Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.



Department of the Treasury Internal Revenue Service

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Intern	al Reve	enue Service do to www.ii.3.gov/i officion of instructions and the	ine fatest in		Inspection
A F	or th	e 2023 calendar year, or tax year beginning $ { m JUL}1,2023$ and	ending J	UN 30, 2024	
В с	heck if	C Name of organization		D Employer identification	ation number
a	oplicat				
	Addr Chan	General County women S CHORUS			
	Name Name	ge Doing business as		33-089563	5
	Initia	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	
	Final	23802 AVENIDA DE LA CARLOTA		949-451-8	
	termi ated			G Gross receipts \$	367,794.
	Amer	LAGONA HILLS, CA 92055		H(a) Is this a group ret	
	Appli dion	F Name and address of principal officer: MARGOERTIE DOFRIED		for subordinates?	Yes X No
	pend	SAME AS C ABOVE		H(b) Are all subordinates inc	luded? Yes No
<u>I</u> T	ax-e>	xempt status: 🔀 501(c)(3) 🗌 501(c) () (insert no.) 🗌 4947(a)(1) c	or 🗌 527	If "No," attach a li	st. See instructions
	Vebs			H(c) Group exemption	number
<u>K</u> F	orm o	f organization: 🚺 Corporation 📄 Trust 📄 Association 📄 Other	L Year	of formation: 2000 M	State of legal domicile: CA
Pa	rt I	Summary			
	1	Briefly describe the organization's mission or most significant activities:			
nce		CREATES AND PERFORMS OUTSTANDING CHORAL L	ITERAT	URE, ENGAGES	S AND
rna	2	Check this box if the organization discontinued its operations or dispos	ed of more	than 25% of its net asse	
ove	3	Number of voting members of the governing body (Part VI, line 1a)			10
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)			10
es 8	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)			5
Activities & Governance	6	Total number of volunteers (estimate if necessary)			65
∖cti	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			0.
1	b	Net unrelated business taxable income from Form 990-T, Part I, line 11			0.
				Prior Year	Current Year
е	8	Contributions and grants (Part VIII, line 1h)		174,029.	123,054.
nue	9	Program service revenue (Part VIII, line 2g)		30,556.	229,981.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		2,204.	5,731.
ш	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-6,475.	-3,346.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		200,314.	355,420.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
Se	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		42,164.	74,683.
Expenses	16a	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) 6, 15		0.	0.
xpe					
Ш		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		158,787.	281,536.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		200,951.	356,219.
	19	Revenue less expenses. Subtract line 18 from line 12		-637.	-799.
Net Assets or Fund Balances			Be	ginning of Current Year	End of Year
sets alan	20	Total assets (Part X, line 16)		198,367.	180,056.
t As	21	Total liabilities (Part X, line 26)		154,590.	136,140.
		Net assets or fund balances. Subtract line 21 from line 20		43,777.	43,916.
	rt II	-			
		alties of perjury, I declare that I have examined this return, including accompanying schedules			knowledge and belief, it is
true,	corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of wh	lich preparer	has any knowledge.	

Sign	Signature of officer			Date
-	MARGUERITE DUPRIEU, CFO			
	Type or print name and title			
	Print/Type preparer's name	Preparer's signature	Date	
Paid	TRITIA FOSTER			self-employed P02164134
Preparer	Firm's name DAVIS FARR LLP			Firm's EIN 47-3535842
Use Only	Firm's address 18201 VON KARMAN	AVE, SUITE 1100		
	IRVINE, CA 92612			Phone no. 949 - 474 - 2020
May the II	RS discuss this return with the preparer shown abo	ve? See instructions		X Yes No
LHA For	Paperwork Reduction Act Notice, see the separ	ate instructions. 332001 12-21-23		Form 990 (2023)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

	990 (2023) ORANGE COUNTY WOMEN'S CHORUS	33-0895635	Page 2
Par			X
1	Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission:	<u></u>	. [A]
•	THE ORANGE COUNTY WOMEN'S CHORUS CREATES AND PERFORMS	OUTSTANDING	
	CHORAL LITERATURE, ENGAGES AND ENRICHES OUR AUDIENCE,		
	WOMEN IN MUSIC BY OFFERING THREE CONCERT PROGRAMS ANN		
	CONCERTS) IN ORANGE COUNTY, PROVIDING A CONDUCTING IN		
2	Did the organization undertake any significant program services during the year which were not listed on the		37
	prior Form 990 or 990-EZ?	Yes	XNo
3	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program servi		XNo
3	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program service	es, as measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to	• •	d
	revenue, if any, for each program service reported.		
4a			981.)
	THE OCWC CREATES AND PERFORMS OUTSTANDING CHORAL LITE	-	
	AND ENRICHES OUR AUDIENCES, AND CELEBRATES WOMEN IN MU		
	OFFERING THREE CONCERT PROGRAMS ANNUALLY (5-6 PERFORM A CONDUCTING INTERNSHIP PROGRAM FOR A PROMISING FEMAL		NG
	COMMISSIONING NEW WORKS FOR WOMEN'S VOICES, FREQUENTLY	-	
	COMPOSERS; AND PERIODICALLY TOURING NATIONALLY AND IN		
	IN THE FISCAL YEAR ENDED JUNE 30, 2024, WE OFFERED SIX	X PERFORMANCES C)F
	THREE PROGRAMS, REACHING TOTAL TICKET SALES OF 1,214		
	CONDUCTING INTERN CONDUCTED IN EACH PROGRAM. WE COMPLI		
	INTERNATIONAL PERFORMANCE TOUR, OFFERING THREE CONCERS	<u>FS IN ZAGREB,</u>	
	SAMOBOR, AND OPATIJA, CROATIA.		
4b	(Code:) (Expenses \$ including grants of \$)	(Revenue \$)
4c	(Code:) (Expenses \$ including grants of \$)	(Revenue \$)
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses 315, 291.	/	
		Form 9 9	90 (2023)
332002	12-21-23		

