## Form **990**

## **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.

OMB No. 1545-0047

Open to Public
Inspection

Department of the Treasury Internal Revenue Service

A	For the	2018 calend	ar year, or tax year begi	nning		, 2018, and ei	nding		, 20	
В	Check if a	applicable:	C Name of organization JOHI	N C CAMPBELL FOLK SO	CHOOL,	INC			D Employer identi	fication no.
	Address o	change	Doing business as						56-0552780	
_	Name cha	<del>15</del> 02		ox if mail is not delivered to street addre	ss)		Room/suite		E Telephone numb	
=	Initial retu	_	ONE FOLK SCHOO		,		1.00m/gaile	- 1	(828) 837 - 2	
=		rn/terminated						Gross receipts	1113	
=	Amended	W. C.	BRASSTOWN, NC		9			ľ		455
=							11/->		\$ 7,021	
	Applicatio	n pending	F Name and address of principa	а опісег:					r subordinates? Ye	=
		च्च			· – –		10 755		included? Ye	
	Tax-exem			) (insert no.) 4947(a)(1)	or	527	If "No," :	attach a	list. (see instructions	5)
	Website:		.FOLKSCHOOL.COM				H(c) Group exe	mption	number >	
		rganization: X		sociation Other		L Year of formation: 1	925 M State	of lega	I domicile: NC	
Pa	rt I	Summar	у	**************************************					A CONTRACTOR OF THE PARTY OF TH	
	1	Briefly descri	be the organization's miss	ion or most significant activitie	s: THE	JOHN C. CAMI	PBELL FOLK	SCHO	OL, INC.	
d)		STRIVES TO PROVIDE EXPERIENCES IN NON-COMPETITIVE LEARNING AND COMMUNITY LIFT								
20		JOYFUL A	ND ENLIVENING.							
ш										
Ve	2	Check this bo	ox ▶ ☐ if the organization	n discontinued its operations or	disposed	of more than 25% of	of its net assets.			
ŏ								3	1	15
Activities & Governance	1			s of the governing body (Part				4		15
tie				n calendar year 2018 (Part V, I				5		68
tiv	1		of volunteers (estimate if					6		0.0
Ä	1		(5)	1.5				_		
				Part VIII, column (C), line 12				7a	1	0
	В	Net unrelated	d business taxable income	from Form 990-T, line 38 .	• • • • •	• • • • • • • • • • • • • • • • • • • •		7b		0
				21.5		-	Prior Year		Current Ye	ar
Revenue			and grants (Part VIII, line	,					6	48,960
	9	Program sen	/ice revenue (Part VIII, line	e 2g)					4,9	80,390
	10	Investment in	come (Part VIII, column (/	A), lines 3, 4, and 7d)					3	58,684
ď	11	Other revenu	e (Part VIII, column (A), lir	nes 5, 6d, 8c, 9c, 10c, and 11e)					5	55,569
	12	Total revenue	e - add lines 8 through 11 (	must equal Part VIII, column (A	A), line 12)				6,5	43,603
				X, column (A), lines 1-3)						0
	- 1			(, column (A), line 4)						0
	The second second			benefits (Part IX, column (A),		_			2 5	61,613
ses				column (A), line 11e)				· · · · · · · · · · · · · · · · · · ·	2,3	01,013
ens				umn (D), line 25)						0
Expenses				nes 11a-11d, 11f-24e)						15 200
	4									15,303
	18			equal Part IX, column (A), line	,	_				76,916
10	19	Revenue less	s expenses. Subtract line	18 from line 12					7	66,687
Net Assets or Fund Balances							Beginning of Current		End of Yea	
Sset	20	the party that the party .	to the a rest the second of th				17,421			10,395
et A	21						1,230	,366	1,42	28,013
				line 21 from line 20			16,190	,906	16,08	82,382
	rt II	Signatur								
				rn, including accompanying schedules a cer) is based on all information of which			nowledge and belief, it	is		
	1	ind complete. Beel	diddon or proparer (other than on	cery is based on an information of which	proparer mas	arry knowledge.		T		
		JESSE	AUSTIN						04-16-201	9
igi	n	Signature	of officer					Date		
ler	e li	JESSE	AUSTIN, TREASUR	ER						
	25		rint name and title						17	
		Print/Type prep		Preparer's signature	-	Date	Check	if P	TIN	
aic	4	2500 950 0								
		(A) (A) (A)		DEBRA W MORGAN CPA		04-16-2019	self-employed	a	P00728756	
	parer	Firm's name		COMPANY CPAs PA			Firm's EIN			
se	Only	Firm's address					Phone no.			
		<u></u>	Murphy N						7-8188	
lay the IRS discuss this return with the preparer shown above? (see instructions)										No

