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Form 990-EŽ

Department of the Treasury Internal Revenue Service

* Return of Organization Exempt From Income Tax

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

2018

OMB No 1545-1150

▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Go to www.irs gov/Form990EZ for instructions and the latest information.

Open to Public Inspection

2018, and ending A For the 2018 calendar year, or tax year beginning July 1 June 30 20 19 B Check if applicable C Name of organization D Employer identification number Address change 13-3349320 Greenwich Village Orchestra Boom/suite Name change Number and street (or P O box, if mail is not delivered to street address) E Telephone number Initial return 917-822-6502 Final return/terminated City or town, state or province, country, and ZIP or foreign postal code F Group Exemption Amended return Number ▶ Application pending New York NY 10014 Accrual Other (specify) Check ► ☐ if the organization is not G Accounting Method ✓ Cash Website: ▶ required to attach Schedule B www gvo org J Tax-exempt status (check only one) - 501(c)(3) (Form 990, 990-EZ, or 990-PF) √ (insert no) ☐ 4947(a)(1) or Other Trust 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 68,639 Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) Part I Check if the organization used Schedule O to respond to any question in this Part I Contributions, gifts, grants, and similar amounts received 1 50,089 2 2 Program service revenue including government fees and contracts 18,391 3 3 Membership dues and assessments 0 4 Investment income 4 0 5a Gross amount from sale of assets other than inventory 5a 5b b Less cost or other basis and sales expenses Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) 5c C 0 Gaming and fundraising events 6 Gross income from gaming (attach Schedule G if greater than Revenue \$15,000) 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 Less direct expenses from gaming and fundraising events 6c Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c) 6d 0 7a Gross sales of inventory, less returns and allowances 7a 70 Less cost of goods sold n c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) 7с 70 R 8 Other revenue (describe in Schedule O) 89 9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 9 68,639 10 Grants and similar amounts paid (list in Schedule O) 10 0 11 Benefits paid to or for members 11 0 Salaries, other compensation, and employee benefits 12 12 26,313 13 Professional fees and other payments to independent co 13 11,425 14 Occopancy, rent, utilities, and maintenance 14 21,616 15 Printing, publications, postage, and shipping 15 2,683 16 Other expenses (describe in Schedule O) 16 12,502 Total expenses. Add lines 10 through 16 17 17 74,539 Excess or (deficit) for the year (Subtract line 17 from line 9) 18 18 -5,900 Net Assets 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 95,295 20 Other changes in net assets or fund balances (explain in Schedule O) 20 Net assets or fund balances at end of year Combine lines 18 through 20 21 89.395

<u>'020</u>

For Paperwork Reduction Act Notice, see the separate instructions.



Cat No 106421



Form 990-EZ (2018)