Form 990 (WOMEN'S	CHORUS
Part IV	Ch	ecklist of Required So	chedules		

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	L
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			37
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			v
_	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			v
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	10		x
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
_	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	11a		x
h	Part VI			
D		11b		x
~	assets reported in Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part VII</i> Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
C	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
Ь	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		x
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21		X
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332003 12-21-23

Form	990	(2023)
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 ORANGE COUNTY WOMEN'S CHORUS
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 Part IV
 Checklist of Required Schedules (continued)
 Page 4

	continued)		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		103	
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		x
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>	00-		v
	"Yes," complete Schedule L, Part IV	28a		X X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		
C	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If</i>	28c		x
29	"Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X_
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?		37	
Par	Note: All Form 990 filers are required to complete Schedule O t V Statements Regarding Other IRS Filings and Tax Compliance	38	Х	L
1 01				
	Check if Schedule O contains a response or note to any line in this Part V		Vac	No
10	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 12		Yes	INO
ia b	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 2 Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b	-		
5	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
Ū	(gambling) winnings to prize winners?	1c		
332004	1 12-21-23		990	(2023)
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Form	990 (2023) ORANGE COUNTY WOMEN'S CHORUS		33-0895	635	Р	_{age} 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)					
					Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	2a	5			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?		2b	Х	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	0		3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other a					
	financial account in a foreign country (such as a bank account, securities account, or other financial a			4a		X
b	If "Yes," enter the name of the foreign country		,			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccoun	ts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transac			5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did th					
	any contributions that were not tax deductible as charitable contributions?			6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contributi					
-	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).			0.0		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices r	provided to the payor?	7a		x
				7b		<u> </u>
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was		uired			
U	to file Form 8282?			7c		x
Ь		7d		10		
	It "Yes," indicate the number of Forms 8282 filed during the year		+2	7e		
e f	Did the organization during the year, pay premiums, directly or indirectly, on a personal benefit contra-			76 7f		<u> </u>
	If the organization received a contribution of qualified intellectual property, did the organization file Fo		00 as required?	7g		<u> </u>
-	If the organization received a contribution of qualified intellectual property, did the organization life organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization life of the organization of cars, boats, airplanes, or other vehicles, did the organization life of the organization of cars, boats, airplanes, or other vehicles, did the organization life of the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization life of the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, airplanes, or other vehicles, did the organization of cars, boats, airplanes, a			79 7h		<u> </u>
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained					
U		•	0	8		
9	Sponsoring organizations maintaining donor advised funds.					
				9a		
				9b		
10	Section 501(c)(7) organizations. Enter:					
	Initiation fees and capital contributions included on Part VIII, line 12	10a				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:		•			
	Gross income from members or shareholders	11a				
	Gross income from other sources. (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		•			
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note: See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the					
	organization is licensed to issue qualified health plans	13b				
с	Enter the amount of reserves on hand	13c				
			•	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu			14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune					
	excess parachute payment(s) during the year?			15		x
	If "Yes," see the instructions and file Form 4720, Schedule N.					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	t incor	ne?	16		X
	If "Yes," complete Form 4720, Schedule O.					
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac	tivities	3			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17		
	If "Yes," complete Form 6069.					
332005	12-21-23			Form	990	(2023)
	_					/

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Form 990 (2023)

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

Check if Schedule O contains a res	nonce or note to an	v ling in this Dart VI	
Offect if Schedule O contains a res	ponse or note to an	א א א א א א א א א א א א א א א א א א א	

