# Form **990**

### PUBLIC INSPECTION COPY

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

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No. 1545-0047

Open to Public Department of the Treasury Internal Revenue Service Inspection ► The organization may have to use a copy of this return to satisfy state reporting requirements. , 2006 8/01 2005, and ending 7/31 For the 2005 calendar year, or tax year beginning D Employer Identification Number Check if applicable: Please use IRS label Houston Grand Opera Guild, Inc. 74-0016764 Address change or print or type. See 510 Preston E Telephone number Name change Houston, TX 77002-1504 713-546-0200 specific instruc-Initial return Accounting method: Cash X Accrual Final return Other (specify) Amended return Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ). Application pending H and I are not applicable to section 527 organizations. **H** (a) Is this a group return for affiliates? . . . **H (b)** If 'Yes,' enter number of affiliates. Web site: ► www.hgoguild.org H (c) Are all affiliates included? . . . . . . . . Organization type (If 'No,' attach a list. See instructions.) ► X <sub>501(c)</sub> 3 ◀ (insert no.) H (d) Is this a separate return filed by an Check here ► ☐ if the organization's gross receipts are normally not more than organization covered by a group ruling? \$25,000. The organization need not file a return with the IRS; but if the organization chooses to file a return, be sure to file a complete return. Some states require a Group Exemption Number. . . complete return. Check ► X if the organization is **not** required to attach Schedule B (Form 990, 990-EZ, or 990-PF). Gross receipts: Add lines 6b, 8b, 9b, and 10b to line  $12 \ge 239,598$ . Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Instructions) Contributions, gifts, grants, and similar amounts received: 45,562. **b** Indirect public support..... 1 b Government contributions (grants)..... 1 c 45,562. noncash \$ 45,562. 2 Program service revenue including government fees and contracts (from Part VII, line 93)... 2 3 Membership dues and assessments..... Interest on savings and temporary cash investments..... 4 5 **5** Dividends and interest from securities..... 6a Gross rents. 6b c Net rental income or (loss) (subtract line 6b from line 6a)..... 6с Other investment income (describe . . . . . . 7 (A) Securities (B) Other 8a Gross amount from sales of assets other than inventory..... 8a **b** Less: cost or other basis and sales expenses...... 8b 8с d Net gain or (loss) (combine line 8c, columns (A) and (B))..... 8d 9 Special events and activities (attach schedule). If any amount is from gaming, check here..... a Gross revenue (not including \$ \_\_\_\_\_ 33,505. of contributions reported on line 1a)..... 27,503. 9a 9b 18,006. **b** Less: direct expenses other than fundraising expenses..... ....Statement.1 c Net income or (loss) from special events (subtract line 9b from line 9a)...... 9,497. 9с 166,533. 95,458. 10 c 71,075. 11 Other revenue (from Part VII, line 103)..... 11 **Total revenue** (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)...... 12 12 126,134. 68,717. Program services (from line 44, column (B))..... 13 13 EXPENSES 5,447. 14 Management and general (from line 44, column (C))..... 14 45,506. 15 15 Fundraising (from line 44, column (D)). 16 16 Total expenses (add lines 16 and 44, column (A))..... 119,670. 17 17 6,464.18 18 105,778. 19 Net assets or fund balances at beginning of year (from line 73, column (A))..... 19 20 Other changes in net assets or fund balances (attach explanation)..... 20

Net assets or fund balances at end of year (combine lines 18, 19, and 20).

Part II Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

L	Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	<b>(B)</b> Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (att sch) See Stm 3 (cash \$ 63,001. non-cash \$					
23 24	If this amount includes foreign grants, check here  Specific assistance to individuals (att sch)  Benefits paid to or for members (att sch)	22 23 24	63,001.	63,001.		
25 26	Compensation of officers, directors, etc	25 26	0.	0.	0.	0.
27 28	Pension plan contributions	27 28				
29 30	Payroll taxes	29 30				
31 32	Accounting fees	31 32	3,000.		3,000.	
33 34	Supplies	33 34	2,689.	703.	604.	1,382.
35 36	Postage and shipping Occupancy	35 36	5,184.	221.	74.	4,889.
37 38	Equipment rental and maintenance Printing and publications	37 38	602. 8,821.		600. 452.	2. 8,369.
39 40	Travel	39 40	1,419.	999.	420.	
41 42	Interest	41 42				
	Other expenses not covered above (itemize):  a Advertising	<b>43</b> a	3,318.			3,318.
•	Credit card fees Other expenses	43b 43c	1,072. 2,465.	62.	297.	1,072. 2,106.
	Professional fees Special event expenses	43 d 43 e	5,654. 22,445.	3,731.		1,923. 22,445.
		43 f 43 g				
44	Total functional expenses. Add lines 22 through 43. (Organizations completing columns (B) - (D), carry these totals to lines 13 - 15)	44	119,670.	68,717.	5,447.	45,506.
Are a	t Costs. Check.  if you are following any joint costs from a combined educational as, enter (i) the aggregate amount of these ; (iii) the amount all andraising \$	l camp joint c	oaign and fundraising sol	; <b>(ii)</b> the ar	Program services?mount allocated to Progr ; and (iv) the	am services
		_				