Pa	rt II Balance Sheets (see the instructions	for Part II)					
_	Check if the organization used Schedule	O to respond to a	ny question in this	Part II .	,		. 🗆
				(A) Beginning of year	ļ,	(B) E	nd of year
22	Cash, savings, and investments			72,095			66,195
23	Land and buildings				23		
24	Other assets (describe in Schedule O)			23,200			23,200
25	Total assets		}	95,295		\dashv	
26	Total liabilities (describe in Schedule O)	· (D)	h line 21\		-		20 20 5
27 Par	Net assets or fund balances (line 27 of column Statement of Program Service Accom			95,295 Part III)	21		89,395
r en	Check if the organization used Schedule					Ex	penses
W/ha	t is the organization's primary exempt purpose?	symphonic concert		Turkin			for section
Desc as m	cribe the organization's program service accomplineasured by expenses. In a clear and concise mons benefited, and other relevant information for each	shments for each on nanner, describe the	f its three largest p	orogram services, d, the number of		ınızatı	and 501(c)(4) ons, optional for
28	The Greenwich Village Orchestra is a volunteer sym						
	concert performances to a diverse community through			on we perform			
	six concerts and two chamber concerts to a combine						
	(Grants \$) If this amount	ıncludes foreign gra	ants, check here	. ▶ 📋	28a	+	74,539
29	•••••						
						1	
	(Grants \$) If this amount	ıncludes foreign gra	nte chack hara		29a		
30	Grants \$) It this amount	includes loreign gra	inis, check here .		254	\vdash	
30							
]	
	(Grants \$) If this amount	includes foreign gra	ents check here	▶ □	30a		
31	Other program services (describe in Schedule O)	morado rororgir gra					
•	· ·	includes foreign gra	ints, check here .	▶ □	31a		
32	Total program service expenses (add lines 28a			>	32		
Par	List of Officers, Directors, Trustees, and Key	/ Employees (list each	one even if not com	pensated—see the in	struc	tions	for Part IV)
	Check if the organization used Schedule	O to respond to a		- 	<u> </u>		
	(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC (if not paid, enter -0-)	(d) Health benefits, contributions to employe benefit plans, and deferred compensation	0		ated amount of compensation
Barba	ara Yahr, Music Director						
		12	8,975	5	0		0
Jasor	n Smoller, Executive Director						
		6	8,350		0		0
<u>Amy</u>	Norovich, President						
		3)	0		0
Barna	aby Kendall, Vice President				ļ		
		3)	0		0
Max I	łaggblom, Treasurer	_	_		_ [
		3			<u> </u>		0
Jeii F	llye, Secretary		_				•
	Mahl, Manager	2	9	<u> </u>	0		0
EIIC N	narii, wariager	3	2,500	,			0
 Phillu	o Parsons, Librarian	3	2,300	'	_		
· . : !!!!!	77 013013, Libi di lati	2	600	,			0
		-	300	<u> </u>	1		
				1			
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			· · · · · · · · · · · · · · · · · · ·				
				<u></u> _	\perp		
					1		



Part				_
	instructions for Part V) Check if the organization used Schedule O to respond to any question in the	s Pan	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	33	1.00	✓
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.	34		1
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)?	35a		1
b c	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O 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	35b 35c		✓ ✓
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	36		1
37a b	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ Did the organization file Form 1120-POL for this year? .	37b		<u> </u>
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?	38a		
39	If "Yes," complete Schedule L, Part II and enter the total amount involved Section 501(c)(7) organizations Enter			
a b 40a	Initiation fees and capital contributions included on line 9 Gross receipts, included on line 9, for public use of club facilities 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	40b		- -
С	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			
е	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form $8886-T$	40e		<u></u>
41	List the states with which a copy of this return is filed ► New York			
42a	9	17-82	2-6502	<u>}</u>
	Located at ► PO Box 573, New York NY ZIP + 4 ►	10014	-0573	
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)?	42b	Yes	No ✓
	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)			
С	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 ▶	42c		√
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		Yes	► □ No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a	165	N 0
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 $$	44b		<u> </u>
d	Did the organization receive any payments for indoor tanning services during the year? If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44c 44d		✓
b	Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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	45a		√

. P	age 4
Yes	No

Form	990-	F7	(201	18)

