

# Promotional and Community Event Grant Application

McKinney Community Development Corporation FY 2025

## Important Information

- Please read the McKinney Community Development Corporation [Grant Guidelines](#) before completing this application.
- The Grant Guidelines are available at [McKinneyCDC.org](#) or by emailing [Info@McKinneyCDC.org](mailto:Info@McKinneyCDC.org).
- Applications must be completed in full, using this online form and submitted by 5 p.m. on the application deadline indicated on the [Grants page](#) of the McKinney CDC website.
- If you are interested in a preliminary review of your grant request or event idea, please [complete and submit the online Letter of Inquiry](#).

Company Name	McKinney Philharmonic Orchestra
Federal Tax I.D.	45-4399538
Incorporation Date	Sunday, January 1, 2012
Mailing Address	1011 Thomas St TX, Denton, 76201
Phone Number	(940) 594-8790
Email	info@mckinneyphilharmonic.org
Website	www.mckinneyphilharmonic.org
Social Media	https://www.facebook.com/mckinneyphilharmonic

**Please provide a detailed narrative about your organization including years established, mission, goals, scope of services, staff, successes, contribution to community, etc.**

MISSION STATEMENT The McKinney Philharmonic Orchestra is deeply committed to fostering a profound and enduring connection with the community of McKinney and its surrounding areas through the transformative power of music.

OUR CORE VALUES

- Artistic Excellence
- Educational Excellence
- Leadership
- Community Engagement
- Lasting Impact
- Organizational Viability and Innovation

MPO's ORIGIN & HISTORY

The McKinney Philharmonic Orchestra was established in May 2012 in Denton, Texas, under the leadership of Artistic Director Jason Lim. Originally known as the Odysseus Chamber Orchestra, it comprises professional classical musicians from the Dallas/Fort Worth area who share a commitment to fostering a vibrant community through the power of music and the arts.

Since its inception, the orchestra has achieved remarkable milestones. Its debut performance in 2012 featured esteemed local soloists, including Christopher Deane, a renowned Professor of Percussion at the University of North Texas.

Building on this early success, Artistic Director Jason Lim commissioned the world premiere of Brad Robin's captivating composition, "Breathe." In 2019, the orchestra performed the highly anticipated US premiere of "Musica Con Cello" by Pavel Karmanov, featuring the brilliant Tess Crowther as the principal cellist and soloist. Additionally, the orchestra embarked on groundbreaking collaborations, including a full ballet production of Prokofiev's enchanting "Peter and the Wolf" with the Denton City Contemporary Ballet, a mesmerizing North Texas premiere performance of Igor Stravinsky's "A Soldier's Tale" with Amity Perry and Company, an extraordinary showcase of Astor Piazzolla's Tango music in partnership with world-renowned double bassist Jeff Bradetich, and a captivating collaboration with legendary guitarist Andy Timmons. The orchestra even shared the stage with the Grammy Award-winning Polka band, Brave Combo, in 2018.

Today, the McKinney Philharmonic has expanded its concert season to encompass up to seven subscription concerts, featuring an innovative and diverse array of series, including Pops, Family, Chamber Music, Recital, and Classical performances. The orchestra's programming has gained national recognition, with Artistic Director Jason Lim being honored with the prestigious 2021 American Prize in Orchestral Programming/Vytautas Marijosius Memorial Award in the professional division.

Despite its relatively short history, the orchestra has garnered an increasing national reputation as an emerging ensemble, earning second and third prizes in the American Prize Competition for professional orchestras in 2014 and 2015, respectively. In 2016, the orchestra received the esteemed Ernst Bacon Memorial Award for its outstanding performances of American Music. Beyond its artistic endeavors, the orchestra actively supports local service clubs, schools, and community events. Moreover, the orchestra has expanded its outreach efforts by offering free chamber music series concerts, hosting amenity concerts in neighborhoods, conducting TEKS-aligned educational school tour performances, and collaborating with the Arts and Music Guild to organize the Summer Music Intensives—a week-long music workshop for middle and high school orchestra students.

In 2017, the organization launched the Greater North Texas Youth Orchestra, thereby enhancing its mission. Members of the McKinney Philharmonic Orchestra serve as mentors to the youth orchestra students, providing them with valuable knowledge and experiences to support their musical aspirations and future careers. The youth orchestra benefits from a range of programs, including the "Mentorship Program," which enables exceptional high school orchestra students to rehearse and perform alongside the McKinney Philharmonic Orchestra in subscription concerts. Additionally, the "Side-by-side" program brings together the youth orchestras and the McKinney Philharmonic Orchestra in an annual collaboration, while the "Concerto Competition" offers an exciting opportunity for young musicians to showcase their talent. In 2019, the organization introduced the Celtic String Ensemble, directed by Keyreel Raskolenko, the Principal 2nd Violinist. This unique program allows students to explore traditional music by ear, offering them a rare and enriching educational experience. In 2023, the GNTYO has expanded to three orchestras to meet the needs of various ages and abilities, and to expand the potential progression for the area's most talented youth.

To better reflect its growing ties with and support from the City of McKinney, the organization changed its name to the McKinney Philharmonic Orchestra (MPO) in 2019. We have undertaken a rebrand in 2023 and are enthusiastically focused on growing awareness of our organization to better fulfill our Mission.