|--|

Sec	tion A. Governing Body and Management					
-		1.	10		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	<u>1a</u>	10			
	If there are material differences in voting rights among members of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0.		10			
b	Enter the number of voting members included on line 1a, above, who are independent					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh				Х	
2	officer, director, trustee, or key employee?			2	<u>л</u>	
3	Did the organization delegate control over management duties customarily performed by or under th of officers, directors, trustees, or key employees to a management company or other person?					x
4	Did the organization make any significant changes to its governing documents since the prior Form		s filed?	3		X
- - 5	Did the organization make any significant changes to its governing documents since the prior round Did the organization become aware during the year of a significant diversion of the organization's as	-		5		X
6	Did the organization become aware during the year of a significant diversion of the organization state.			6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a					
74	more members of the governing body?			7a		x
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s					
	persons other than the governing body?			7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year					
а	The governing body?	-	-	8a	Х	
b	Each committee with authority to act on behalf of the governing body?			8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read	ached a	at the			
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O			9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenue	Code.)			
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such c	hapters	s, affiliates,			
				10b		<u> </u>
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing boo	dy befo	re filing the form?	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.				37	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris			12b	Х	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If				х	
40	on Schedule O how this was done			12c	~	x
13	Did the organization have a written whistleblower policy?			13 14	х	
14 15	Did the organization have a written document retention and destruction policy?			14	- 23	
15	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		dependent			
а	The organization's CEO, Executive Director, or top management official			15a		x
	Other officers or key employees of the organization			15b		X
~	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			10.0		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment w	vith a			
	taxable entity during the year?			16a		х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga		-			
	exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, a	and 990)-T (section 501(c)(3)	s only)	availat	ole
	for public inspection. Indicate how you made these available. Check all that apply.					
	X Own website X Another's website X Upon request Other (explai		,			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, c	onflict	of interest policy, and	d finan	cial	
	statements available to the public during the tax year.					
20	State the name, address, and telephone number of the person who possesses the organization's bo	oks an	d records			
	MARGUERITE DUPRIEU - 949-451-8590 23802 AVENIDA DE LA CARLOTA, LAGUNA HILLS, CA 926	53				
		55		Eor~	990	(2023)
332006	12-21-23 6			FULL	1000	(2023)
	v					

Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated
	Employees, and Independent Contractors

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.

Enter -0- in columns (D), (E), and (F) if no compensation was paid. • List all of the organization's current key employees, if any. See the instructions for definition of "key employee."

 List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)	(C)						(D)	(E)	(F)
Name and title	Average hours per week	box	Position (do not check more than one box, unless person is both an officer and a director/trustee)				n an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
<pre>(1) KATHRYN J. BALDASARI BOARD MEMBER</pre>	1.00	x						0.	0.	0.
(2) MARY C. LANGSDORF	12.00					\vdash		0.	0.	0.
PAST PRESIDENT, BOARD OF DIRECT	12.00	x		x				0.	0.	0.
(3) ADRIANA GOMEZ	1.00									
CORPORATE SECRETARY		1		x				0.	0.	0.
(4) MARJORIE BEALE	1.00									
BOARD MEMBER		х						0.	0.	0.
(5) JANET BRATTON	1.00									
BOARD MEMBER		Х						0.	0.	0.
(6) LAUREL CHOWDHURY	6.00	_								
BOARD MEMBER		Х						0.	0.	0.
(7) KATRINA VELDKAMP	6.00									
PRESIDENT, BOARD OF DIRECT		Х		X				0.	0.	0.
(8) MARGUERITE DUPRIEU	4.00									
CHIEF FINANCIAL OFFICER	1 00	Х		X				0.	0.	0.
(9) JASMINE KHORSANDI	1.00								0	
BOARD MEMBER (10) ALEC WATERS	1.00	X				\vdash		0.	0.	0.
BOARD MEMBER	1.00	x						0.	0.	0.
(11) LAURA RAYNES	1.00									U .
BOARD MEMBER	1.00	x						0.	0.	0.
		1								
-	1							1	l	Eorm 990 (2022)

332007 12-21-23

Form 990 (2023)

09151024 149072 956350

	990 (2023) ORANGE CO									33-0895	635 Page 8
Par	t VII Section A. Officers, Directors, Trust		loye	ees,			ghes	t C		· /	
	(A) Name and title	(B) Average hours per week	Average hours per week			(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)			(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
		(list any hours for related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key em ployee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
	0.11.11								0.	0.	
c d	Subtotal Total from continuation sheets to Part VII Total (add lines 1b and 1c)	, Section A				·····			0.0.	0.	0. 0. 0.
2	Total number of individuals (including but no compensation from the organization	ot limited to the	ose	liste	d ab	ove)) wh	o re	ceived more than \$100,	000 of reportable	0 Yes No
3 4	Did the organization list any former officer, line 1a? <i>If</i> "Yes," <i>complete Schedule J for su</i> For any individual listed on line 1a, is the su	ich individual	, 				, 		· · · ·		3 X
5	and related organizations greater than \$150 Did any person listed on line 1a receive or a rendered to the organization? <i>If</i> "Yes," comp	ccrue compen	satio	on fr	oma	any	unre	late	ed organization or individ	dual for services	4 X 5 X
	tion B. Independent Contractors										
1	Complete this table for your five highest con the organization. Report compensation for the	•	•							· ·	
	(A) (B) Name and business address NONE								ervices	(C) Compensation	
2	Total number of independent contractors (in \$100,000 of compensation from the organiz	•	ot lim	nited	to t	thos 0		ted	above) who received m	ore than	Form 990 (2023)

