAGEMENT POSITIONS COVERED BY THIS POLICY (COVERED INDIVIDUALS) WILL BE MAINTAINED BY THE APPROVAL BODY. 2. IMPARTIAL DECISION MAKERS. THE COMPENSATION ARRANGEMENT MUST BE APPROVED IN ADVANCE (BEFORE ANY PAYMENT OR COMMITMENT IS MADE) BY THE APPROVAL BODY OF ACF, COMPOSED ENTIRELY OF INDIVIDUALS WHO DO NOT HAVE A CONFLICT OF INTEREST WITH RESPECT TO THE COMPENSATION ARRANGEMENT (EXAMPLE: NEITHER THE EXECUTIVE WHOSE COMPENSATION IS BEING DETERMINED NOR ANY OF HIS/HER FAMILY MEMBERS MAY BE PRESENT DURING THE DISCUSSION/DEBATE OR PARTICIPATE IN THE VOTE). 3. COMPARABILITY DATA. WHEN THE APPROVAL BODY IS CONSIDERING COMPENSATION TO THE COVERED INDIVIDUALS, IT MUST RELY ON COMPARABILITY DATA THAT SUPPORT THE FAIR MARKET VALUE OF THE COMPENSATION IN QUESTION. FOR EXAMPLE, WHEN CRAFTING COMPENSATION PACKAGES, THE APPROVAL BODY MUST SECURE Schedule O (Form 990 or 990-EZ) (2019) 932212 09-06-19 39

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2019.05040 AMERICAN COMPOSERS FORUM 101035\_1

Schedule O (Form 990 or 990-EZ) (2019)	Page <b>2</b>		
Name of the organization AMERICAN COMPOSERS FORUM	Employer identification number 23-7452688		
DATA THAT DOCUMENT COMPENSATION LEVELS FOR SIMILARLY QUALIFIED INDIVIDUALS			
IN LIKE POSITIONS AT LIKE ORGANIZATIONS. THIS DATA MAY INC	LUDE THE		
FOLLOWING: A) EXPERT COMPENSATION STUDIES BY INDEPENDENT F	IRMS; B) WRITTEN		
JOB OFFERS FOR POSITIONS AT SIMILAR ORGANIZATIONS; C) DOCU	MENTED TELEPHONE		
CALLS ABOUT SIMILAR POSITIONS AT BOTH NONPROFIT AND FOR-PR	OFIT		
ORGANIZATIONS; AND D) INFORMATION OBTAINED FROM THE IRS FO	RM 990 FILINGS OF		
SIMILAR ORGANIZATIONS. 4. CONCURRENT DOCUMENTATION. THE AP	PROVAL BODY MUST		
DOCUMENT HOW IT REACHED ITS DECISIONS, INCLUDING THE DATA	ON WHICH IT		
RELIED. TO QUALIFY AS CONCURRENT DOCUMENTATION, WRITTEN OR	ELECTRONIC		
RECORDS OF THE APPROVAL BODY (SUCH AS MEETING MINUTES) MUS	T NOTE: A) THE		
TERMS OF THE COMPENSATION AND THE DATE IT WAS APPROVED; B)	THE MEMBERS OF		
THE APPROVAL BODY WHO WERE PRESENT DURING THE DELIBERATION	S ON THE		
COMEPNSATION THAT WAS APPROVED AND THOSE WHO VOTED ON IT;	C) THE		
COMPARABILITY DATA OBTAINED AND RELIED UPON AND HOW THE DA	TA WERE OBTAINED;		
AND D) ANY ACTIONS TAKEN WITH RESPECT TO CONSIDERATION OF	THE COMPENSATION		
BY ANYONE WHO IS OTHERWISE A MEMBER OF THE APPROVAL BODY B	UT WHO HAD A		
CONFLICT OF INTEREST WITH RESPECT TO THE DECISION ON THE C	OMPENSATION. THIS		
PROCESS WAS MOST RECENTLY UNDERTAKEN IN 2018 FOR THE INCOM	ING PRESIDENT &		
CEO, V. ROSE.			

FORM 990, PART VI, SECTION C, LINE 19:

THE FORUM'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE NOT MADE AVAILABLE TO PUBLIC. THE FORUM'S FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST AND AT THE OFFICE OF THE MINNESOTA ATTORNEY GENERAL.

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