Select One

Nonprofit 501(c)3 (Attach copy of IRS Determination Letter)

IRS Determination Letter for 501(c)3

 501 c 3 IMG.pdf

Representative Completing Application

Jason Lim Artistic Director

<b>Mailing Address</b>	1011 Thomas TX , 76201
<b>Phone Number</b>	(940) 594-8790
<b>Email</b>	jasonlim.conductor@gmail.com

<b>Contact for Communications Between MCDC and Organization</b>	Jason Lim Artistic Director
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<b>Address</b>	1011 Thomas St TX, 7621
<b>Phone Number</b>	(940) 594-8790
<b>Email</b>	jasonlim.conductor@gmail.com

<b>Funding - Total Amount Requested</b>	15000
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<b>Are matching funds available?</b>	<input checked="" type="button" value="Yes"/>
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<b>Matching Funds Available</b>	Admission
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<b>Will funding be requested from any other City of McKinney entity (e.g. Visit McKinney, Arts Commission, City of McKinney Community Support Grant)?</b>	<input checked="" type="button" value="Yes"/>
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<b>Provide name of City of McKinney entity funding source and amount.</b>	McKinney Arts Commission
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<b>Have you received or will funding be requested from other organizations / foundations?</b>	<input type="button" value="No"/>
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<b>Has a request for funding for this Promotional / Community Event been submitted to MCDC in the past five years?</b>	<input type="button" value="No"/>
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### Board of Directors

Julie Daniels, President  
Mark Read, V. President  
Samantha Ettari, Secretary  
Maribel Harris, Treasurer  
Richard Urban, Director

### Leadership Staff

Jason Lim, Artistic Director  
Kevin Garza, Director of the Symphony Orchestra the Greater North Texas Youth Orchestra and Ticketing Director.  
Michelle Campos, Administrative Assistant

Information provided for promotional / community event for which you are seeking funding.

Date(s) of Event	2025 - 2026 MPO Concert Season. 9 concerts
Location(s)	Trinity Presbyterian Church / McKinney ISD Auditoriums
Event(s) open to the public?	<div>Yes</div>

**Ticket Prices**

Student and Senior - \$15 (Classical Concerts)  
Student and Senior - \$20 (POPS Concerts)  
Adult - \$20 (Classical Concerts)  
Adult - \$25 (POPS Concerts)

**Describe the target audience for the event(s).**

Our target audience is a broad target toward music lovers of all generations, demographics, age, race and ethnic backgrounds. We strive to bring people who are avid classical music lovers to non classicals listeners by having a diverse and various series of concerts, ranging from POPS to Classical to Jazz and movie soundtracks catering to all individuals and encouraging new and old music concert goers to our concerts.

Is this the first for this event?	<div>Yes</div>
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**How does event showcase McKinney for tourism and/or business development?**

The McKinney Philharmonic Orchestra has become a region wide attraction. We place image ads in our programs showcasing businesses and we allow small businesses to set up concession stands and table during our concerts.

Expected attendance.	4000
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Expected number or percentage of attendees coming from outside of McKinney.	25
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Does the event support a non-profit (other than applicant)?	<div>No</div>
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What percentage of revenue will be donated (indicate gross or net)?	2
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**Financial Goals of Promotional / Community Event**

Gross Revenue	178375
Projected Expenses	164122
Net Revenue	14252

**Other Funding Sources**

Every year, we apply to agencies like Texas Commission on the Arts and have received three grants specifically targeted certain types of projects. We also apply for grants to Frisco Arts Foundation, participate in the annual Texas Giving Day. We received donations and sponsorships from local banks and

businesses.

**Provide a detailed narrative of the event(s) including mission, goals, activities, schedule, production timeline, goals for growth / expansion, etc.**

Requesting \$15,000

We are applying for this grant early because to be prepared for our 2024 -2025 season, we would like to promote the season as early as June.

Events: Dates and Times and Promotional items and events. In the past, we have used our promotional grant with a specific amount toward certain platforms. The main platforms we have identified are:

Digital Ads

1. Community Impact newspaper; both print and digital.
2. Facebook targeted ads and
3. Google ads
4. Billboard advertising on 380 and 75.

Printed Material

1. Season Brochure

**CONCERT 1**

September 6, 2025, 7:00 PM

POPS Concert Series

McKinney Boyd High School Auditorium

Admission: \$25/\$20

**CONCERT 2**

October 4, 2025, 7:00 PM

Classical Concert Series

McKinney Boyd High School Auditorium

Admission: \$20/\$15

**CONCERT 3**

November 1, 2025, 7:00 PM

Classical Concert Series

Trinity Presbyterian Church

Admission: \$20/\$15

**CONCERT 4**

December 6, 2025, 7:00 PM

Holiday POPS Concert.

ALL STAR CHRISTMAS CONCERT

Trinity Presbyterian Church

Admission: \$25/\$20

**CONCERT 5**

February 7, 2026, 7:00 PM

POPS Concert Series

70's 80's Rock and POPs hits

McKinney Boyd High School.

Admission: \$25/ \$20

**CONCERT 6**

March 7, 2026, 7:00 PM

Classical Concert Series

Trinity Presbyterian Church

Admission: \$20/ \$15

**CONCERT 7**

May 24, 2026 6:30 PM

Side by side with GNTYO  
Admission: \$20/\$15

Chamber Music Concert (2 concerts) Date and time TBD.

### Provide a detailed marketing plan and budget for the event(s).

We are requesting \$15,000 for the period September 2025 to August 2026. Which is the entire concert season for 2025-2026.

With the grant, we will utilize the following. We do take advantage of specials and deals to maximize the impact.

1. Community Impact newspaper; both print and digital.
2. Facebook targeted ads.
3. Google ads.
4. Printed season brochure.
5. Billboard on 380 and 75.

**Plan should include promotional channels (print ads including publication names, social media, radio, posters, flyers, yard signs, etc.)**

Promotional Channel	Budget
Facebook Targeted Ads	10000
Billboard	2000
Google Ads	2000
Season Brochure	1000

**Total Promotional Budget** 15000

**What percentage of the total marketing budget does the grant represent?** 100

**Attendance from previous event(s), if applicable** 3500

### Marketing lessons learned from past (what worked and what did not).

We learnt that we have the reach and we have followers. The challenge is to in the programming. We learnt that even if we spend more on a specific concert because we though the programming will attract the people, if the interest is not there it is rather difficult to persuade people to come to our concerts. For example, this season we progrmaaed a Western Swing concert. We doubled our spending, created more ads with soundtracks, promoted an ad on KHYI and the turnout was underwhelming. Our classical concerts ended up doing better than this concert.

