

# MCKINNEY CONVENTION & VISITORS BUREAU

## Grant Application

Fiscal Year 2018-19

### IMPORTANT:

- Please read the McKinney Convention & Visitors Bureau Grant Guidelines (including state-mandated uses for local hotel occupancy tax funds) thoroughly prior to completing this application.
- The Grant Guidelines and Application are available at [www.visitmckinney.com](http://www.visitmckinney.com), by calling 972-547-2059 or by emailing [dguerra@visitmckinney.com](mailto:dguerra@visitmckinney.com)
- **Interested applicants should call to discuss plans for submitting an application in advance of completing the form.** A completed application and all supporting documents are required to be submitted via email, Dropbox or on a thumb drive for consideration by the MCVB board. Please submit the application to:

McKinney Convention & Visitors Bureau  
200 W. Virginia  
McKinney, TX 75069

If emailing or using Dropbox please send document to, or share Dropbox link with: [dguerra@visitmckinney.com](mailto:dguerra@visitmckinney.com)

- If you are interested in a preliminary review by the MCVB Board of Directors of your project, proposal or idea, please complete and submit the **Letter of Inquiry** form prior to completing the grant application, available at [www.visitmckinney.com](http://www.visitmckinney.com), by calling 972-547-2059 or emailing [dguerra@visitmckinney.com](mailto:dguerra@visitmckinney.com).

***Applications must be completed in full, using this form, and must be received by MCVB, via email, Dropbox or on a thumb drive, by 5:00 p.m. on the date indicated in schedule below.***

**Please indicate the type of funding you are requesting:**

### MCVB Promotional Grants for Event or Project

Initiatives, activities or events that promote the City of McKinney for developing tourism for the City of McKinney must meet both criteria as governed by Texas Tax Code § 351.101. (See accompanying document, "Texas Hotel Tax Expenditure Requirements," for qualifying uses for hotel tax.)

### Advertising/Promotional Grants for Events/Projects:

Application Deadline	Presentation to MCVB Board	Board Vote and Award Notification
October 1, 2018	October 22, 2018	November 27, 2018
February 1, 2019	February 26, 2019	March 26, 2019

**CONTACT FOR COMMUNICATIONS BETWEEN MCVB AND ORGANIZATION:**

Name: *JASON LIM*

Title: *ARTISTIC DIRECTOR*

Mailing Address: *1011 THOMAS ST*

City: *DENTON*

ST: *TX*

Zip: *76201*

Phone *940 594 8790*

Fax:

Email: *jasonlim.conductor@gmail.com*

**FUNDING** *(Please See Narrative)*

Total amount requested: *\$1,500*

Matching Funds Available (Y/N and if yes, please indicate amount):

Will funding be requested from any other City of McKinney entity (e.g. McKinney Arts Commission, McKinney Community Development Corporation, City of McKinney Community Support Grant, McKinney Economic Development Corporation, etc.)?

☒ Yes

☒ No

Please provide details and funding requested:

*FEBRUARY 23 - \$500*

*APRIL 6 - \$500*

*MAY 4 - \$500*

**TOURISM-RELATED EVENT OR PROJECT**

Start Date: *FEBRUARY 23 2019*

Completion Date: *MAY 11 2019*

**APPLICANT'S BOARD OF DIRECTORS** *(list may be included as an attachment)*

*Please See Narrative.*

**Provide specific information to illustrate how this Event/Project aligns with one or more of the goals and strategies adopted by McKinney City Council and McKinney Convention & Visitors Bureau.\***

- Ensure application eligibility for MCVB consideration under the Texas Hotel Tax Expenditure Requirements (Texas Tax Code § 351.101). *(Refer to accompanying document.) To be considered for MCVB grant eligibility, your request must satisfy both Category 1 and at least one of the eight state-approved usages in Category #2 as outlined in the Texas Hotel Tax Expenditure Requirements, which are included in this packet.)*
- Demonstrate informed financial planning – addressing long-term costs, budget consequences and sustainability of projects for which funding is requested.
- Identify the opportunities for internal efficiencies through recurring analyses and continuous improvement.
- Balance resources generated by the local Hotel Occupancy Tax.
- Continue to market and highlight McKinney as a unique destination for residents and visitors alike.