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## Part III Statement of Program Service Accomplishments

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

at is the organization's prim organizations must describe nts served, publications issu ions and 4947(a)(1) nonexe	e their exempt purpose act ued. etc. Discuss achieven	Promote Opera Through hievements in a clear and concise r ments that are not measurable. (See t also enter the amount of grants ar	manner. State the number of ction 501(c)(3) and (4) organ	Program Service Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts; but optional for others.)
a See Statement 4		·		-
(Grants and allocations	\$ 63,0	01.) If this amount includes forei	qn grants, check here ►	[ 68,717.
b				-
(Grants and allocations	 \$ 	) If this amount includes forei	gn grants, check here	[
(Grants and allocations		) If this amount includes forei	gn grants, check here ►	- - [
(Grants and allocations		) If this amount includes forei	gn grants, check here ▶	- - -
<b>e</b> Other program services . (Grants and allocations	\$	) If this amount includes forei	gn grants, check here	

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# Part IV Balance Sheets (See Instructions)

Note	W CC	here required, attached schedules and amounts within t llumn should be for end-of-year amounts only.	he de	escription	(A) Beginning of year		<b>(B)</b> End of year
	45	Cash — non-interest-bearing			3,180.	45	3,180.
	46	Savings and temporary cash investments				46	
	47	<b>a</b> Accounts receivable	47 a 47 b	1,217.	1,904.	47 c	1,217.
					, , , , , , , , , , , , , , , , , , , ,		,
	48	<b>a</b> Pledges receivable	48 a				
		<b>b</b> Less: allowance for doubtful accounts	48 b			48 c	
	49	Grants receivable				49	
A S S E T S	50	employees (attach schedule)	:			50	
Ē	51	a Other notes & loans receivable (attach sch)	<b>5</b> 1 a				
s		<b>b</b> Less: allowance for doubtful accounts	51 b			51 c	
	52	Inventories for sale or use			93,322.	52	106,857.
	53	Prepaid expenses and deferred charges		<u></u> <u></u>	1,120.	53	
	54	Investments - securities (attach schedule)	;	► Cost FMV		54	
	55	a Investments – land, buildings, & equipment: basis.	<b>55</b> a				
		<b>b</b> Less: accumulated depreciation (attach schedule)	55 b			55 c	
	56	Investments - other (attach schedule)				56	
	57	<b>a</b> Land, buildings, and equipment: basis	<b>57</b> a				
		` '	57 b			57 c	
	58			)	7,880.	58	1,103.
	59	Total assets (must equal line 74). Add lines 45 throug	h 58.		107,406.	59	112,357.
	60	Accounts payable and accrued expenses	1,628.	60	115.		
L	61	Grants payable				61	
A B	62			-		62	
L	63	, , , , , , , , , , , , , , , , , , , ,		· •		63	
I L I T E S		<b>a</b> Tax-exempt bond liabilities (attach schedule)				64 a	
E		<b>b</b> Mortgages and other notes payable (attach schedule)		•		64 b	
S		Other liabilities (describe .		)	1 600	65	115
		Total liabilities. Add lines 60 through 65			1,628.	66	115.
Й	rga	nizations that follow SFAS 117, check here X and	d com	iplete lines 6/			
N E T	67	through 69 and lines 73 and 74.			105 770	67	112 242
A S	6/	Unrestricted			105,778.	67 68	112,242.
ASSETS	68 69					69	
		nizations that do not follow SFAS 117, check here ►		and complete lines		03	
o R	луа	70 through 74.	Ш	and complete lines			
F U N D	70					70	
D	71	Paid-in or capital surplus, or land, building, and equip				71	
B	72			•		72	
BALANCES		Total net assets or fund balances (add lines 67 through 72; column (A) must equal line 19; column (B) must equal line 19; co		ŀ	105 770		110 040
S					105,778.		112,242.
	/4	Total liabilities and net assets/fund balances. Add line	es 66	ana /3	107,406.	74	112,357.