		·								Yes	No
		he organization engage, directly or in			s on	behalf of or	ın opposi	tion		e eş	
		ndidates for public office? If "Yes," of		, Part I					46		
Part V	71	Section 501(c)(3) Organization		47 401	1	50					
		All section 501(c)(3) organization	is must answer que	estions 47-49b a	ina	52, and co	npiete tr	e tab	les to	or line	∍s
		50 and 51	h	l ka amu ayaatian	ا ا	hia Dart VI					
-	_	Check if the organization used Sc	nequie O to respond	to any question	in u	nis Part VI			$\overline{}$	Yes	Na
47	D'4 +	he organization engage in lobbying	activities or have a	section 501(b) ele	ctio	n in affact c	luring the	tav [-	res	No
		P If "Yes," complete Schedule C, Par		section 30 (ii) ele	Clio	ii iii enect c	idiling the	ימא	47		/
	-	organization a school as described in		12 If "Vee " compl	oto 9	Schodula E		F	48		
		he organization a school as described in the organization make any transfers to	, ,, ,, ,,	•			•	•	49a		
		es," was the related organization a se			jai 112	alloni		ŀ	49b		
		plete this table for the organization's			oth:	er than offici	ers. direct			s. and	d ke
	empl	oyees) who each received more than	\$100,000 of comper	nsation from the o	rgar	nization If th	ere is non	e, ent	er "N	one "	
			(b) Average	(c) Reportable		(d) Health					
	(a)	Name and title of each employee	hours per week	compensation		contributions to benefit plans, a			timated er comp		
			devoted to position	(Forms W-2/1099-M	ISC)	compen		į Otric	,, ço,,,,	JC: 134ti	011
None							-				
133.0								Ì			
								_		_	
							ļ				
			<u>. </u>								
		number of other employees paid over			0						
		olete this table for the organization'				contractors	who each	rece	ived i	nore	thar
	φ 1 U U ,	,000 of compensation from the orga	mization ii there is no	ne, enter None.							
	(a)	Name and business address of each independ	lent contractor	(b) Type of	servi	ce	(c)	Compe	ensatio	л	
None	-										
Mone											
					-						
				1							
								_			
ď	Total	number of other independent contra	ctors each receiving	over \$100,000)			0			
		he organization complete Schedu	lle A? Note: All se	ction 501(c)(3) o	rgar	nizations mi	ıst attach			_	
	comp	eleted Schedule A						▶ 🗸	Yes	<u> </u>	0
		of perjury, I declare that I have examined this r d complete. Declaration of preparer (other than						owledg	e and t	belief, if	t is
	ct, am	d complete Declaration of geparer (other shall	Torrices is based on all line		10111	as any knowled					
Sign		Signature of officer				l Date					
Here						Date	11/5	7//	3/9	•	
		Max Haggblom, Treasurer Type or print name and title									
D=1-1		Print/Type preparer's name	Preparer's signature		Dat	e		, P	TIN		
Paid		ypo proporot o namo					Check L	11			
Prepa		Firm's name		<u> </u>		Firm'	s EIN ►				
Use O	ıııy	Firm's address ▶	·			Phon					
May the	IRS	discuss this return with the preparer	shown above? See i	nstructions			1	▶ □	Yes	\square N	0

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

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.

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-E2.

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

Name of the organization Employer identification number Greenwich Village Orchestra 13-3349320 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). 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 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) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university 10 An organization that normally receives (1) more than 331/2% 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 331/3% 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 12q Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having b 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. 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. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization Enter the number of supported organizations Provide the following information about the supported organization(s) (i) Name of supported organization (ii) EIN (III) Type of organization (iv) is the organization (v) Amount of monetary (vi) Amount of (described on lines 1-10 listed in your governing support (see other support (see above (see instructions)) document? instructions) instructions) Yes Nο (A) (B) (C) (D) (E)

Total

Par	(Complete only if you checked t						
	Part III. If the organization fails to						anly under
Sect	ion A. Public Support	o quality unde	i the tests he	sted below, p	nease compi	ete i di tiii.)	
	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4		X				
	on B. Total Support				, -	· · · · · ·	
	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4		/				
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc	•	•		\	12	
13	First five years. If the Form 990 is for the organization, check this box and stop he		's first, second	d, third, fourth	, or fifth tax ye	ear as a section	1 501(c)(3) ► □
Secti	on C. Computation of Public Suppor						
14	Public support percentage for 2018 (line (1. column (f))	· •	14	%
15	Public support percentage from 2017 Sci					15	%
16a	331/3% support test - 2018. If the organi			on line 13, ar	nd line 14 is 33	31/3% or more,	check this
	box and stop here. The organization qua	lifies as a publi	cly supported	organızatıon		\ .	▶ □
b	331/3% support test—2017. If the organithis box and stop here. The organization					is 331/3% or mo	ore, check
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization me Part VI how the organization meets the " organization	eets the "facts-	and-circumsta	ances" test, ch	eck this box a	and stop here.	Explain in
ь /	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organization in Part VI how the organization in supported organization	ation meets the	e "facts-and-c	ircumstances"	' test, check t	this box and s	top here.
18	Private foundation. If the organization di instructions	d not check a b	oox on line 13,	16a, 16b, 17a 	, or 17b, chec	k this box and s	see \
					Sch	edule A (Form 990	or 990-EZ) 2018

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.)