**Indicate which goal(s) listed above will be supported by the proposed Event or Project:**

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**Has a request for funding for this Event or Project been submitted to MCVB in the past?**

☐ Yes

☒ No

**Date(s):**

**Financial**

- Provide an overview of the organization's financial status including the impact of this grant request on the organization's mission and goals.
- Please attach your organization's budget for the current year and audited financial statements for the preceding two years. If audited financials are not available, please indicate why.


**What is the total estimated cost for this Event or Project?**

**\$ 36,000**

*(Please provide a budget for the proposed Event or Project.)*

**The undersigned certify that all figures, facts and representations made in this application, including attachments, are true and correct.**

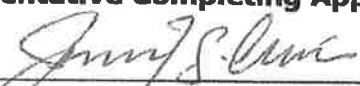
**Chief Executive Officer**

  
Signature

Printed Name *Jason Lim*

Date *1/27/2019*

**Representative Completing Application**

  
Signature

Printed Name *Jason Lim*

Date *1/27/2019*

**INCOMPLETE APPLICATIONS, OR THOSE RECEIVED AFTER THE DEADLINE, WILL NOT BE CONSIDERED.**

## **FUNDING**

The amount requesting is \$1500.

Two boxes checked. Yes and No. The reason is we stage concerts and events that exceed the 100% mark set by the McKinney Arts Commission. We are only allowed to request up to \$20,000 and be able to show that \$40,000 expenses have gone towards events in McKinney. In 2017-2018 we invested over \$60,000 towards events in McKinney. Only *payroll, contract and facilities* categories are allocated for our MAC grant. In 2018-2019 our projected expense projected investment toward McKinney is approximately \$70,000 with \$50,000 towards artistic payroll.

## **BOARD OF DIRECTORS**

Fred Fink – President

Dottie Fink - Director

Kerry Antwine – Director

Kristin Yost - Director

### **I. Organization History**

The Mission Statement of The Odysseus North Texas Chamber Orchestra

The Odysseus Chamber Orchestra is dedicated to deepening, strengthening and broadening its relationship with the communities it serves through music.

Our vision is multi-faceted. Although the Odysseus Chamber Orchestra, a paid professional orchestra that produces high quality professional concerts, we place equal importance in our outreach and education programs that we created over the last several years. With the emphasis to youth, we created the summer music Intensives, The Greater North Texas Youth Orchestra, The Young Artist Viola Competition, The Mentorship Program, The Side-By-Side Program and The Annual School Concerts Tour.

Our Youth Orchestra provides students, parents and audiences with three concerts a season while our professional orchestra provides audiences with 5 to 6 concerts per season.

The organization is run by Artistic Director and Conductor Jason Lim. He organizes and plans logistics from securing dates, venues and guest artists. The Odysseus concert season comprises of categories; Classical Series, Family Concert Series, Holiday Concert Series and Pops Concert Series. The professional orchestra comprises of a core membership of 20 musicians and a large list of sub musicians of up to 30 musicians.

We are applying for this grant to help boost our marketing efforts and to make aware of music lovers from all over to come visit McKinney.

### **II. Tourism – Related Event Project**

This grant application request will go towards promoting and advertising our concert events for the remainder of our 2018-2019 concert season. The project proposed will be multi concerts. We have already fulfilled 2 of our 5 orchestral subscriptions concerts this season thus our request for funding, is the remainder of our 2018-2019 concert season. Dates are listed below:

we have programmed more community oriented and pops concerts. 1. To provide the community with variety of concerts and 2. To maintain financially healthy organization. We also recognize the importance in building an audience and at the same time try to carry the traditions of high artistic vision.

Our annual promotional budget is usually set at around \$1000 each season. Because we allocate most or all of our grant funds to payroll it does not give us much room for advertising. This grant from MCVB will enable us to budget more on Facebook sponsored ads and target areas outside of Teas. This will also allow us to allocate funds towards radio ads such as WRR and NPR. They are usually more costly but it definitely targets our demographic. This will enable us to increase the profile of who we are and to help us brand McKinney as an arts destination.