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P	art IV-A Reconciliation of Revenu instructions.)	e per Audited Financia	l Statemen	its with	Revenue per Ro	etu	rn (See
a b	Total revenue, gains, and other support p Amounts included on line a but not on Pa	art I, line 12:				а	18,358,594.
			······································	b2 b3	10, 222, 460		
С	Add lines <b>b1</b> through <b>b4</b> Subtract line <b>b</b> from line <b>a</b>					b c	18,232,460. 126,134.
d	Amounts included on Part I, line 12, but I I Investment expenses not included on Part 2Other (specify):	rt I, line 6b	· 				
e	Add lines <b>d1</b> and <b>d2</b>	<b>c</b> and <b>d</b>			▶	d e	126,134.
P	art IV-B   Reconciliation of Expens	es per Audited Financi	ai Stateme	nts witr	1 Expenses per	Ke	turn
a b	Total expenses and losses per audited fin Amounts included on line <b>a</b> but not on Pa					а	20,120,979.
	1 Donated services and use of facilities 2 Prior year adjustments reported on Part I 3 Losses reported on Part I, line 20 4 Other (specify):	I, line 20		b2 b3			
С	See Stmt 7 Add lines <b>b1</b> through <b>b4</b>			b4		b	20,001,309. 119,670.
d	Amounts included on Part I, line 17, but I Investment expenses not included on Part 2Other (specify):		•				
	Add lines <b>d1</b> and <b>d2</b>			d2		d	
	Total expenses (Part I, line 17). Add line					e e	119,670.
е <b>Р</b>	art V-A Current Officers, Director or key employee at any time dur					_	•
	(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compe (if not p enter -	aid,	(D) Contributions employee benefi plans and deferre compensation plan	t ed	(E) Expense account and other allowances
5	ee attached volunteer board 10 Preston  ouston, TX 77002	See attached 0		0.		0.	0.

Face 200 (2005) Hougton Chand Ones C	uild Too		74 0016	764	-	
Form 990 (2005) Houston Grand Opera G Part V-A Current Officers, Directors, Tru		mnlovees (continued	74-0016	704	Yes	age (
<b>75a</b> Enter the total number of officers, directors, and trustees pr			·		163	NO
<b>b</b> Are any officers, directors, trustees, or key em listed in Schedule A, Part I, or highest comper A, Part II-A or II-B, related to each other throu	ployees listed in Form	990, Part V-A, or highe	st compensated employe tractors listed in Schedu	es le		
identifies the individuals and explains the relati	ionship(s)	·····Se	ee Statement 8.	75b	X	
c Do any officers, directors, trustees, or key emplisted in Schedule A, Part I, or highest comper A, Part II-A or II-B, receive compensation from	nsated professional and	d other independent con	tractors listed in Schedu	le		
to this organization through common supervision	on or common control?			75c		X
Note. Related organizations include section 509						
If 'Yes,' attach a statement that identifies the in other organization(s), and describes the comperelated organization	ndividuals, explains the ensation arrangements	e relationship between the , including amounts paid	nis organization and the distribution to each individual by each individual by each	ach		
d Does the organization have a written conflict or						X
Part V-B Former Officers, Directors, True Benefits (If any former officer, directed during the year, list that person below a the instructions.)	or, trustee, or key emp and enter the amount o	loyee received compens f compensation or other	sation or other benefits ( benefits in the appropri	described b ate column	elow) . See	
(A) Name and address	<b>(B)</b> Loans and Advances	(C) Compensation	(D) Contributions to employee benefit plans and deferred compensation plans	( <b>E)</b> Exaccount allow		
					1	
Part VI Other Information (See the instruc	tions.)				Yes	No
76 Did the organization engage in any activity not attach a detailed description of each activity	previously reported to	the IRS? If 'Yes,'		76		Χ
77 Were any changes made in the organizing or g	<del>.</del>	ut not reported to the IF	RS?	77		X
If 'Yes,' attach a conformed copy of the change				.		.,,
78a Did the organization have unrelated business of				1	ът	X
<b>b</b> If 'Yes,' has it filed a tax return on <b>Form 990-T</b>	-			78b	N/	A
79 Was there a liquidation, dissolution, terminatio year? If 'Yes,' attach a statement				79		Х
<b>80 a</b> Is the organization related (other than by assor membership, governing bodies, trustees, office	ciation with a statewide ers, etc, to any other e	e or nationwide organiza xempt or nonexempt org	tion) through common ganization?	80a	X	

**b** Did the organization file Form 1120-POL for this year?. BAA Form **990** (2005)

b If 'Yes,' enter the name of the organization ► See Statement 9

and check whether it is X exempt or

81 a Enter direct and indirect political expenditures. (See line 81 instructions.).....

81 b

0.