332008 12-21-23

			2023) ORANGE COUNTY	WOMEN'S	CHORUS		33-0895	635 Page 9
Pa	rt V	/111	Statement of Revenue					
			Check if Schedule O contains a response	or note to any lin		(D)	(0)	
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under
								sections 512 - 514
ts ts	1	а	Federated campaigns 1a					
irar oun		b	Membership dues 1b					
Ame Ame		с	Fundraising events 1c	8,924.				
ar /		d	Related organizations 1d					
s, G		е	Government grants (contributions) 1e					
r Si		f	All other contributions, gifts, grants, and					
but			similar amounts not included above 1f	114,130.				
d Of		g	Noncash contributions included in lines 1a-1f	7,229.				
Contributions, Gifts, Grants and Other Similar Amounts		h	Total. Add lines 1a-1f		123,054.			
				Business Code				
e	2	а	TOUR REVENUE	711300	197,582.	197,582. 32,399.		
vio e		b	CONCERT REVENUE	711300	32,399.	32,399.		
Program Service Revenue		с						
am		d						
Ba		е						
Pro		f	All other program service revenue					
		g	Total. Add lines 2a-2f		229,981.			
	3		Investment income (including dividends, intere					
			other similar amounts)		5,731.			5,731.
	4		Income from investment of tax-exempt bond p					
	5		Royalties					
			(i) Real	(ii) Personal				
	6	а	Gross rents 6a					
		b	Less: rental expenses 6b					
		с	Rental income or (loss) 6c					
		d	Net rental income or (loss)					
	7		Gross amount from sales of (i) Securities	(ii) Other				
			assets other than inventory 7a					
		b	Less: cost or other basis					
P			and sales expenses 7b					
evenue		с	Gain or (loss) 7c					
Rev			Net gain or (loss)					
Other I			Gross income from fundraising events (not					
Oth			including \$ 8,924. of					
			contributions reported on line 1c). See					
			Part IV, line 18 8a	9,028.				
		b	Less: direct expenses 8b	12,374.				
		с	Net income or (loss) from fundraising events		-3,346.			-3,346.
	9	а	Gross income from gaming activities. See					
			Part IV, line 19 9a	ı				
		b	Less: direct expenses 9b					
			Net income or (loss) from gaming activities					
	10	а	Gross sales of inventory, less returns					
			and allowances 10a	a				
		b	Less: cost of goods sold 10k	b				
			Net income or (loss) from sales of inventory					
ß				Business Code				
e on	11	а						
scellaneo Revenue		b						
sell: eve		с						
Miscellaneous Revenue		d	All other revenue					
2			Total. Add lines 11a-11d					
	12		Total revenue. See instructions		355,420.	229,981.	0.	2,385.
33200	9 12-	-21-	23					Form 990 (2023

332009 12-21-23

ORANGE COUNTY WOMEN'S CHORUS Part IX Statement of Functional Expenses

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

0000	Check if Schedule O contains a respons				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations		скренеев	general expenses	схреньее
•	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
-	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
•	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	68,481.	56,036.	12,445.	
8	Pension plan accruals and contributions (include	,			
-	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	6,202.	5,108.	1,094.	
11	Fees for services (nonemployees):				
а	Management				
	Legal				
	Accounting	10,720.		10,720.	
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
-	column (A), amount, list line 11g expenses on Sch 0.)	12,971.	12,476.		495.
12	Advertising and promotion	6,755.	6,755.		
13	Office expenses	20,225.	10,571.	3,999.	5,655.
14	Information technology	476.	476.		
15	Royalties				
16	Occupancy	13,290.	9,930.	3,360.	
17	Travel	1,177.	1,177.		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,761.	1,169.	592.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	2,473.		2,473.	
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),				
	amount, list line 24e expenses on Schedule 0.)	105 553	105 555		
а	TOUR CONCERT	197,662.	197,662.		
b	OTHER CONCERT PRODUCTIO	12,235.	12,235.		
с	LICENSES AND ORGANIZATI	1,791.	1,696.	95.	
d					
е	All other expenses		215 001		
25	Total functional expenses. Add lines 1 through 24e	356,219.	315,291.	34,778.	6,150.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				- 000 (2222)

10

332010 12-21-23

Form **990** (2023)