Sect	on A. Public Support						
Caler	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants")	32,712	38,960	41,597	43,735	50,089	207,093
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	15,311	14,387	23,749	26,261	18,461	98,169
3	Gross receipts from activities that are not an	10,011					
	unrelated trade or business under section 513	o	o	o	o	0	0
4	Tax revenues levied for the				 -		
•	organization's benefit and either paid to]	1				
	or expended on its behalf	ا	0	اه	o	o	0
5	The value of services or facilities						
•	furnished by a governmental unit to the		ļ		j		
	organization without charge .	o	o	o	ام	o	0
6	Total. Add lines 1 through 5	48,023	53,347	65,346	69,996	68,550	305,262
7a	Amounts included on lines 1, 2, and 3	40,023	33,047	03,340	00,000	00,550	303,202
	received from disqualified persons	5,900	10,100	6,700	7,325	10.025	40,250
b	Amounts included on lines 2 and 3	3,500	10,100	0,700	7,525	10,023	40,230
b	received from other than disqualified						
	persons that exceed the greater of \$5,000		ļ	1			
	or 1% of the amount on line 13 for the year	o	0	0	م	0	0
_	Add lines 7a and 7b				7.225		40.050
с 8	Public support. (Subtract line 7c from	5,900	10,100	6,700	7,325	10,025	40,250
O	line 6)	[ĺ			Ĺ	255 242
Secti	on B. Total Support						265,012
	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6	48,023	53,347	65,346	69,996	68,550	305,262
10a	Gross income from interest, dividends,	48,023	33,347	03,340	03,330	00,330	303,202
	payments received on securities loans, rents,						
	royalties, and income from similar sources	55	58	64	76	89	342
b	Unrelated business taxable income (less			- 04			342
	section 511 taxes) from businesses						
	acquired after June 30, 1975	o	o	o	0	o	0
С	Add lines 10a and 10b	55	58	64	76	89	342
11	Net income from unrelated business	33	36			- 89	
• •	activities not included in line 10b, whether						
	or not the business is regularly carried on	0	o	o	0	o	0
12	Other income Do not include gain or			- 0			0
12	loss from the sale of capital assets		į	1			
	(Explain in Part VI)						0
13	Total support. (Add lines 9, 10c, 11,	0	0	0	0	0	0
	and 12)	40.070	53.405	65 410	70.070	50.520	205 504
14	First five years. If the Form 990 is for the	48,078	53,405	65,410	70,072	68,639	305,604
	organization, check this box and stop her		3 mai, second	i, tillia, lourtii,	or militax ye	ai as a section	▶ □
Secti	on C. Computation of Public Suppor					- · -	
15	Public support percentage for 2018 (line 8			3 column (f)		15	86 7 %
16	Public support percentage from 2017 Sch		-	0, 00.0., , , (,,,	•	16	86 7 %
	on D. Computation of Investment Inc			<u> </u>	•	1.01	30 7 70
17	Investment income percentage for 2018 (I			v line 13. colun	nn (fl)	17	01%
18	Investment income percentage from 2017			,	(.)/	18	01%
19a	33 ¹ / ₃ % support tests—2018. If the organi	•		on line 14. and	d line 15 is ma		
	17 is not more than 33½%, check this box						
b							
_	line 18 is not more than 331/3%, check this b				•		•
20	Private foundation. If the organization did	=	_	· ·	•		~

Part IV Supporting Organizations

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

Secti	on A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated If designated by class or purpose, describe the designation If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
	purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action			
	was accomplished (such as by amendment to the organizing document)	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
6	Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	5c		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .			
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9a 9b	-,-	
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9D 3D		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below	10a	,	
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)	10a		