Pa	rt VI Other Information (continued)			Yes	No
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities substantially less than fair rental value?	at no charge or at	82a	Х	
b	If 'Yes,' you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)	82b			
83a Did the organization comply with the public inspection requirements for returns and exemption applications?					
b	Did the organization comply with the disclosure requirements relating to quid pro quo contribu	tions?	83b	Χ	
<b>84</b> a	Did the organization solicit any contributions or gifts that were not tax deductible?		84a		Χ
b	If 'Yes,' did the organization include with every solicitation an express statement that such cornot tax deductible?	ntributions or gifts were	84b	N	/A
85	501(c)(4), (5), or (6) organizations. <b>a</b> Were substantially all dues nondeductible by members?.		85a	N,	/A
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		85 b	N,	/A
	If 'Yes' was answered to either 85a or 85b, <b>do not</b> complete 85c through 85h below unless the waiver for proxy tax owed for the prior year.	e organization received a			
c	Dues, assessments, and similar amounts from members	85c N/A			
d	Section 162(e) lobbying and political expenditures.	85d N/A			
е	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e N/A			
	Taxable amount of lobbying and political expenditures (line 85d less 85e).				
c	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		85 g	N,	/A
ŀ	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reason dues allocable to nondeductible lobbying and political expenditures for the following tax year?	able estimate of	85h	N	/A
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on				
	line 12	86a N/A			
b	Gross receipts, included on line 12, for public use of club facilities	86b N/A			
87	501(c)(12) organizations. Enter: <b>a</b> Gross income from members or shareholders	87a N/A			
t	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.).	87b N/A			
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corn an entity disregarded as separate from the organization under Regulations sections 301.770 If 'Yes,' complete Part IX.	orporation or partnership, 01-2 and 301.7701-3?	88		X
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year un				
	section 4911 ► 0. ; section 4912 ► 0. ; section 4				
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess during the year or did it become aware of an excess benefit transaction from a prior year? If 'explaining each transaction.	s benefit transaction Yes,' attach a statement	89b		Х
	5				
C	Enter: Amount of tax imposed on the organization managers or disqualified persons during th year under sections 4912, 4955, and 4958.	e ►			0.
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization				0.
	List the states with which a copy of this return is filed None				
	Number of employees employed in the pay period that includes March 12, 2005 (See instruction		90 b		$-\frac{1}{0}$
	The books are in care of ► Richard L. Brown, CFO, HGOA Telephone nu				
• • •	Located at ► 510 Preston, Houston, TX,	ZIP + 4 ► 77002	2-15	04	
			ĭ	Yes	No
b	At any time during the calendar year, did the organization have an interest in or a signature of financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account in a foreign country (such as a bank account in a foreign country (such as a bank account in a foreign country (such as a bank account in a foreign country (such as a bank account in a foreign country (such as a bank account in a foreign country (such as a bank account in a foreign country (such as a bank account in a foreign country (such as a bank account in a foreign country (such as a bank account in a foreign country (such as a bank account in a foreign country (such as a bank account in a foreign country (such as a bank account in a foreign country (such as a bank account in a foreign country (such as a bank account in a foreign country (such as a bank account in a foreign country (such as a bank account in a foreign country (such as a bank account in a foreign country (such as a bank account in a foreign country (such as a b		91 b	103	X
	If 'Yes,' enter the name of the foreign country ▶				
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of F Financial Statements $\frac{1}{2}$				
C	At any time during the calendar year, did the organization maintain an office outside of the Ur	nited States?	91 c		X
	If 'Yes,' enter the name of the foreign country			_	_
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 — Check h		. N/	A <sup>1</sup>	▶ ∐
	and enter the amount of tax-exempt interest received or accrued during the tax year	▶ 92			N/A
BAA			Form	990 (	(2005)