ORANGE COUNTY WOMEN'S CHORUS

	n 990 (; rt X	ORANGE COUNTY WOMEN'S CHORUS		33-	0895635 Page 11
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	18,712.	1	35,648.
	2	Savings and temporary cash investments		2	139,724.
	3	Pledges and grants receivable, net		3	500.
	4	Accounts receivable, net		4	302.
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
				6	
	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
As	9	Prepaid expenses and deferred charges	1 2 2 5 2	9	2,382.
		Land, buildings, and equipment: cost or other		-	,
		basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b		10c	
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	1,500.
	16	Total assets. Add lines 1 through 15 (must equal line 33)	100 200	16	180,056.
	17	Accounts payable and accrued expenses		17	136,140.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
bili		controlled entity or family member of any of these persons		22	
Lia	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third		- 1	
	20	parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	154,590.	26	136,140.
		Organizations that follow FASB ASC 958, check here X			
es		and complete lines 27, 28, 32, and 33.			
ũ	27	Net assets without donor restrictions	43,777.	27	43,916.
Bala	28	Net assets with donor restrictions		28	
μ		Organizations that do not follow FASB ASC 958, check here			
Τŭ		and complete lines 29 through 33.			
P	29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Ass	31	Retained earnings, endowment, accumulated income, or other funds		31	
Net Assets or Fund Balances	32	Total net assets or fund balances		32	43,916.
Ż	33	Total liabilities and net assets/fund balances	100 000	33	180,056.
	33	ו טרמו וומטווונופט מווע דופר מטפרטידעו ע טמומוונפט	1 20,00,007.	აა	1 200,000

Form 990 (2023)

	1 990 (2023) ORANGE COUNTY WOMEN'S CHORUS	33-089	95635	Pag	_{je} 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>		
1	Total revenue (must equal Part VIII, column (A), line 12)	1	355		
2	Total expenses (must equal Part IX, column (A), line 25)	2	356	<u> </u>	
3	Revenue less expenses. Subtract line 2 from line 1	3		-79	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	43	,77	
5	Net unrealized gains (losses) on investments	5		93	38.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	43	, 91	<u> 16.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>		
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	e O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a		<u>X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	l on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		. 2b		<u>X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits				
				200	

Form **990** (2023)

Department of the Treasury Internal Revenue Service

(Form 990)

Public Charity Status and Public Support

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

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

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

OMB No. 1545-0047
2023
Open to Public Inspection

Name of the	e organization
-------------	----------------

Nam		the organization		MOMEN'S CHODI	TC		E		1 dentification number			
Da	rt I	Reason for Public C		WOMEN'S CHORI		ic nort) C			3-0895635			
							ee instructions.					
	organ	ization is not a private found	·	0 /		,	()/ A \/:\					
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,										
5		city, and state:										
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in										
6		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).										
7	\square	An organization that norma	-					gonoral	while described in			
'		section 170(b)(1)(A)(vi). (C	•	Inal part of its support if	on a gove	mmentar		general	Jublic described III			
8		A community trust describe		1)(A)(vi) (Complete Par	ни)							
9	H	An agricultural research org				d in coniu	unction with a la	nd grant	collogo			
3		or university or a non-land-g										
		university:	fram concept of agrico			ame, ony		ie college	01			
10	X	An organization that norma	Ilv receives (1) more	than 33 1/3% of its supr	ort from c	ontribution	ns membershin	fees and	aross receipts from			
		activities related to its exem					•		•			
		income and unrelated busir										
		See section 509(a)(2). (Con				ooo aoqaa	iou by the orga	inzation a				
11		An organization organized a	-	velv to test for public sa	fetv. See	section 50)9(a)(4).					
12	\square	An organization organized a	-	•	•			v out the	ourposes of one or			
		more publicly supported or	-	-	-				-			
		lines 12a through 12d that	-									
а		Type I. A supporting orga	anization operated, su	upervised, or controlled	by its supp	orted orga	anization(s), typ	ically by g	giving			
		the supported organization	on(s) the power to reg	ularly appoint or elect a	majority o	f the direc	tors or trustees	s of the su	pporting			
		organization. You must c	omplete Part IV, Se	ctions A and B.								
b		Type II. A supporting org	anization supervised	or controlled in connect	ion with its	s supporte	d organization	s), by hav	ing			
		control or management o	f the supporting orga	anization vested in the sa	ame persoi	ns that co	ntrol or manage	the supp	orted			
		organization(s). You mus	t complete Part IV,	Sections A and C.								
с		Type III functionally inte	grated. A supporting	g organization operated	in connect	ion with, a	and functionally	integrate	d with,			
		its supported organization	n(s) (see instructions)	. You must complete I	Part IV, Se	ctions A,	D, and E.					
d		Type III non-functionally	integrated. A supp	orting organization oper	ated in cor	nnection w	vith its supporte	ed organiz	ation(s)			
		that is not functionally int	egrated. The organiz	ation generally must sat	isfy a distri	bution rec	quirement and a	n attentiv	eness			
		requirement (see instructi	ions). You must con	nplete Part IV, Sections	A and D,	and Part	V .					
е		Check this box if the orga	anization received a v	vritten determination fro	m the IRS	that it is a	Type I, Type II,	Type III				
		functionally integrated, or	Type III non-functior	nally integrated supportion	ng organiza	ation.			·			
f		er the number of supported o	•									
g		vide the following information	about the supporte (ii) EIN	d organization(s). (iii) Type of organization	(iv) Is the orga	nization listed	(u) Amount of n	a a posta n /	(vi) Amount of other			
		(i) Name of supported organization	(11) EIN	(described on lines 1-10	in your governi	ng document?	(v) Amount of n support (see inst		(vi) Amount of other support (see instructions)			
		0.94		above (see instructions))	Yes	No						
Tota	ıl											