#### FINANCIAL PLANNING

The considerations we take in our financial planning falls both on long term as well as short term. Here are the factors we take to planning our long term goals:

##### LONG TERM

1. Increase concert programs
2. Increase pay rate for musicians
3. Increase donors
4. Increase audience members
5. Increase staff to assist in the everyday business and operations of the organization

##### SHORT TERM

1. Minimize deficit in the beginning of the season
2. Balance the budget at the end of the season

Please see attached.

1. 2017 IRS 990 return
2. 2018 IRS 990 return
3. 2018-2019 current budget/ statement
4. Youth Orchestra Budget

#### **IV. Marketing and Outreach**

As previously stated, we usually budget \$1000 for marketing every season. It is not enough for us to make an impact and to increase awareness about who we are and what we are doing. Each concert cycle, we budget approximately \$100 to \$150 on Facebook ads. Usually this accompanies with printing of Posters and Flyers. Cost for each concert cycle for printing would be around \$200.

We also utilize every free resource on the web as much as we can. A list of web sites are:

1. Art & Seek
2. Bubble Life
3. City of McKinney Calendar
4. City of McKinney Visitors and Convention Calendar
5. Frisco Arts Calendar
6. Community Impact
7. PSA from Mesquite Radio

		(Actual)	(Actual)
Concerts	5	5	7
Admissions	5875.80	14261.91	16792.72
Expenses	42415.25	60265.29	93352.97
Grants	22084	29930.39	39597.29

#### TIKETING AND AUDIENCE METRICS

We utilize BrownPaperTickets for our ticketing when we do not use the McKinney Performing Arts Center and we have a view on where our audience comes from. When we have more exciting concerts, we will always have audiences from out of state. Our recent Brave Combo concert has shown a purchase from as far as Massachusetts. We will present some charts in our presentation to showcase where our audience comes from.

We will present some charts in our presentation on the 26<sup>th</sup>.

Thank you for the opportunity to apply for this grant and we look forward to helping make McKinney a HUB for the arts.

Form **990-EZ**Department of the Treasury  
Internal Revenue Service**Short Form****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/Form990EZ](http://www.irs.gov/Form990EZ) for instructions and the latest information.

OMB No. 1545-1150

**2018****Open to Public  
Inspection****A** For the 2018 calendar year, or tax year beginning January 1, 2018, and ending December 31, 2018**B** Check if applicable:

- ☐ Address change  
☐ Name change  
☐ Initial return  
☐ Final return/terminated  
☒ Amended return  
☐ Application pending

**C** Name of organization

Odysseus Chamber Orchestra

Number and street (or P.O. box, if mail is not delivered to street address)

1011 Thomas St

City or town, state or province, country, and ZIP or foreign postal code

Denton, TX 76201

**D** Employer identification number

454399538

**E** Telephone number

940-594-8790

**F** Group Exemption

Number ▶

**G** Accounting Method: ☒ Cash ☐ Accrual Other (specify) ▶**I** Website: ▶ [www.odysseusorchestra.com](http://www.odysseusorchestra.com)**H** Check ☐ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).**J** Tax-exempt status (check only one) — ☒ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527**K** Form of organization: ☐ Corporation ☐ Trust ☐ Association ☐ Other**L** Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets

(Part II, column (B)) are \$500,000 or more, file Form 990 instead of Form 990-EZ.

\$ 95883

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)**Check if the organization used Schedule O to respond to any question in this Part I ☐

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	39,597
	2	Program service revenue including government fees and contracts	2	56,286
	3	Membership dues and assessments	3	
	4	Investment income	4	
	5a	Gross amount from sale of assets other than inventory	5a	
	b	Less: cost or other basis and sales expenses	5b	
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6	Gaming and fundraising events:		
	a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
	b	Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b	
c	Less: direct expenses from gaming and fundraising events	6c		
d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d		
7a	Gross sales of inventory, less returns and allowances	7a		
b	Less: cost of goods sold	7b		
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c		
8	Other revenue (describe in Schedule O)	8		
9	<b>Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	95,883	
Expenses	10	Grants and similar amounts paid (list in Schedule O)	10	25,952
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	45,953
	13	Professional fees and other payments to independent contractors	13	1,650
	14	Occupancy, rent, utilities, and maintenance	14	5,264
	15	Printing, publications, postage, and shipping	15	5,309
	16	Other expenses (describe in Schedule O)	16	9,242
	17	<b>Total expenses.</b> Add lines 10 through 16	17	93,353
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	2,530
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	555
	20	Other changes in net assets or fund balances (explain in Schedule O)	20	
	21	<b>Net assets or fund balances at end of year.</b> Combine lines 18 through 20	21	3,085