Part	Supporting Organizations (continued)			·
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	<u></u>		
	below, the governing body of a supported organization?	11a	<u> </u>	
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c	L	
Sect	on B. Type I Supporting Organizations			
		F	Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			İ
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.			ļ
	organizations and what contains or received only in any, applied to deep persons and the tax years	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			ĺ
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization	2	<u> </u>	
Secti	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed	<u> </u>		
	the supported organization(s)	1		
Secti	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		İ	
	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?	<u> </u>		
_		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	<u> </u>		
	the organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's	Į Į		
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard			
		3		
	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see in	nstruc	:tions	i).
a	The organization satisfied the Activities Test Complete line 2 below			
b	The organization is the parent of each of its supported organizations. Complete line 3 below			
C	The organization supported a governmental entity Describe in Part VI how you supported a government entity (s			
2	Activities Test Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify	i l		
	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.	<u> </u>		
	ŕ	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more		1	
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			1
	reasons for the organization's position that its supported organization(s) would have engaged in these	<u> </u> -		
_	activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	<u> </u>		
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	<u> </u>		
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Or	gan	izations	
1 Check here if the organization satisfied the Integral Part Test as a qualifyin instructions. All other Type III non-functionally integrated supporting organization.			
Section A-Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	·	
Section B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)			
a Average monthly value of securities	1a		<u>'</u>
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI)	1		
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C—Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functionall instructions)	y int	egrated Type III supporti	ng organization (see

Schedu	ile A (Form 990 or 990-EZ) 2018			Page 7			
Part	V Type III Non-Functionally Integrated 509(a)(3	3) Supporting Organ	izations (continued)				
Sect	ion D-Distributions			Current Year			
1	Amounts paid to supported organizations to accomplish exempt purposes						
2	Amounts paid to perform activity that directly furthers exe		orted				
	organizations, in excess of income from activity						
3	Administrative expenses paid to accomplish exempt purp	ooses of supported orga	inizations				
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 whice (provide details in Part VI) See instructions	h the organization is res	sponsive	_			
9	Distributable amount for 2018 from Section C, line 6						
10	Line 8 amount divided by line 9 amount						
Sect	ion E—Distribution Allocations (see instructions)	(i) Excess Distributions	(II) Underdistributions Pre-2018	(III) Distributable Amount for 2018			
1	Distributable amount for 2018 from Section C, line 6						
2	Underdistributions, if any, for years prior to 2018						
	(reasonable cause required - explain in Part VI) See	1					
***	instructions	<u> </u>					
3	Excess distributions carryover, if any, to 2018						
a	From 2013						
b	From 2014						
c	From 2015 .						
<u>d</u>	From 2016	<u> </u>					
е	From 2017		······				
f	Total of lines 3a through e						
g	Applied to underdistributions of prior years			·			
<u>h</u>	Applied to 2018 distributable amount						
i_	Carryover from 2013 not applied (see instructions)						
j	Remainder Subtract lines 3g, 3h, and 3i from 3f						
4	Distributions for 2018 from						
	Section D, line 7 \$						
<u>a</u>	Applied to underdistributions of prior years						
b	Applied to 2018 distributable amount						
с	Remainder Subtract lines 4a and 4b from 4						
5	Remaining underdistributions for years prior to 2018, if						
	any Subtract lines 3g and 4a from line 2 For result						
	greater than zero, explain in Part VI. See instructions.						
6	Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1 For result greater than zero, explain in						
	Part VI. See instructions						
7	Excess distributions carryover to 2019. Add lines 3j and 4c	-					
8	Breakdown of line 7						
а	Excess from 2014						
b	Excess from 2015						
С	Excess from 2016						
d	Excess from 2017		.,,,,,				
е	Excess from 2018						

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

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

Open to Public Inspection

Employer identification number

Greenwich Village Orchestra	13-3349320
Part I 8, Other revenue: Interest on savings account	
Part I 16, Other expenses Music and equipment rental, license fees, insurance policies, supplies	
Part II 24, Other assets Musical instruments, music stands, lights	
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