Schedule A	Form	990	2023
		000	2020

Part II

ORANGE COUNTY WOMEN'S CHORUS

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

See	ction A. Public Support				_		
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge \dots						
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)						
	Public support. Subtract line 5 from line 4.						
Se	ction B. Total Support		7	-		-	
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(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. (see instructi	ons)			12	
13	First 5 years. If the Form 990 is for th	ne organization's f	irst, second, third,	fourth, or fifth tax	year as a section	501(c)(3)	
	organization, check this box and stop						
See	ction C. Computation of Publi	c Support Per	rcentage				
	Public support percentage for 2023 (I					14	%
	Public support percentage from 2022					15	%
16a	33 1/3% support test - 2023. If the o	organization did no	ot check the box o	on line 13, and line	14 is 33 1/3% or r	nore, check this bo	x and
	stop here. The organization qualifies		-				
b	33 1/3% support test - 2022. If the o	organization did no	ot check a box on	line 13 or 16a, and	d line 15 is 33 1/3%	6 or more, check th	nis box
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test	- 2023. If the org	ganization did not	check a box on lir	ne 13, 16a, or 16b,	and line 14 is 10%	or more,
	and if the organization meets the fact	s-and-circumstanc	ces test, check this	s box and stop h	ere. Explain in Par	t VI how the organi	zation
	meets the facts-and-circumstances te	st. The organization	on qualifies as a p	ublicly supported	organization		
b	10% -facts-and-circumstances test	- 2022. If the or	ganization did not	check a box on lir	ne 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets the						
	organization meets the facts-and-circu						
18	Private foundation. If the organization	n did not check a	box on line 13, 16	6a, 16b, 17a, or 17	b, check this box a		
						Schedule A	(Form 990) 2023

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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.)

See	ction A. Public Support	<u></u>	,						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total		
1	Gifts, grants, contributions, and								
	membership fees received. (Do not								
	include any "unusual grants.")	92,620.	106,920.	142,318.	174,029.	123,054.	638,941.		
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	9,797.		128,170.	30,556.	229,981.	398,504.		
3	Gross receipts from activities that								
	are not an unrelated trade or bus- iness under section 513								
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf								
5	The value of services or facilities furnished by a governmental unit to								
-	the organization without charge	100 417	106 020	270 400			1027445		
	Total. Add lines 1 through 5	102,417.	100,920.	270,488.	204,585.	353,035.	1037445.		
78	Amounts included on lines 1, 2, and 3 received from disqualified persons	17,683.	13,485.	38,064.	17,079.	27,379.	113,690.		
k	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.		
c	Add lines 7a and 7b	17,683.	13,485.	38,064.	17,079.	27,379.	113,690.		
	Public support. (Subtract line 7c from line 6.)	,			,	,	923,755.		
See	ction B. Total Support				1				
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total		
	Amounts from line 6	102,417.	106,920.	270,488.	204,585.	353,035.	1037445.		
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	21.	17.	21.	2,204.	5,731.	7,994.		
t	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975								
c	Add lines 10a and 10b	21.	17.	21.	2,204.	5,731.	7,994.		
	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on								
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)								
13	Total support. (Add lines 9, 10c, 11, and 12.)	102,438.	106,937.	270,509.	206,789.	358,766.	1045439.		
14	First 5 years. If the Form 990 is for th	e organization's fir	rst, second, third, f	ourth, or fifth tax y	/ear as a section 5	01(c)(3) organizatio	on,		
	ction C. Computation of Publi								
15	Public support percentage for 2023 (I			olumn (f))		15	88.36 %		
<u>16</u>	Public support percentage from 2022					16	87.30 %		
See	ction D. Computation of Inves	tment Income	e Percentage						
17	17 Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f)) 17 76 %								
18	Investment income percentage from					18	.29 %		
19 a	19a 33 1/3% support tests - 2023. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not								
	more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization								
k	33 1/3% support tests - 2022. If the								
_	line 18 is not more than 33 1/3%, che								
-	Private foundation. If the organization	n did not check a l	box on line 14, 19a	a, or 19b, check th	is box and see ins				
3320	23 12-21-23		15			Schedule A	(Form 990) 2023		

^{2023.05000} ORANGE COUNTY WOMEN'S CHO 95635Q_1

Yes No

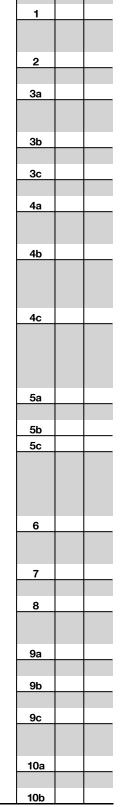
Part IV | Supporting Organizations

(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

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

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Schedule A (Form 990) 2023

1

2

1

Yes No

Yes No

Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
с	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 Part VI.	11c		
ec	tion B. Type I Supporting Organizations			
			Yes	No
1	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? <i>If "No," describe in</i> Part VI <i>how the supported organization(s)</i>			

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. Did the organization operate for the benefit of any supported organization other than the supported 2 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

	DEIVIS			ie supp		ganization.	
Sectio	n C.	Type II	Suppo	rting	Organ	ižations	

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 the supported organization(s)

Section D. All 1	Type III Supporting	Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	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 Part VI the role the organization's			
	supported organizations played in this regard.	3		

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the	e Integral Part Test during the year	(see instructions).
•			

- The organization satisfied the Activities Test. Complete line 2 below. а
- h The organization is the parent of each of its supported organizations. Complete line 3 below.