Part VII	Analysis of income-Producing	Activities (See t	ne instructions.)			
	, ,	Unrelated bus	iness income	Excluded by section	on 512, 513, or 514	(E)
<b>Note:</b> Ente otherwise i	r gross amounts unless indicated.	(A) Business code	<b>(B)</b> Amount	(C) Exclusion code	<b>(D)</b> Amount	Related or exempt function income
<b>93</b> Pro	gram service revenue:	Dusiness code	Amount	Exclusion code	Amount	Turiction income
_						
d						
e	dicare/Medicaid payments					
-	& contracts from government agencies					
	mbership dues and assessments rest on savings & temporary cash invmnts					
	idends & interest from securities.					
	rental income or (loss) from real estate:					
	ot-financed property					
	debt-financed property					-
<b>98</b> Net i	rental income or (loss) from pers prop					
	er investment income					
<b>100</b> Gai	n or (loss) from sales of assets er than inventory					
	income or (loss) from special events			1	9,497.	
	ss profit or (loss) from sales of inventory			2	71,075.	
<b>103</b> Oth	er revenue: a			_	12/0101	
С						
d						
e					00 570	
	total (add columns (B), (D), and (E)) <b>_</b> <b>al</b> (add line 104, columns (B), (D), ar	(E)			80,572.	80,572.
	al (add line 104, columns (B), (D), ar 105 plus line 1d, Part I, should equa					00,372.
	Relationship of Activities to			cemnt Purnoses	S (See the instruction	ns )
Line No.		•				•
<b>▼</b>	Explain how each activity for which of the organization's exempt purpos	ses (other than by	a in column (E) o providing funds f	or such purposes).	a importantly to the a	accomplishment
N/A		,	<del> </del>			
11, 11						
Part IX	Information Regarding Tax	able Subsidia	ries and Disre	garded Entities	(See the instruction	s.)
	(A)	(B)	(0		(D)	(E)
Name	address, and EIN of corporation,	Percentage of			Total	End-of-year
	tnership, or disregarded entity	ownership interest	Nature of	activities	income	assets
N/A		ે				
		%				
		%				
<b>D</b> 1 1/		%		1.5 (1.0		
Part X	Information Regarding Trai				,	
	e organization, during the year, receive any fun	, ,	3, 131	•		Yes X No
	ne organization, during the year, pay			a personal benefit	contract?	. Yes X No
Note: /	f 'Yes' to <b>(b),</b> file Form 8870 <b>and</b> Form					11 2 7 7 7
	Under penalties of perjury, I declare that I hav true, correct, and complete. Declaration of pre	eparer (other than office	r) is based on all inform	g schedules and statemer nation of which preparer h	nts, and to the best of my kas any knowledge.	nowledge and belief, it is
Please	ORIGINAL SIGNED BY TAX	(PAYER				
Sign	Signature of officer				Date	
Here	► PUBLIC INSPECTION COP	Υ				
	Type or print name and title.					
Paid	Preparer's			Date	Check if Pr	reparer's SSN or PTIN (See eneral Instruction W)
Pre-	signature ► ORIGINAL SIGNE	D BY JODY BLA	ZEK			/A
parer's	Firm's name (or Blazek & Vet	terling LLP				
Use	yours if self- employed), ► 2900 Weslaya	n, Suite 20	0		EIN ► N/A	
Only	address, and ZIP + 4 Houston, TX	77027-5132			Phone no. ► (71:	3) 439-5739

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

# Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information — (See separate instructions.)

2005

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service MUST be completed by the above organizations and attached to their Form 990 or 990-EZ. Employer identification number Name of the organization 74-0016764 Houston Grand Opera Guild, Inc Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees Part I (See instructions. List each one. If there are none, enter 'None.') (a) Name and address of each (b) Title and average (c) Compensation (d) Contributions (e) Expense account and other hours per week to employee benefit plans and deferred employee paid more than \$50,000 devoted to position allowances compensation None Total number of other employees paid Part II — A Compensation of the Five Highest Paid Independent Contractors for Professional Services (See instructions. List each one (whether individuals or firms). If there are none, enter 'None.') (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service (c) Compensation None Total number of others receiving over \$50,000 for professional services Compensation of the Five Highest Paid Independent Contractors for Other Services (List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter 'None.' See instructions.) (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service (c) Compensation None Total number of other contractors receiving over \$50,000 for other services.

Houston Grand Opera Guild, Inc.

Schedule A (Form 990 or 990-EZ) 2005

74-0016764

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An organization organized and operated to test for public safety. Section 509(a)(4). (See instructions.)

Schedule A (Form 990 or 990-EZ) 2005 Houston Grand Opera Guild, Inc. 74-0016764 Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting. Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting. Calendar year (or fiscal year **(a)** 2004 beginning in) Gifts, grants, and contributions received. (Do not include 88,923. 36,105. 4,512. 1,500. 131,040. unusual grants. See line 28.). 16 Membership fees received.... 31,000. 30,073. 61,073. Gross receipts from admissions. merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's 207,971. 239,620. 198,241. 160,913. 806,745. charitable, etc, purpose . . . . . . . . Gross income from interest, dividends. amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organ-0. ization after June 30, 1975. 19 Net income from unrelated business 0. activities not included in line 18. Tax revenues levied for the organization's benefit and either paid to it or expended 0. on its behalf. . . The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to 0. the public without charge. 22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets ...... 296,894. 192,486. 275,725. 233,753. 998,858. Total of lines 15 through 22.... 88,923. 36,105. 35,512. 31,573. 192,113 **24** Line 23 minus line 17...... 2,969. 2,757. 2,338. 1,925 Enter 1% of line 23 . . . . . . . . . **26**a Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 . . . . . . N/A . . . b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2001 through 2004 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts..... 26 b c Total support for section 509(a)(1) test: Enter line 24, column (e)..... 26 c \_\_\_\_\_\_19 d Add: Amounts from column (e) for lines: 18 26b 26 d e Public support (line 26c minus line 26d total). 26 e f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) 26 f 27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a 'disqualified person,' prepare a list for your records to show the name of, and total amounts received in each year from, each 'disqualified person.' Do not file this list with your return. Enter the sum of such amounts for each year: <u>1,500.</u> (2003) <u>1,500.</u> (2002) <u>1,295.</u> (2001) \_ (2004) **b**For any amount included in line 17 that was received from each person (other than 'disqualified persons'), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: (2004) \_\_\_\_\_\_\_ 0 . (2003) \_\_\_\_\_\_ c Add: Amounts from column (e) for lines: 15 \_\_\_\_\_ <u>0</u>. (2002) \_ \_ \_ \_ <u>0</u>. (2001) \_ \_ 131,040. 16 806,745. **20** 998,858. 27 c 5,275. 5,275. and line 27b total . . . . . . . . . 27 d 27 e e Public support (line 27c total minus line 27d total)..... 993,583. f Total support for section 509(a)(2) test: Enter amount from line 23, column (e).... ► 27f 998,858

Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2001 through 2004, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

g Public support percentage (line 27e (numerator) divided by line 27f (denominator)).

h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)).......

**27** g

99.47 %

ı aı	(To be completed ONLY by schools that checked the box on line 6 in Part IV)	N/A		
			Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31		
	If 'Yes,' please describe; if 'No,' please explain. (If you need more space, attach a separate statement.)	_		
	Does the organization maintain the following:  a Records indicating the racial composition of the student body, faculty, and administrative staff?			
	<b>b</b> Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
	c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	-		
	If you answered 'No' to any of the above, please explain. (If you need more space, attach a separate statement.)	320		
		-		
33	Does the organization discriminate by race in any way with respect to:			
	<b>a</b> Students' rights or privileges?	33a		
	<b>b</b> Admissions policies?	33b		
	<b>c</b> Employment of faculty or administrative staff?	33 c		
	d Scholarships or other financial assistance?	33 d		
	e Educational policies?	33e		
	f Use of facilities?	33 f		
	g Athletic programs?	33 g		
	h Other extracurricular activities?	33h		
	If you answered 'Yes' to any of the above, please explain. (If you need more space, attach a separate statement.)			
34	<b>a</b> Does the organization receive any financial aid or assistance from a governmental agency?	34a		
	<b>b</b> Has the organization's right to such aid ever been revoked or suspended?	34b		
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev Proc 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If 'No.' attach an explanation.	35		

	edule <b>A</b> (Form 990 or 990		n Grand Opera (				74-0	0016	764 P	age 5
Par	Lobbying Ex (To be complete				_				N/A	
Che	ck ► a if the organiz	zation belongs to an affi	liated group. Check	► b	if you c			contr	ol' provisions appl	у.
		imits on Lobbying 'expenditures' means a	•	d.)		Affiliate	a <b>)</b> ed grou tals	р	(b) To be complet for ALL electir organizations	na
36	Total lobbying expenditu	ures to influence public	opinion (grassroots lobb	ying)		36				
37	Total lobbying expenditu	•			_	37				
38	Total lobbying expenditu	ures (add lines 36 and 3	7)			38				
39	Other exempt purpose e	expenditures			[	39				
40	Total exempt purpose e	xpenditures (add lines 3	88 and 39)			40				
41	Lobbying nontaxable an	nount. Enter the amount	from the following table	e <b>–</b>						
	If the amount on line 40		lobbying nontaxable an							
	Not over \$500,000 Over \$500,000 but not over \$1,									
	Over \$1,000,000 but not over \$	\$1,500,000 \$175,0	000 plus 10% of the excess ov	ver \$1,000,00	00	41				
	Over \$1,500,000 but not over \$	\$17,000,000 \$225,0	000 plus 5% of the excess over	er \$1,500,000	0					
	Over \$17,000,000									
42	Grassroots nontaxable a	•	•		-	42				
43	Subtract line 42 from lin				<b>—</b>	43				
44	Subtract line 41 from lin					44				
-	Caution: If there is an a		-							
	(Some organ	nizations that made a se	Averaging Period lection 501(h) election do et the instructions for lir	o not have	e to comp	olete all of the five	ve colu	ımns l	below.	
			Lobbying Expend	ditures Du	uring 4 -Y	ear Averaging F	Period			
	Calendar year (or fiscal year beginning in) ►	<b>(a)</b> 2005	<b>(b)</b> 2004	:	<b>(c)</b> 2003		<b>d)</b> 002		<b>(e)</b> Total	
45	Lobbying nontaxable amount									
46	Lobbying ceiling amount (150% of line 45(e))									
47	Total lobbying expenditures									
48	Grassroots non-taxable amount									
49	Grassroots ceiling amount (150% of line 48(e))									
50	expenditures									
Par	Lobbying A (For reporting of	ctivity by Nonelect only by organizations that	ting Public Charition to the complete Part	<b>es</b> : VI-A) (Se	ee instrud	ctions.)				
	ng the year, did the orgar mpt to influence public op					cluding any	Yes	No	Amount	
ä	Volunteers							Χ		
	Paid staff or manageme				-	•		X		
	Media advertisements							X		
	d Mailings to members, le							X		
	Publications, or publish						<u> </u>	X		
	Grants to other organiza	, , ,						X		
9	<b>g</b> Direct contact with legis	nators, trieir statts, gove	mment officials, or a le	yısıatıve t	лоиу		1	Λ		

0.

i Total lobbying expenditures (add lines **c** through **h.**).....