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 106421

Form **990-EZ** (2018)



**Part V**

**Other Information** (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V ☐

	Yes	No
<b>33</b> Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O . . . . .	<b>33</b>	
<b>34</b> Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O. See instructions . . . . .	<b>34</b>	
<b>35a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)? . . . . .	<b>35a</b>	
<b>b</b> If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O . . . . .	<b>35b</b>	
<b>c</b> Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III . . . . .	<b>35c</b>	
<b>36</b> Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N . . . . .	<b>36</b>	
<b>37a</b> Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ <b>37a</b>		
<b>b</b> Did the organization file <b>Form 1120-POL</b> for this year? . . . . .	<b>37b</b>	
<b>38a</b> Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? . . . . .	<b>38a</b>	
<b>b</b> If "Yes," complete Schedule L, Part II and enter the total amount involved . . . . .	<b>38b</b>	
<b>39</b> Section 501(c)(7) organizations. Enter: . . . . .		
<b>a</b> Initiation fees and capital contributions included on line 9 . . . . .	<b>39a</b>	
<b>b</b> Gross receipts, included on line 9, for public use of club facilities . . . . .	<b>39b</b>	
<b>40a</b> Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ . . . . . ; section 4912 ▶ . . . . . ; section 4955 ▶ . . . . .		
<b>b</b> Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I . . . . .	<b>40b</b>	
<b>c</b> Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 . . . . . ▶ . . . . .		
<b>d</b> Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization . . . . . ▶ . . . . .		
<b>e</b> All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T . . . . .	<b>40e</b>	
<b>41</b> List the states with which a copy of this return is filed ▶ . . . . .		
<b>42a</b> The organization's books are in care of ▶ . . . . . Telephone no. ▶ . . . . . Located at ▶ . . . . . ZIP + 4 ▶ . . . . .		
<b>b</b> 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)? If "Yes," enter the name of the foreign country ▶ . . . . . See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). . . . .	<b>42b</b>	
<b>c</b> At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country ▶ . . . . .	<b>42c</b>	
<b>43</b> Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of <b>Form 1041</b> —Check here and enter the amount of tax-exempt interest received or accrued during the tax year . . . . . ▶ <b>43</b>		
<b>44a</b> Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ . . . . .	<b>44a</b>	
<b>b</b> Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ . . . . .	<b>44b</b>	
<b>c</b> Did the organization receive any payments for indoor tanning services during the year? . . . . .	<b>44c</b>	
<b>d</b> If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O . . . . .	<b>44d</b>	
<b>45a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? . . . . .	<b>45a</b>	
<b>b</b> 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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ. See instructions . . . . .	<b>45b</b>	

# 2018-2019 PROPOSED BUDGET (Updated 1/7/2018)

<b>EXPENSES</b>	BUDGET	PLEDGED	ACTUAL	DIFFERENCE
PAYROLL				
Orchestra	35094.25		11526.5	
Artistic Director & Conductor	7500		3000	
Guest Artists	5905		2420	
Promotions	1000		1014.50	
PRINTING				
Program	2180		610.00	
Tickets (BPT)	0		12.67	
FEES	0			
ASCAP	340.00		349.00	
Insurance	610		575.94	
RENTALS	0			
Music	1000		2133.10	
Facility	4290		2075	
CARTAGE	655		453.39	
VIOLA COMPETITION	1300.00			
WEB	100.00		144	
MEMBERSHIPS	0			
EQUIPMENT	400			
TECH	750		350	
MISC			219.08	
	<b>61124.25</b>			
<b>INCOME</b>				
Balance Forward	3375.46	3375.46		
GRANTS	0	0		
McKinney Arts Commission	20000	14000	20000	0
Frisco Arts	5000	5000	5000	0
Texas Commission on The Arts	500	1000	2394	+1894
North Texas Giving Day	1000	996.77	996.77	-3.23
FOUNDATIONS	0	0		
Love Life	0	5000	5000	+5000
ADS	1500	1500	2500	+1000