С		The organization supported a governmental entity.	Describe in Part VI how	you supported a governmental er	tity (see instruction <u>s).</u>
---	--	---	-------------------------	---------------------------------	----------------------------------

- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes." then in Part VI 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 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 Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- Parent of Supported Organizations. Answer lines 3a and 3b below. 3

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.

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 Part VI the role played by the organization in this regard. 332025 12-21-23

3b Schedule A (Form 990) 2023

2a

2b

3a

Schedule A (Form 990) 2023

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2023.05000 ORANGE COUNTY WOMEN'S CHO 956350_1

•		ig tract off f		
	All other Type III non-functionally integrated supporting organizations mus	t complete S	Sections A through E.	
Sect	ion 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		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
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 0.015 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 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 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-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990) 2023

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Schedule A (Form 990) 2023

ORANGE COUNTY WOMEN'S CHORUS

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a gualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions 4

Schedule A (Form 990) 2023

ORANGE COUNTY WOMEN'S CHORUS Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp				
	organizations, in excess of income from activity	2			
3	Administrative expenses paid to accomplish exempt purpose	3			
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (<i>describe in Part VI</i>). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2023	S	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023				
a	From 2018				
b	From 2019				
с	From 2020				
d	From 2021				
е	From 2022				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2023 distributable amount				
i	Carryover from 2018 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
	Applied to 2023 distributable amount				
с	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, 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 2023. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
	Excess from 2019				
	Excess from 2020				
	Excess from 2021				
	Excess from 2022				

Schedule A (Form 990) 2023

e Excess from 2023

Schedule A	(Form 990) 2023	ORANGE	COUNTY	WOMEN'S	CHORUS	33-0895635 Page 8
Part VI	line 1; Part IV, Section D,	, lines 2 and 3; P	art IV, Sectio	n E, lines 1c, 2a,	2b, 3a, and 3b; Par	art II, line 17a or 17b; Part III, line 12; section B, lines 1 and 2; Part IV, Section C, t V, line 1; Part V, Section B, line 1e; Part V, t for any additional information.
332028 12-21-2	3			20		Schedule A (Form 990) 2023

SCHEDULE G	Suppleme	ntal Information Regarding	Fund	Iraisi	ng or Gaming A	ctiv	ities	OMB No. 1545-0047	
(Form 990)	Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.						or if the	2023	
Department of the Treasury								Open to Public	
Internal Revenue Service	epartment of the measury								
Name of the organization								entification number	
Part I Fundrais		COUNTY WOMEN'S CHOR Complete if the organization answe		oc" or	Earm 990 Part IV li	no 1 [.]	<u>33-0895</u> 7 Form 990 F		
	complete this part		reu r	es oi	1 FOITH 990, Fait IV, III		7. FOIII 990-E2	lillers are not	
 a Mail solicitat b Internet and c Phone solicitat d In-person so 2 a Did the organization 	 b Internet and email solicitations c Phone solicitations d In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or 							s 🗌 No	
b If "Yes," list the 10 compensated at le		viduals or entities (fundraisers) pursua	ant to a	agreei	ments under which th	e fur	ndraiser is to b	е	
(i) Name and addres or entity (func	s of individual	(ii) Activity	(iii) fundr have cr or con contribu	aiser ustody itrol of	(iv) Gross receipts from activity	tò (o	Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization	
			Yes	No					
Total									
	3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration							egistration	

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

Schedule G (Form 990) 2023

LHA 332081 09-13-23

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990.FZ lines 1 and 6b. List events with gross receipts greater than \$5,000

		of fundraising event contributions and gro	oss income on Form 990	-EZ, lines 1 and 6b. List e	vents with gross receip	ots greater than \$5,000.	
			(a) Event #1 GLASS OF CABARET	(b) Event #2 SEASON PREVIEW	(c) Other events NONE	(d) Total events (add col. (a) through col. (c))	
			(event type)	(event type)	(total number)	COI. (C))	
Revenue	1	Gross receipts	17,452.	500.		17,952.	
	2	Less: Contributions	8,424.	500.		8,924.	
	3	Gross income (line 1 minus line 2)	9,028.			9,028.	
	4	Cash prizes					
	5	Noncash prizes	7,229.			7,229.	
penses	6	Rent/facility costs	1,200.			1,200.	
Direct Expenses	7	Food and beverages	772.			772.	
Ē		Entertainment		1 010		550.	
		Other direct expenses				2,623. 12,374.	
		Direct expense summary. Add lines 4 through					
Pa	<u>11</u> rt I	Net income summary. Subtract line 10 from li II Gaming. Complete if the organization a				5,540.	
		\$15,000 on Form 990-EZ, line 6a.					
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))	
Reve	1	Gross revenue					
Se	2	Cash prizes					
zpens	3	Noncash prizes					
Direct Expenses	4	Rent/facility costs					