### How will you measure success of your event and marketing campaign? (attendance, website hits, social media indicators, etc.)

The one most important factor is balancing our budget at the ned of the season. Although we have successfully done that for the last 5 seasons, we have enjoyed many seasons of surpluses. With the lack of financial resources in McKinney, our surpluses have enable us to be competitive with orchestra in the likes of Plano Symphony and Richardson Symphony.

We alos set a baseline projected numbers for our audience attendance. By meeting or surpassing our projections, we consider this to be a highly successful season.

Please include examples of past marketing efforts (screen shots of ads, posters, social posts, radio text, etc.)

Unable to insert images here.

Budget

 Budget Breakdown.xlsx

What percentage of Project / Promotional / Community Event funding will be provided by the applicant?

10

Are matching funds available?

Yes


What dollar amount and percentage of Promotional / Community Event funding will be provided by other sources such as sponsorship, registration fees, individual or corporate donations, etc.?

Registration Fees

1500

- 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 budget for the current year and audited financial statements for the preceding two years. If audited financials are not available, please indicate why.

Budget

 24-25 MPO Budget.xlsx

Financial Statements

 2023 990 - EZ.pdf

W9

 MPO.pdf

Completed applications that are eligible for consideration by MCDC will be presented to the board according to the schedule on the Grants page of this website. Presentations will be limited to five (5) minutes followed by time for Board questions.

Please be prepared to provide the information outlined below in your presentation:

- Summary of organization and goals
- Summary of event(s) to include dates, location, ticket prices, target audience, how your event will showcase McKinney, estimated attendance from within and outside of McKinney (and past attendance, if applicable), event features / activities, how event supports your organization's mission, and non-profit beneficiary, if applicable.
- Specific marketing plans for event(s) including promotional channels to be utilized (print, radio, social media, posters, etc.) and budget for each. Please share the percentage of the total marketing budget that this grant application represents.

If funding is approved by the MCDC board of directors, Applicant assures:

The Promotional / Community Event for which financial assistance is sought will be administered by or under the supervision of the applying organization;


- All funds awarded will be used exclusively for advertising, marketing and promotion of the Promotional / Community event described in this application.
- MCDC will be recognized in all marketing, advertising, outreach and public relations as a funder of the Promotional / Community Event. A logo will be provided by MCDC for inclusion on all advertising, marketing and promotional materials. Specifics for audio messaging will be agreed upon by applicant and MCDC and included in an executed performance agreement.
- The organization's officials who have signed the application are authorized by the organization to submit the application.
- Applicant will comply with the MCDC Grant Guidelines in executing the Promotional / Community Event for which funds were received.
- Applicant gives permission for the use of Board presentation images on MCDC website and social media content.
- A final report detailing the success of the Promotional / Community Event, as measured against identified metrics, will be provided to MCDC no later than 30 days following the completion of the Promotional / Community Event.
- Grant funding is provided on a reimbursement basis subsequent to the submission of a reimbursement request, with copies of invoices and paid receipts for qualified expenses. Up to 20% of the grant awarded may be withheld until the **final report on the Promotional/Community Event is provided to MCDC.**

**Applicant Electronic Signature**

**We certify that all figures, facts, and representations made in this application, including attachments, are true and correct to the best of our knowledge.**

Selecting this option indicates your agreement with the above statement.

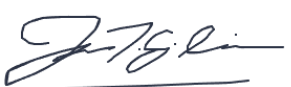
**Chief Executive Officer**



**Date**

Monday, November 18, 2024

**Representative Completing Application**



**Date**

Monday, November 18, 2024

**Notes**

- Incomplete applications or those received after the deadline will not be considered.
- A final report must be provided to MCDC within 30 days of the event / completion of the Promotional / Community Event.
- Final payment of funding awarded will be made upon receipt of final report.
- Please use the Final Report to report your results. A PDF version is also available.



## 2024-2025

	POPS Concert 1	POPS Concert 2	Chamber Musi	Chamber Music	XMAS
<b>Orchestra Payroll</b>	10593	10593	1500	1500	5000
Conductor	3800	3800			3800
Programs	450	600	200	200	450
Music	1000	500			
Cartage					200
Hall	1712	1712	120	120	240
Soloist	1000	5000			1700
Librarian / Manager	300	300			300
	10850	20600	1620	1820	10850

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Classical Concer 1	Classical Concert 2	Classical Concert 3 C	Side by Side	
24684.8	26723.5	10579.2		<b>91173.5</b>
3800	3800	3800		<b>22800</b>
300	450	450		<b>3100</b>
				<b>1500</b>
				<b>200</b>
1712	350	350		<b>6316</b>
	750	2500		<b>10950</b>
300	300	300		<b>1800</b>
24602	21600	18292		<b>110234</b>

# MPO 2024-2025 Budget

## EXPENSES

Projections      Actual

### PAYROLL

Orchestra	92182.1
Guest Soloists	10950
Conductor	22800
Contract	
School Concerts	5000

### ADMINISTRATION

9900

E Director	5000
Librarian/Stage Manager	1800
Box Office/ Ticketing Manager	600
Administrative Assistant	2500

### PROMOTIONS

11000

Facebook	
Posters and Flyers	
other	

### PRINTING

Programs	3500
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### FEES

300

PayPal	
ASCAP	350

### INSURANCE

### FACILITIES

4500

Rehearsals	
Performances	

### CARTAGE

400

### TECH

600

### MISC

440

### Music

Purchases and Rentals	500
Copies	

### SUBSCRIPTIONS

1200

Weebly	
Google Workspace	
Mailchimp	
Microsoft	

### SUPPLIES

500

164122.1

## INCOME

### BALANCE FORWARD

24000

### GRANTS

61750

	MAC 20000	
	Frisco Arts 8000	
	TCA 13750	
	Arts and Music Guild 2000	
	NEA	
/ Community Development 11000 Corporation		
SPONSORSHIPS		6500
	HEB 5000	
	Luthier 1000	
FOUNDATIONS		3500
	Love Life 2500	
as Communities (North Texas Giving Day) 1000		
ADMISSIONS		79875
DONATIONS		2000
ADS		750
	<b>178375</b>	
Surplus/ Deficit		<b>14252.9</b>