If 'Yes' to any of the above, also attach a statement giving a detailed description of the lobbying activities.

# Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See instructions)

51 Did of th	the reporting organization of	directly or in	directly engage in any of the following	with any other organization described g to political organizations?	in section	501(0	:)
			o a noncharitable exempt organization		Ī	Yes	No
		-			51 a (i)		X
					a (ii)		X
<b>b</b> Othe	er transactions:						
(i)	Sales or exchanges of asse	ets with a no	oncharitable exempt organization		b (i)		X
(ii)	Purchases of assets from a	a noncharita	ble exempt organization		b (ii)		X
(iii)	Rental of facilities, equipm	ent, or other	r assets		b (iii)		X
(iv)	Reimbursement arrangeme	ents			b (iv)		X
(v)	Loans or Ioan guarantees.				b (v)		X
(vi)	Performance of services or	membershi	p or fundraising solicitations		b (vi)		X
					С		X
<b>d</b> If the the any	e answer to any of the abo goods, other assets, or ser transaction or sharing arra	ve is 'Yes,' o vices given ingement, sh	complete the following schedule. Colu by the reporting organization. If the or now in column (d) the value of the goo	mn (b) should always show the fair mark ganization received less than fair mark ods, other assets, or services received:	rket value et value i	of n	
(a) Line no.	(b)		(c) noncharitable exempt organization	(d) Description of transfers, transactions, and s			s
N/.	Δ			· · · · · · · · · · · · · · · · · · ·			
11/ /	-1						
			liated with, or related to, one or more her than section 501(c)(3)) or in section	tax-exempt organizations on 527?	► Yes	s X	No
<b>b</b> If 'Y	es,' complete the following	schedule:	<del> </del>				
	<b>(a)</b> Name of organization		<b>(b)</b> Type of organization	(c) Description of relations	ship		
N/A							
			1				

2005

## **Federal Statements**

Page 1

Houston Grand Opera Guild, Inc.

74-0016764

Statement 1
Form 990, Part I, Line 9
<b>Net Income (Loss) from Special Events</b>

Special Events		Gross Receipts	Less Contri- butions	Gross Revenue	Less Direct Expenses	Net Income (Loss)
Spring Event Fall Awards Brunch Opera Volunteers Intl	Total	41,283. 14,235. 5,490. \$ 61,008.	26,670. 5,435. 1,400. \$ 33,505.	14,613. 8,800. 4,090. \$ 27,503.	12,185. 4,201. 1,620. \$ 18,006.	2,428. 4,599. 2,470. \$ 9,497.

### Statement 2 Form 990, Part I, Line 10 **Gross Profit (Loss) From Sales Of Inventory**

Boutique Items.	\$ 166,533.
Gross Sales Less Returns & Allowances Net Sales Less Cost Of Goods Sold Gross Profit From Sales Of Inventory	\$ 0. 166,533. 95,458.

#### Statement 3 Form 990, Part II, Line 22 **Grants and Allocations**

Cash Grants and Allocations

Class of Activity:

Donee's Name: Donee's Address:

Relationship of Donee: Amount Given:

General Support Houston Grand Opera Assoc.

510 Preston

Houston, TX 77002

N/A

\$ 63,001.

Total Grants and Allocations \$ 63,001.

Statement 4 Form 990, Part III, Line a **Statement of Program Service Accomplishments** 

Description

Program Grants and Service Allocations Expenses

The Guild provides financial and volunteer support to the Houston Grand Opera Association of Houston, Texas, and in particular the Opera Studio Training Program and its outreach programs in the Houston community.

74-0016764

Houston Grand Opera Guild, Inc.

Statement 4 (continued)
Form 990, Part III, Line a
Statement of Program Service Accomplishments

Program
Grants and Service
Description
Allocations Expenses

Artist in Residence Program: gives the public a personal experience with opera by putting on free informational performances (informances). The informances feature a Houston Grand Opera Studio singer and an accompanist performing classical selections, talking about their backgrounds and the HGO Studio, and answering questions from the audience. A Guild volunteer is present to introduce the HGO Studio performers, explain what the Guild is, and talk a little about what it does. Any group of people with a desire to learn about opera can request an informance. Informance attendes receive education about opera, opportunities to attends opera performances, information about the HGO Studio program and what it takes to become an opera singer.