	 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) 		
â	Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? b If "No," explain:	Yes	No
	a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?	Yes	No

%

Yes

No

%

Yes

No

%

Yes

No

332082 09-13-23

Schedule G (Form 990) 2023

5 Other direct expenses

6 Volunteer labor

Sch	edule G (Form 990) 2023	ORANGE	COUNTY	WOMEN'	S CHORUS	33	-0895	635	Page 3
11	Does the organization conduct ga	ming activities	with nonmen	bers?				Yes	No
12	Is the organization a grantor, bene	•			· ·	•			
	to administer charitable gaming?						🔲	Yes	No
	Indicate the percentage of gaming						10-	I	07
	The organization's facility								<u>%</u>
	An outside facility Enter the name and address of the						. 100		/0
		с ролослі піле г		gamzation o	gaining, op conai or on				
	Name								
	Address								
15a	Does the organization have a cont	tract with a thir	d party from	whom the org	anization receives ga	aming revenue?		Yes	No No
b	If "Yes," enter the amount of gami	ina revenue rea	ceived by the	organization	\$	and the amount			
	of gaming revenue retained by the				·				
с	If "Yes," enter name and address								
	Name								
	Address								
	Address								
16	Gaming manager information:								
	0 0								
	Name								
	A 1	•							
	Gaming manager compensation	\$							
	Description of services provided								
	_			_					
	Director/officer	Employe	e	Indepe	ndent contractor				
17	Mandatory distributions:								
	Is the organization required under	state law to m	ake charitable	e distributions	from the gaming pro	oceeds to			
-								Yes	🗌 No
b	Enter the amount of distributions								
	organization's own exempt activiti								
Pa	rt IV Supplemental Inform						Part III, lin	ies 9, 9	}b, 10b,
	15b, 15c, 16, and 17b, as	applicable. Als	so provide an	y additional in	formation. See Instru	ICTIONS.			
33208	33 09-13-23					Sch	edule G (Form	990) 2023
				23					

Schedule G	G (Form	990)

Part IV	Supplemental Information	(continued)
220024 04 01		Schedule G (Form 990)

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service

Name of the organization

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 for the latest information.



33-0895635

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

ORANGE COUNTY WOMEN'S CHORUS

ENRICHES OUR AUDIENCE, AND CELEBRATES WOMEN IN MUSIC BY OFFERING THREE

CONCERT PROGRAMS ANNUALLY (FIVE-SIX CONCERTS) IN ORANGE COUNTY;

PROVIDING A CONDUCTING INTERNSHIP TO A PROMISING YOUNG WOMAN CONDUCTOR;

COMMISSIONING NEW WORKS FOR WOMEN'S VOICES, FREQUENTLY FROM WOMEN

COMPOSERS; AND PERIODICALLY TOURING NATIONALLY AND INTERNATIONALLY.

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

PROMISING YOUNG WOMAN CONDUCTOR; COMMISSIONING NEW WORKS FOR WOMEN'S

VOICES, FREQUENTLY FROM WOMEN COMPOSERS; AND PERIODICALLY TOURING

NATIONALLY AND INTERNATIONALLY.

FORM 990, PART VI, SECTION A, LINE 2:

KATHRYN BALDASARI AND JANET BRATTON, BOTH BOARD MEMBERS, ARE ALSO SISTERS.

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

COPY OF THE FORM 990 IS DISTRIBUTED TO ALL OFFICERS AND MEMBERS OF THE

OUESTIONS ARE ADDRESSED AND RESOLVED PRIOR TO FILING. BOARD.

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

EACH MEMBER OF THE BOARD OF DIRECTORS COMPLETES A CONFLICT OF INTEREST

STATEMENT ANNUALLY. THESE ARE REVIEWED BY THE PRESIDENT OF THE BOARD, AND

ANY ISSUES ARE RESOLVED.

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

THE OCWC MAKES ITS FORM 990 AND FINANCIAL STATEMENTS AVAILABLE AT

Schedule O (Form 990) 2023 Name of the organization ORANGE COUNTS	Y WOMEN'S CHORUS	Page Employer identification numbe 33-0895635
WWW.OCNONPROFITCENTRAL.ORG.	. ITS ANNUAL REPORT AND FORM	990 ARE AVAILABLE
ON ITS OWN WEBSITE AT		
WWW.OCWOMENSCHORUS.ORG/WHO-	-WE-ARE/FINANCIAL-INFORMATION.	GOVERNING
DOCUMENTS AND THE CONFLICT	OF INTEREST POLICY ARE AVAILA	BLE UPON REQUEST.
332212 11-14-23		Schedule O (Form 990) 202
.51024 149072 95635Q	26 2023.05000 ORANGE COUN	