**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. 1545-0047

**2023****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.

**A** For the 2023 calendar year, or tax year beginning , 2023, and ending , 20

**B** Check if applicable:

<input type="checkbox"/> Address change	<b>C</b> Name of organization ODYSSEUS CHAMBER ORCHESTRA	<b>D</b> Employer identification number 45-4399538
<input type="checkbox"/> Name change	Number and street (or P.O. box if mail is not delivered to street address) Room/suite	<b>E</b> Telephone number (940) 594-8790
<input type="checkbox"/> Initial return	1011 THOMAS STREET	<b>F</b> Group Exemption Number
<input type="checkbox"/> Final return/terminated	City or town, state or province, country, and ZIP or foreign postal code	
<input type="checkbox"/> Amended return	DENTON TX 76201	
<input type="checkbox"/> Application pending		

**G** Accounting Method: ☒ Cash ☐ Accrual Other (specify):

**I** Website: WWW.MCKINNEYPHILHARMONIC.ORG

**H** Check ☒ if the organization is not required to attach Schedule B (Form 990).

**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 \$ 185,353

**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	185,353
	2	Program service revenue including government fees and contracts	
	3	Membership dues and assessments	
	4	Investment income	
	5a	Gross amount from sale of assets other than inventory	
	5b	Less: cost or other basis and sales expenses	
	5c	Gain or (loss) from sale of assets other than inventory (subtract line 5b from line 5a)	
	6	Gaming and fundraising events:	
	6a	Gross income from gaming (attach Schedule G if greater than \$15,000)	
	6b	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)	
6c	Less: direct expenses from gaming and fundraising events		
6d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)		
7a	Gross sales of inventory, less returns and allowances		
7b	Less: cost of goods sold		
7c	Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a)		
8	Other revenue (describe in Schedule O)		
9	<b>Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	185,353	
Expenses	10	Grants and similar amounts paid (list in Schedule O)	70,173
	11	Benefits paid to or for members	
	12	Salaries, other compensation, and employee benefits	
	13	Professional fees and other payments to independent contractors	17,667
	14	Occupancy, rent, utilities, and maintenance	
	15	Printing, publications, postage, and shipping	
	16	Other expenses (describe in Schedule O)	88,221
	17	<b>Total expenses.</b> Add lines 10 through 16	176,061
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 9)	9,292
	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)	30,299
	20	Other changes in net assets or fund balances (explain in Schedule O)	-12,299
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	27,292

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990-EZ (2023)

## Part II Balance Sheets (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II

		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments .....	30,299	22 27,292
23	Land and buildings .....	0	23 0
24	Other assets (describe in Schedule O) .....	0	24 0
25	<b>Total assets</b> .....	30,299	25 27,292
26	<b>Total liabilities</b> (describe in Schedule O) .....	0	26 0
27	<b>Net assets or fund balances</b> (line 27 of column (B) <b>must</b> agree with line 21) ..	30,299	27 27,292

<b>Part III</b>		<b>Statement of Program Service Accomplishments</b> (see the instructions for Part III)
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Check if the organization used Schedule O to respond to any question in this Part III

What is the organization's primary exempt purpose? MUSIC EDUCATION

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

## Expenses

(Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)

28 SEE ATTACHMENT

(Grants \$ ) If this amount includes foreign grants, check here

29

(Grants \$ ) If this amount includes foreign grants, check here .....

30 29a

(Grants \$ ) If this amount includes foreign grants, check here

	Other program services (describe in Schedule O)	
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(Grants \$ ) If this amount includes foreign grants, check here

	Other amounts include foreign grants; check here	31a
<b>32</b>	<b>Total program service expenses</b> (add lines 28a through 31c)	

**32** Total program service expenses (add lines 28a through 31a) . . . . . **32**

**Part IV** List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated -- see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV

[illegible]



**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
33 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 . . . . .		X
34 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 . . . . .		X
35a 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)? . . . . .		X
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 . . . . .		X
c 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 . . . . .		X
36 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 . . . . .		X
37a Enter amount of political expenditures, direct or indirect, as described in the instructions . . . . . 37a		
b Did the organization file Form 1120-POL for this year? . . . . .		X
38a 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? . . . . .		X
b If "Yes," complete Schedule L, Part II, and enter the total amount involved . . . . . 38b		
39 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on line 9 . . . . . 39a		
b Gross receipts, included on line 9, for public use of club facilities . . . . . 39b		
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911: . . . . . ; section 4912: . . . . . ; section 4955 . . . . .		
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 . . . . .		X
c 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. . . . .		
d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization . . . . .		
e 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. . . . .		X
41 List the states with which a copy of this return is filed: NONE		
42a The organization's books are in care of: SEE ATTACHMENT Telephone no. . . . .		
Located at: . . . . . ZIP + 4 . . . . .		
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)? . . . . .	Yes	No
If "Yes," enter the name of the foreign country: . . . . .		X
See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). . . . .		
c At any time during the calendar year, did the organization maintain an office outside the United States? . . . . .		X
If "Yes," enter the name of the foreign country: . . . . .		
43 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 . . . . . 43		
44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ. . . . .		X
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. . . . .		X
c Did the organization receive any payments for indoor tanning services during the year? . . . . .		X
d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O . . . . .		
44d N/A		
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)? . . . . .		X
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 . . . . .		X
45b		



46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

	Yes	No
46		X

**Part VI Section 501(c)(3) Organizations Only**

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI

47 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

	Yes	No
47		X
48		X
49a		X
49b		X

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

49a Did the organization make any transfers to an exempt non-charitable related organization?

b If "Yes," was the related organization a section 527 organization?