2018-2019 greater north texas youth orchestra				
		PROJECTIONS		ACTUAL
EXPENSES				
payroll				
	jason lim	5000		3050
	julie daniels	4000		2000
	Corey Rom	1000		260
admin	jason lim	3000		1000
sectionals		1800		600
pro musicians (Side-by-side)		4000		1540
performance facility rentals		1000		483
rehearsals facility rentals		2500		800
percussion rentals/purchase		1000		331.06
music		1000		646.2
copies		300		81.5
Soloists		600		
insurance		1100		1090.4
t shirt		500		
Other	Meals			150
	Web Site			29.95
		<b>26800</b>		<b>12062</b>
INCOME				
	Donation			440
	Fees			23926
	Deposits			1729.1
	Outstanding			1642
TOTAL				<b>27737</b>
	<b>BALANCE</b>			<b>937.1</b>

Form **990-EZ****Short Form****Return of Organization Exempt From Income Tax**

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

OMB No. 1545-1150

**2017****Open to Public Inspection**Department of the Treasury  
Internal Revenue Service

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

▶ Go to [www.irs.gov/Form990EZ](http://www.irs.gov/Form990EZ) for instructions and the latest information.

<b>A</b> For the 2017 calendar year, or tax year beginning , 2017, and ending , 20	
<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>Odysseus Chamber Orchestra</b> Number and street (or P.O. box, if mail is not delivered to street address) Room/suite <b>1011 Thomas St</b> City or town, state or province, country, and ZIP or foreign postal code <b>Denton, YX 76201</b>
<b>D</b> Employer identification number <b>45-4399538</b>	
<b>E</b> Telephone number <b>940-594-8790</b>	
<b>F</b> Group Exemption Number ▶	
<b>G</b> Accounting Method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual Other (specify) ▶	
<b>I</b> Website: ▶ <a href="http://www.odysseusorchestra.com">www.odysseusorchestra.com</a>	
<b>J</b> Tax-exempt status (check only one) — <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	
<b>K</b> Form of organization: <input type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other	
<b>L</b> Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ. ▶ \$	

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (see the instructions for Part I)Check if the organization used Schedule O to respond to any question in this Part I ☐

<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, and similar amounts received	<b>1</b>	<b>59,880</b>
	<b>2</b> Program service revenue including government fees and contracts	<b>2</b>	
	<b>3</b> Membership dues and assessments	<b>3</b>	
	<b>4</b> Investment income	<b>4</b>	
	<b>5a</b> Gross amount from sale of assets other than inventory	<b>5a</b>	
	<b>b</b> Less: cost or other basis and sales expenses	<b>5b</b>	
	<b>c</b> Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	<b>5c</b>	
	<b>6</b> Gaming and fundraising events		
	<b>a</b> Gross income from gaming (attach Schedule G if greater than \$15,000)	<b>6a</b>	
<b>b</b> Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	<b>6b</b>		
<b>c</b> Less: direct expenses from gaming and fundraising events	<b>6c</b>		
<b>d</b> Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	<b>6d</b>		
<b>7a</b> Gross sales of inventory, less returns and allowances	<b>7a</b>		
<b>b</b> Less: cost of goods sold	<b>7b</b>		
<b>c</b> Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	<b>7c</b>		
<b>8</b> Other revenue (describe in Schedule O)	<b>8</b>		
<b>9</b> Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	<b>9</b>	<b>59,880</b>	
<b>Expenses</b>	<b>10</b> Grants and similar amounts paid (list in Schedule O)	<b>10</b>	
	<b>11</b> Benefits paid to or for members	<b>11</b>	
	<b>12</b> Salaries, other compensation, and employee benefits	<b>12</b>	<b>30,270</b>
	<b>13</b> Professional fees and other payments to independent contractors	<b>13</b>	<b>13,435</b>
	<b>14</b> Occupancy, rent, utilities, and maintenance	<b>14</b>	<b>4,470</b>
	<b>15</b> Printing, publications, postage, and shipping	<b>15</b>	<b>6,492</b>
	<b>16</b> Other expenses (describe in Schedule O)	<b>16</b>	<b>5,659</b>
<b>17</b> Total expenses. Add lines 10 through 16	<b>17</b>	<b>60,325</b>	
<b>Net Assets</b>	<b>18</b> Excess or (deficit) for the year (Subtract line 17 from line 9)	<b>18</b>	<b>0</b>
	<b>19</b> Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	<b>19</b>	<b>1,000</b>
	<b>20</b> Other changes in net assets or fund balances (explain in Schedule O)	<b>20</b>	
	<b>21</b> Net assets or fund balances at end of year. Combine lines 18 through 20	<b>21</b>	<b>555</b>