Opera Docents Program: introduces opera to school students in the Houston area. Volunteer guild docents make 45 minute presentations that illustrate how opera relates to our lives with music, theater, and dance. Presentations include video excerpts from an opera and the docent's explanation of excerpts and story of the opera.

Includes Foreign Grants: No

63,001. 68,717.

\$ 63,001. \$ 68,717.

Statement 5 Form 990, Part IV, Line 58 Other Assets

Due from affiliates  $\frac{$}{1,103}$ . Total  $\frac{$}{$}$  1,103.

Statement 6 Form 990, Part IV-A, Line b(4) Other Amounts

Statement 7 Form 990, Part IV-B, Line b(4) Other Amounts

**Houston Grand Opera Guild, Inc.** 

74-0016764

Statement 8
Form 990, Part V-A, Line 75b
Compensation Paid to Related Individuals

Name and Relationship

Jess Carnes, Co-President, and Pat Carnes, Co-President, are husband and wife.

Ward Pennebaker, Past President, and Susan Pennebaker, Past President, are husband and wife.

#### Statement 9 Form 990, Part VI, Line 80b Related Organizations

Name of Organization	<u>Exempt</u>	Nonexempt
Houston Grand Opera Association, Inc. Houston Grand Opera Endowment, Inc.	X X	
Houston Grand Opera Productions, Inc.	X	

Statement 10 Schedule A, Part III, Line 2 Transactions with Trustees, Directors, Etc.

Houston Grand Opera Guild purchases printing and design services from Pennebaker, a company which is owned by Susan and Ward Pennebaker, Past Presidents. For the fiscal year ending 7/31/06, \$296 was paid to Pennebaker for such services. All purchases for services from Pennebaker are negotiated at arms-length and no more than the fair market value for such services is paid.

## Part IV-A - Reconciliation of Revenue per Audited Financial Statements with Revenue per Return

	Association	<b>Endowment</b>	<u>Guild</u>	<u>Total</u>
Total revenue per audited fin. stmts				
et unreali ed losses				
onated services				
nvestment e penses				
ad ustment				
G reported on line				
Transfers etween affiliates				
Total per line orm				

## Part IV-B - Reconciliation of Expenses per Audited Financial Statements with Revenue per Return

Total expenses per audited fin. stmt	<u>Association</u> \$19,943,439	Endowment 7,407	<u>Guild</u> 170,133	\$ <u>Total</u> 20,120,979
Donated services	(637,606)	(59,443)		(697,049)
DDB adjustment			(18,006)	(18,006)
COGS reported on line 10b			(95,458)	(95,458)
Transfers between affiliates		2,165,985	63,001	2,228,986
Investment expenses		314,630		314,630
Total per line 17, Form 990	\$19,305,833	2,428,579	119,670	\$ 21,854,082

# Houston Grand Opera Guild Inc 2005 Form 990

# Part V-A - List of Officers, Directors, Trustees, and Key Employees

Name	<u>Title</u>	Hrs Per Week	Compensation
<b>Executive Committee</b>			
Carnes, Jess and Pat	Co-Presidents, VP Membership (Pat), Website (Jess)	<1	None
Hershey, Wendy	VP Special Events	<1	None
Lyday, Dr. Jo	VP Hospitality	<1	None
Moore, Kathy	VP Development	<1	None
Pennebaker, Ward and Susan	Past Presidents/VP Marketing (Ward)	<1	None
Sickler, Jennifer	VP Studio	<1	None
Gott, Fred	VP Finance	<1	None
Jack, Janine	Secretary	<1	None
Gott, Fred	Historian	<1	None
Trustees			
Bohannon, Dr. Jerry	Boutique	<1	None
Brown, Lanie	Community Outreach	<1	None
Cooper, Christa	Volunteer Coordinator	<1	None
Gates, Dr. Alice	Education - ONL	<1	None
Gott, Imelda	Communications	<1	None
Graham, Adelma	Education - Docents	<1	None
Greene, Shelley	Artist in Residence	<1	None
Guittard, Pat	Membership	<1	None
Hanks, Mary	Hospitality	<1	None
Mattison, Wynne	Studio Buddies	<1	None
Schueler, Steve	Speakers' Bureau	<1	None
Toth, Dr. Robert	Counselor/Parliamentarian	<1	None
Life Trustees			
Bratsas, Pat	Life Trustee	<1	None
Caraway, Mary Gene	Life Trustee	<1	None
Carroll, Sylvia	Life Trustee	<1	None
Comstock, Patte	Life Trustee	<1	None
Craft, Ann	Life Trustee	<1	None
Demme, Genevieve	Life Trustee	<1	None
Loos, Heide	Life Trustee	<1	None
Parish, Penny	Life Trustee	<1	None
Sweeney, Rhonda	Life Trustee	<1	None
Weir, Jesse F.	Life Trustee	<1	None
Wooldridge, Bonnie Sue	Life Trustee	<1	None