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees, and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC/1099-NEC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
NONE				

f Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation
NONE		

d Total number of other independent contractors each receiving over \$100,000

52 Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations must attach a completed Schedule A

☐ Yes ☒ No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

**Sign Here**

Signature of officer  
JASON LIM  
Type or print name and title  
SECRETARY TREASURER

Date

**Paid Preparer Use Only**

Print/Type preparer's name  
HELGA GAEDE  
Preparer's signature  
Date  
05-15-2024  
Check ☐ if self-employed  
PTIN  
P01903712  
Firm's EIN  
431871840  
Firm's address  
1012 W UNIVERSITY DR  
Phone no.  
940-387-7078

May the IRS discuss this return with the preparer shown above? See instructions

☐ Yes ☒ No

**SCHEDULE A**  
**(Form 990)**

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

**2023**

**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).)
- 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 $\frac{1}{3}$ % 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 $\frac{1}{3}$ % 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 on 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). 3

(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) SEE ATTACHMENT						
(B)						
(C)						
(D)						
(E)						
Total						

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

Schedule A (Form 990) 2023



**Part IV Supporting Organizations**

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

**Section A. All Supporting Organizations**

	Yes	No
<b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		X
<b>2</b> 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 <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).		X
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.		X
<b>b</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 <b>Part VI</b> when and how the organization made the determination.		X
<b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.		X
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.		X
<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		X
<b>c</b> 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 <b>Part VI</b> 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.		X
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in <b>Part VI</b> , 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).		X
<b>b Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		X
<b>c Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		X
<b>6</b> 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 <b>Part VI</b> .		X
<b>7</b> 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).		X
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).		X
<b>9a</b> 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 <b>Part VI</b> .		X
<b>b</b> Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .		X
<b>c</b> Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI</b> .		X
<b>10a</b> 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 line 10b below.		X
<b>b</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.)		X

**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 on lines 11b and 11c below, the governing body of a supported organization?		
<b>b</b> A family member of a person described on line 11a above?		
<b>c</b> A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in <b>Part VI</b> .		
<b>11a</b>		X
<b>11b</b>		X
<b>11c</b>		X

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in <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 officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
<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.		
<b>1</b>		X
<b>2</b>		X

**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).		
<b>1</b>		

**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 on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.		
<b>1</b>		
<b>2</b>		
<b>3</b>		

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

	Yes	No
<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 governmental entity (see instructions).		
<b>2</b> Activities Test. Answer lines 2a and 2b 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.		
<b>b</b> Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <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 lines 3a and 3b 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? If "Yes" or "No," 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.		
<b>2a</b>		
<b>2b</b>		
<b>3a</b>		
<b>3b</b>		

**SCHEDULE O**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**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 Form 990-EZ.

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

OMB No. 1545-0047

**2023**

**Open to Public  
Inspection**

Name of the organization

ODYSSEUS CHAMBER ORCHESTRA

Employer identification number

45-4399538

LINE 10 - SALARIES ORCHESTRA

LINE 16 - FACILITY RENTAL PROMOTIONS INSURANCE CARTAGE SUPPLIES

LINE 20 - REDUCTION IN ASSET BALANCE FOR PRIOR YEAR

CLIENT COPY

# 2023 FORM 990 PRIMARY EXEMPT PURPOSE

ATTACHMENT 1: PAGE 1 - 990-EZ PAGE 2, PART III

OPEN TO PUBLIC

INSPECTION

For calendar year 2023, or tax period beginning , and ending

Name of Organization

ODYSSEUS CHAMBER ORCHESTRA

Employer Identification Number

45-4399538

Primary Purpose

MUSIC EDUCATION

CLIENT COPY

2023 FORM 990 PROGRAM SERVICE ACCOMPLISHMENT

ATTACHMENT 2: PAGE 1 - 990-EZ PAGE 3, PART III

OPEN TO PUBLIC

INSPECTION

For calendar year 2023, or tax period beginning

, and ending

Name of Organization

ODYSSEUS CHAMBER ORCHESTRA

Employer Identification Number

45-4399538

Part III - Statement of Program Service Accomplishments

Grants and allocations

Amount includes foreign grants

Program service expenses

Exempt Purpose Achievements

VARIOUS GRANTS FOUNDATIONS AND DONATIONS

CLIENT COPY

# 2023 FORM 990 CURRENT OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

ATTACHMENT 3: PAGE 1 - 990-EZ PAGE 2, PART IV

OPEN TO PUBLIC

INSPECTION

For calendar year 2023, or tax period beginning , and ending

Name of Organization

ODYSSEUS CHAMBER ORCHESTRA

Employer Identification Number

45-4399538

(A) Name and Title	(B) Average hours per week devoted to position	(C) Compensation (Form W-2/1099-MISC) (if not paid, enter -0-)	(D) Cont. to employee ben. plans & def. comp.	(E) Expense account & other compensation
ODYESSEUS CHAMBER ORCHESTRA PRESIDENT	0.00	0	0	0
ODYESSEUS CHAMBER ORCHESTRA SECRETARY TREASURER	0.00	0	0	0
ODYESSEUS CHAMBER ORCHESTRA DIRECTOR	0.00	0	0	0
ODYESSEUS CHAMBER ORCHESTRA DIRECTOR	0.00	0	0	0



2023 FORM 990 BOOKS ARE IN CARE OF

ATTACHMENT 4 - 990-EZ PAGE 3, PART V, LINE 42A

OPEN TO PUBLIC

INSPECTION

For calendar year 2023, or tax period beginning , and ending

Name of Organization

ODYSSEUS CHAMBER ORCHESTRA

Employer Identification Number

45-4399538

Part V - Line 42a

Individual Name

or

Business Name:

ODYSSEUS CHAMBER ORCHESTRA

Street Address 1011 THOMAS ST

U.S. Address:

Zip code 76201

or

City DENTON

State TX

Foreign Address

City

Province or State

Country

Postal code

Phone Number (940) 594-8790

Fax Number

# 2023 FORM 990 INFORMATION ABOUT SUPPORTED ORGANIZATIONS

ATTACHMENT 5: SCH A PAGE 1, PART I, LINE 12G - INFO ABOUT SUPPORTED ORGS  
OPEN TO PUBLIC INSPECTION

For calendar year 2023, or tax period beginning , and ending

Name of Organization

ODYSSEUS CHAMBER ORCHESTRA

Employer Identification Number

45-4399538

(i) Name of Supported Organization	(ii) EIN	(iii) Type of Org (Described on lines 1-10 or IRC Section (See instructions))	(iv) Organization Listed in Governing Document		(v) Amount of Monetary Support (See instructions)	(vi) Amount of Other Support (See instructions)
			Yes	No		
ODYESSEUS CHAMBER ORCHESTRA MCKINNEY PHILHARMONIC ORCHESTRA	45-4399538	1	X			
THE GREATER NOTH TEXAS YOUTH ORCHESTRA	45-4399538	2	X			
	45-4939538	3	X			
Total						

**WELCOME TO H&R BLOCK®**

Thank you for choosing H&R BLOCK®. If you are having your taxes prepared, and you are at an office operated by HRB Tax Group, Inc. ("HRB"), your tax return will be prepared by HRB. If you are at a franchised H&R BLOCK® office, your return will be prepared by an independently owned and operated franchisee ("Franchisee"). In either case, this Client Service Agreement ("CSA") explains what to expect from your tax preparer and from other companies that may provide you products and services, and what is needed from you so they can provide great service. This CSA contains an Arbitration Agreement, the terms of which are set forth below.

If you are having your taxes prepared, your tax preparer will (1) interview you to learn details that affect your taxes, and (2) ask you for documents to help accurately record your income, credits or deductions. You agree to provide information related to all products and services you receive, including information that affects your tax situation, and to verify the accuracy of this information. If you discover that you did not provide complete and accurate information, you agree to file an amended return. Your tax preparer can prepare any amendment for you, but there may be an additional charge. The use and disclosure of information you provide to H&R BLOCK® is governed by the Privacy Notice provided to you. You may request a copy of our most recent Privacy Notice from any office, or you may access a copy at [www.hrblock.com](http://www.hrblock.com).

**CONSENT TO USE AND DISCLOSE**

You authorize HRB to use and disclose to its affiliate, H&R Block Personalized Services, LLC, all tax return information from your 2023 tax return and information regarding how long you have been an H&R BLOCK® client, so that we can develop, offer, and provide products and services tailored to or that may interest you, including for example: bookkeeping, payroll, and accounting services; tax planning advice based on your particular tax situation; products and services customized to you; updates regarding tax law changes and how they may impact future returns; new or improved products and services; and state and federal tax audit support services.

H&R Block Personalized Services may use service providers and business partners to accomplish these tasks. By signing this CSA, you are giving HRB permission to use or disclose your information as shown above through July 31, 2027. At any time, you may call 1-800-HRBLOCK to cancel your consent for any authorized use, and such cancellation will not have any effect on H&R BLOCK®'s ability or willingness to provide the contracted services.

**ARBITRATION IF A DISPUTE ARISES ("ARBITRATION AGREEMENT")**

**1. Scope of Arbitration Agreement.** You and the H&R Block Parties agree that all disputes and claims between you and the H&R Block Parties shall be resolved through binding individual arbitration unless you opt out of this Arbitration Agreement using the process explained below. However, to the fullest extent permitted by applicable law, either you or the H&R Block Parties may elect that an individual claim be decided in small claims court, as long as it is brought and maintained as an individualized claim and is not removed or appealed to a court of general jurisdiction. All issues are for the arbitrator to decide, except that issues relating to the arbitrability of disputes and the validity, enforceability, and scope of this Arbitration Agreement, including the interpretation of and compliance with sections 2, 4, and 6 below, shall be decided by a court and not an arbitrator. The terms "H&R Block Parties" or "we" or "us" in this Arbitration Agreement include HRB, Emerald Financial Services, LLC, and Franchisee, along with their predecessors, successors, and assigns, and each of the past, present, and future direct or indirect parents, subsidiaries, affiliates, officers, directors, agents, employees, and franchisees of any of them. The term "you" in this Arbitration Agreement includes the business/entity taxpayer and its predecessors, successors, officers, directors, agents, and employees.

**Arbitration Opt Out:** You may opt out of this Arbitration Agreement within 30 days after you sign this CSA by filling out the form at [www.hrblock.com/goto/businessoptout](http://www.hrblock.com/goto/businessoptout), or by sending a signed letter to Arbitration Opt Out, P.O. Box 32818, Kansas City, MO 64171. The letter should include your business/entity name, the name of your authorized representative submitting the opt out, the address of your principal place of business, the first five digits of your Federal Employer Identification Number, and the words "Reject Arbitration." If you opt out of this Arbitration Agreement, any prior arbitration agreement shall remain in force and effect.

**2. Commencing Arbitration.** You or we may commence an arbitration proceeding only if you and we do not reach an agreement to resolve the dispute or claim during the Informal Resolution Period (defined below).

**a. Pre-Arbitration Notice of Dispute.** A party who intends to seek arbitration must first mail a written Notice of Dispute ("Notice") to the other party. The Notice to the H&R Block Parties should be addressed to: H&R Block-Legal Department, Attention: Notice of Dispute, One H&R Block Way, Kansas City, MO 64105. The Notice to you will be sent to the last known address on file with the H&R Block Parties. The Notice must be on an individual basis and include all of the following: (1) the claimant's name, address, telephone number, and e-mail address; (2) the nature or basis of the dispute or claim; (3) the specific relief sought; and (4) the claimant's authorized representative's signature.