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 106421

Form **990-EZ** (2017)

**Part V Other Information** (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V ☐

	Yes	No
<b>33</b> Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	<b>33</b>	
<b>34</b> Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	<b>34</b>	
<b>35a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	<b>35a</b>	
<b>b</b> If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	<b>35b</b>	
<b>c</b> Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	<b>35c</b>	
<b>36</b> Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	<b>36</b>	
<b>37a</b> Enter amount of political expenditures, direct or indirect, as described in the instructions	<b>37a</b>	
<b>b</b> Did the organization file Form 1120-POL for this year?	<b>37b</b>	
<b>38a</b> Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	<b>38a</b>	
<b>b</b> If "Yes," complete Schedule L, Part II and enter the total amount involved	<b>38b</b>	
<b>39</b> Section 501(c)(7) organizations. Enter:		
<b>a</b> Initiation fees and capital contributions included on line 9	<b>39a</b>	
<b>b</b> Gross receipts, included on line 9, for public use of club facilities	<b>39b</b>	
<b>40a</b> Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911; section 4912; section 4955	<b>40a</b>	
<b>b</b> Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	<b>40b</b>	
<b>c</b> Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958	<b>40c</b>	
<b>d</b> Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization	<b>40d</b>	
<b>e</b> All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	<b>40e</b>	
<b>41</b> List the states with which a copy of this return is filed		
<b>42a</b> The organization's books are in care of <b>Denton Texas</b> Telephone no. <b>940-594-8790</b> Located at <b>1011 Thomas St</b> ZIP + 4 <b>76201</b>		
<b>b</b> 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)? If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	<b>42b</b>	
<b>c</b> At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country: 	<b>42c</b>	
<b>43</b> Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year <b>43</b>		
<b>44a</b> Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	<b>44a</b>	
<b>b</b> Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	<b>44b</b>	
<b>c</b> Did the organization receive any payments for indoor tanning services during the year?	<b>44c</b>	
<b>d</b> If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	<b>44d</b>	
<b>45a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)?	<b>45a</b>	
<b>b</b> 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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	<b>45b</b>	

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.  
▶ Attach to Form 990 or Form 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2017**

**Open to Public Inspection**

Name of the organization

Odysseus Chamber Orchestra

Employer identification number

45-4399538

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

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

f Enter the number of supported organizations \_\_\_\_\_

g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
<b>Total</b>						

**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) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities 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 business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c 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) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c 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.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

15 Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2016 Schedule A, Part III, line 15	16	%

**Section D. Computation of Investment Income Percentage**

17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2016 Schedule A, Part III, line 17	18	%

- 19a **33 1/3% support tests—2017.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ☐
- b **33 1/3% support tests—2016.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ☐
- 20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ☐



**Part IV Supporting Organizations (continued)**

	Yes	No
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> 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?		
<b>b</b> A family member of a person described in (a) above?		
<b>c</b> 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.		

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> 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 <b>Part VI</b> 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.		
<b>2</b> 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 <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> 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).		

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> 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?		
<b>2</b> 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).		
<b>3</b> 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.		

**Section E. Type III Functionally Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete <b>line 2</b> below.		
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below.		
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see instructions).		
<b>2</b> Activities Test. Answer (a) and (b) below.		
<b>a</b> 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</b> identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	Yes	No
<b>b</b> Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
<b>3</b> Parent of Supported Organizations. Answer (a) and (b) below.		
<b>a</b> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in <b>Part VI</b> .		
<b>b</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.		



**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)****Section D - Distributions**

	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2017 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

**Section E - Distribution Allocations (see instructions)**

	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required—explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013 . . . . .			
c From 2014 . . . . .			
d From 2015 . . . . .			
e From 2016 . . . . .			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			
i Carryover from 2012 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2017 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2017 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2018. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2013 . . . . .			
b Excess from 2014 . . . . .			
c Excess from 2015 . . . . .			
d Excess from 2016 . . . . .			
e Excess from 2017 . . . . .			