**b. Informal Settlement Conference.** After the Notice containing all of the information required above is received, within 60 days either party may request an individualized discussion (by telephone or videoconference) regarding informal resolution

of the dispute ("Informal Settlement Conference"). If timely requested, the parties will work together in good faith to select a mutually agreeable time for the Informal Settlement Conference. You and our business representative must both personally participate in a good-faith effort to settle the dispute without the need to proceed with arbitration. The requirement of personal participation in an Informal Settlement Conference may be waived only if both you and we agree in writing. Any counsel representing you or us may also participate; however, if you have retained counsel, a signed statement is required by law to authorize the H&R Block Parties to disclose your confidential tax and account records to your counsel. Any applicable statute of limitations will be tolled for the claims and relief set forth in the Notice during the period between the date that either you or we send the other a fully complete Notice, until the later of (1) 60 days after receipt of the Notice; or (2) if a Settlement Conference is timely requested, 30 days after completion of the Settlement Conference (the "Informal Resolution Period"). The parties agree that the existence or substance of any settlement discussions are confidential and shall not be disclosed, except as provided by applicable law.

**c. Enforcement of Pre-Arbitration Requirements.** The Notice and Informal Settlement Conference requirements are essential so that you and we have a meaningful chance to resolve disputes informally before proceeding to arbitration. A court will have authority to enforce this section 2, including the power to enjoin the filing or prosecution of an arbitration or the assessment of or demand for payment of fees in connection with an arbitration, if the party who intends to seek arbitration does not first provide a fully complete Notice and participate in a timely requested Informal Settlement Conference. In addition, unless prohibited by applicable law, the arbitration administrator shall not accept, assess or demand fees for, or administer an arbitration commenced during the Informal Resolution Period.

**3. How Arbitration Works.** Arbitration shall be conducted by the American Arbitration Association ("AAA") pursuant to its Consumer Arbitration Rules or (if applicable) Commercial Arbitration Rules ("AAA Rules"), as modified by this Arbitration Agreement. The AAA Rules are available on AAA's website [www.adr.org](http://www.adr.org). If AAA is unavailable or unwilling to administer the arbitration consistent with this Arbitration Agreement, the parties shall agree to, or the court shall select, another arbitration provider. Unless the parties agree otherwise, any arbitration hearing shall take place in the county of your principal place of business. The arbitrator will be either a retired judge or an attorney specifically licensed to practice law in the state of your principal place of business and selected by the parties from the arbitration provider's national roster of arbitrators. The arbitrator will be selected using the following procedure: (1) the arbitration provider will send the parties a list of five candidates meeting this criteria; (2) if the parties cannot agree on an arbitrator from the list, each party shall return its list to the arbitration provider within 10 days, striking up to two candidates, and ranking the remaining candidates in order of preference; (3) the arbitration provider shall appoint as arbitrator the candidate with the highest aggregate ranking; and (4) if for any reason the appointment cannot be made according to this procedure, the arbitration provider will provide the parties a new list of five candidates meeting the above criteria until an appointment can be made.

**4. Waiver of Right to Bring Class Action and Representative Claims.** All arbitrations shall proceed on an individual basis. The arbitrator is empowered to resolve the dispute with the same remedies available in court, including compensatory, statutory, and punitive damages; attorneys' fees; and declaratory, injunctive, and equitable relief. However, the arbitrator's rulings or any relief granted must be individualized to you and shall not apply to or affect any other client. The arbitrator is also empowered to resolve the dispute with the same defenses available in court, including but not limited to statutes of limitation. **You and the H&R Block Parties also agree that each may bring claims against the other in arbitration only in your or their respective individual capacities and in so doing you and the H&R Block Parties hereby waive the right to a trial by jury, to assert or participate in a class action lawsuit or class action arbitration, to assert or participate in a private attorney general lawsuit or private attorney general arbitration, and to assert or participate in any joint or consolidated lawsuit or joint or consolidated arbitration of any kind.** If, after exhaustion of all appeals, a court decides that applicable law precludes enforcement of any of this section's limitations as to a particular claim or any particular request for a remedy for a claim (such as a request for public injunctive relief), then the parties agree that the particular claim or the particular request for a remedy (and only that particular claim or particular request for a remedy) must remain in court and be severed from any arbitration. No arbitration shall proceed in any manner as a class action arbitration, private attorney general arbitration, or arbitration involving joint or consolidated claims, unless all parties consent in writing.

**5. Arbitration Costs.** Payment of all filing, administrative, case-management, arbitrator, and hearing fees will be governed by AAA Rules, but if you inform us that you cannot afford to pay your share of the fees, we will consider advancing those fees on your behalf and will do so if required by applicable law. In addition, we will reimburse you for your share of the fees at the conclusion of the arbitration (regardless of who wins) so long as (i) you complied with sections 2 and 4 above and section 6 below, and (ii) neither the substance of your claim nor the relief you sought was determined to be frivolous or brought for an improper purpose as measured by the standards set forth in Federal Rule of Civil Procedure 11(b); otherwise, the payment of fees will be governed by AAA Rules and you agree to reimburse the H&R Block Parties for all fees advanced on your behalf.



**6. Arbitration of Similar Claims.** If 25 or more claimants submit Notices or seek to file arbitrations raising similar claims and are represented by the same or coordinated counsel (regardless of whether the cases are submitted simultaneously), all of the cases must be resolved in arbitration in stages using staged bellwether proceedings if they are not resolved during the Informal Resolution Period. You agree to this process even though it may delay the arbitration of your claim. In the first stage, each side shall select 10 cases (20 cases total) to be filed in arbitration and resolved individually by different arbitrators, with each case assigned to an arbitrator from the state of the claimant's principal place of business. In the meantime, no other cases may be filed in arbitration, and the AAA shall not accept, assess or demand fees for, or administer arbitrations that are commenced in violation of this section. The arbitrators are encouraged to resolve cases within 120 days of appointment or as swiftly as possible, consistent with principles of fundamental fairness. If the remaining cases are unable to be resolved after the conclusion of the first stage bellwether proceeding, each side shall select up to another 10 cases (20 cases total) to be filed in arbitration and resolved individually in accordance with this Arbitration Agreement. During this second stage, no other cases may be filed in arbitration. If any claims remain after the second stage, the process will be repeated until all claims are resolved through settlement or arbitration, with two alterations. First, a total of 50 cases may be filed each round (unless a higher number of cases is mutually agreed upon in writing). Second, arbitrators who were assigned cases in previous rounds may be appointed to new cases. If this section 6 applies to a Notice, the statute of limitations applicable to the claims and relief set forth in that Notice shall be tolled from the beginning date of the Informal Resolution Period until that Notice is selected for a bellwether proceeding, withdrawn, or otherwise resolved. A court will have authority to enforce this section 6, including to enjoin the filing, assessing or demanding fees for, administration of, or prosecution of arbitrations.

**7. Other Terms.** This Arbitration Agreement shall be governed by, and interpreted, construed, and enforced in accordance with, the Federal Arbitration Act and other applicable federal law. Except as set forth above in section 4, if any portion of this Arbitration Agreement is deemed invalid or unenforceable, it will not invalidate the remaining portions of the Arbitration Agreement. No arbitration award or decision will have any preclusive effect as to any issues or claims in any dispute, arbitration, or court proceeding where any party was not a named party in the arbitration, unless and except as required by applicable law.

**THIS AGREEMENT CONTAINS A BINDING MUTUAL ARBITRATION AGREEMENT**

The undersigned has the authority to sign on behalf of the taxpayer, acknowledges that the Privacy Notice was provided prior to service, and understands and voluntarily agrees on your behalf to the terms of the Arbitration Agreement described above, as well as all other terms, conditions and disclosures presented in this CSA.

ODYSSEUS CHAMBER ORCHESTRA  
Taxpayer's Name

05/15/2024  
Date

SIGNATURE ON FILE  
Taxpayer's Representative's Signature

JASON LIM SECRETARY TREAS  
Taxpayer's Representative's Name and Title

HRB TAX GROUP INC  
1012 W UNIVERSITY DR  
DENTON TX 76201  
9403877078

45-4399538  
ODYSSEUS CHAMBER ORCHESTRA

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INSTRUCTIONS FOR FILING 2023 FEDERAL FORM 990-EZ

.YOU HAVE ELECTED TO E-FILE FEDERAL FORM 990-EZ

CLIENT COPY

IRS e-file Signature Authorization  
for a Tax Exempt Entity

OMB No. 1545-0047

Department of the Treasury  
Internal Revenue Service

For calendar year 2023, or fiscal year beginning \_\_\_\_\_, 2023, and ending \_\_\_\_\_, 20\_\_\_\_

Do not send to the IRS. Keep for your records.  
Go to [www.irs.gov/Form8879TE](http://www.irs.gov/Form8879TE) for the latest information.

2023

Name of filer

ODYSSEUS CHAMBER ORCHESTRA

EIN or SSN

45-4399538

Name and title of officer or person subject to tax

JASON LIM SECRETARY TREASURER

**Part I Type of Return and Return Information**

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a Form 990 check here	<input type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	
2a Form 990-EZ check here	<input checked="" type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b	185,353
3a Form 1120-POL check here	<input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b	
4a Form 990-PF check here	<input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part V, line 5)	4b	
5a Form 8868 check here	<input type="checkbox"/>	b Balance due (Form 8868, line 3c)	5b	
6a Form 990-T check here	<input type="checkbox"/>	b Total tax (Form 990-T, Part III, line 4)	6b	
7a Form 4720 check here	<input type="checkbox"/>	b Total tax (Form 4720, Part III, line 1)	7b	
8a Form 5227 check here	<input type="checkbox"/>	b FMV of assets at end of tax year (Form 5227, Item D)	8b	
9a Form 5330 check here	<input type="checkbox"/>	b Tax due (Form 5330, Part II, line 19)	9b	
10a Form 8038-CP check here	<input type="checkbox"/>	b Amount of credit payment requested (Form 8038-CP, Part III, line 22)	10b	

**Part II Declaration and Signature Authorization of Officer or Person Subject to Tax**

Under penalties of perjury, I declare that ☐ I am an officer of the above entity or ☐ I am a person subject to tax with respect to (name of entity) \_\_\_\_\_, (EIN) \_\_\_\_\_ and that I have examined a copy of the 2023 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

☒ I authorize HRB TAX GROUP INC to enter my PIN 11046 as my signature  
ERO firm name

Enter five numbers, but  
do not enter all zeros

on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

☐ As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax

Date

**Part III Certification and Authentication**

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

750326 92715

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2023 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature

Date 05-15-2024

**ERO Must Retain This Form - See Instructions**  
**Do Not Submit This Form to the IRS Unless Requested To Do So**

For Privacy Act and Paperwork Reduction Act Notice, see the instructions.

Form 8879-TE (2023)

INTERNAL REVENUE SERVICE  
P. O. BOX 2508  
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: **AUG 10 2012**

ODYSSEUS CHAMBER ORCHESTRA  
C/O JASON LIM  
1011 THOMAS ST  
DENTON, TX 76201

Employer Identification Number:  
45-4399538  
DLN:  
17053187340012  
Contact Person:  
NANCY L HEAGNEY ID# 31306  
Contact Telephone Number:  
(877) 829-5500  
Accounting Period Ending:  
December 31  
Public Charity Status:  
170(b)(1)(A)(vi)  
Form 990 Required:  
Yes  
Effective Date of Exemption:  
January 13, 2012  
Contribution Deductibility:  
Yes  
Addendum Applies:  
No

Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. We determined that you are a public charity under the Code section(s) listed in the heading of this letter.

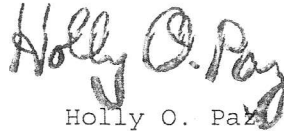
Please see enclosed Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, for some helpful information about your responsibilities as an exempt organization.

Letter 947 (DO/CG)



ODYESSEUS CHAMBER ORCHESTRA

Sincerely,

A handwritten signature in dark ink, appearing to read "Holly O. Paz". The signature is written in a cursive, flowing style with some loops and flourishes.

Holly O. Paz  
Director, Exempt Organizations  
Rulings and Agreements

Enclosure: Publication 4221-PC