For	m 990 (2018) JOHN C CAMPBELL FOLK SCHOOL, INC	56-0552780	Page
P	art III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		[]
1	Briefly describe the organization's mission:		
	THE JOHN C. CAMPBELL FOLK SCHOOL, INC. STRIVES TO PROVIDE EXPERIENCES IN N	ON-COMPETITIVE	€
	LEARNING AND COMMUNITY LIFE THAT ARE JOYFUL AND ENLIVENING.		
2	Did the organization undertake any circlifecture		
_	Did the organization undertake any significant program services during the year which were not listed on the		_
	prior Form 990 or 990-EZ?	∐ Yes	x No
3			
J	Did the organization cease conducting, or make significant changes in how it conducts, any program	_	
	services?	∐ Yes [	X No
4			
4	Describe the organization's program service accomplishments for each of its three largest program services, as measurements for each of its three largest program services, as measurements for each of its three largest program services, as measurements for each of its three largest program services, as measurements for each of its three largest program services, as measurements for each of its three largest program services, as measurements for each of its three largest program services, as measurements for each of its three largest program services, as measurements for each of its three largest program services, as measurements for each of its three largest program services, as measurements for each of its three largest program services, as measurements for each of its three largest program services, as measurements for each of its three largest program services, as measurements for each of its three largest program services.	ured by	
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to	others,	
	the total expenses, and revenue, if any, for each program service reported.		
4a	(Code: \ /Evpopped © 2 000 Floor in the line of the li		
Tu	(Revenue	\$ <u> </u>	)
	IN 2018 THE FOLK SCHOOL PROVIDED 778 COURSES TO 6,256 STUDENTS.		
41	(O. )		
4b	(Code:) (Expenses \$ including grants of \$ ) (Revenue	\$	)
4c	(Code:) (Expenses \$ including grants of \$ ) (Revenue	\$	
		*	
ŀd	Other program services (Describe in Schedule O.)		
	) (Nevertice w	)	
4e	Total program service expenses ► 3,860,783		

Form 990 (2018)

JOHN C CAMPBELL FOLK SCHOOL, INC

Part IV Checklist of Required Schedules

		-	res	NO
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
2	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	-
	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
4	candidates for public office? If "Yes," complete Schedule C, Part I	3	-	X
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II			3.5
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	4	-	X
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	-		v
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	5	-	X
=-	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		- V
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	- 6	-	X
	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,"		-	A
	complete 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	- 0		
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			122
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			22
	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,"		DAGS BRA	
	complete Schedule D, Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more	1.0		
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIL	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more	110		21
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	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 Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
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	The state of the s			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a				
	Schedule D, Parts XI and XII	12a	Х	
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	Х	
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			
46	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
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
20 a		20a		<u>X</u>
		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 IL	21		X

Part IV

2	2. Did the executive time to		Yes	No
2.	and the state of t			
0.	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	. 22		X
23	768 to 1 dit 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
24	had the organization have a tax-exempt bond issue with an outstanding principal amount of more than			1
	\$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	04-		3.5
	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a		X
	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year	24b		
)	to defease any tax-exempt bonds?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c		
25	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the association time during the year?	24d		
	transaction with a disquisition have a district of the control of			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
	o 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?			
00	If "Yes," complete Schedule L, Part I	25b		X
26	Bid the diganization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or		1	
	disqualified persons? If "Yes," complete Schedule L, Part II	26	- 1	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	07	1	3.5
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	27		<u>X</u>
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	28a		X
	Schedule I. Part IV			
С	An entity of which a current or former officer director to the control of the control of the current or former officer director to the control of the current or former officer director to the current or former officer director to the current or former of the current or former	28b		X
ŭ	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
20	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	bid the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
2.1	conservation contributions? If "Yes," complete Schedule M	30		X
31	bid the digarization liquidate, terminate, or dissolve and cease operations? If "Yes." complete Schedule N. Part I	31		X
32	The digarization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes "		-	21
	complete Schedule N, Part II	32		v
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		<u>X</u>
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I			
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,	33	-	<u>X</u> _
	or IV, and Part V, line 1			
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34		<u>X_</u>
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	35a		X_
	controlled entity within the meaning of section 512/b)/43/2 /f "//op " appendix 0.14 in a 7			
36	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  Section 501(c)(3) organizations. Did the organization make any transfer to the section 501(c) organization.	35b	:	X
	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
37	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
20	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 in Schedule O for Part VI, lines 11b and			
D	19? Note. All Form 990 filers are required to complete Schedule O.	38	X	
Part				
	Check if Schedule O contains a response or note to any line in this Part V		Г	٦
				<u></u>
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		co	lo
b	Enter the number of Form W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	21		
			3.5	
EEA			X	
	F	orm 99	U (201	8)

Form 990 (2018) JOHN C CAMPBELL FOLK SCHOOL, INC 56-0552780 Page 5 Part V Statements Regarding Other IRS Filings and Tax Compliance (continued) Yes No 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 If at least one is reported on line 2a, did the organization file all required federal employment tax returns? X Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a X If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O b 3b At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, 4a a financial account in a foreign country (such as a bank account, securities account, or other financial account)? X 4a If "Yes," enter the name of the foreign country: b See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a X 5a Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? X 5h If "Yes" to line 5a or 5b, did the organization file Form 8886-T? C 5c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? X 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or 6b Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods 7a X If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was X 7c d Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? f 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? q 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? h 7h 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8 9 Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? 9a b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b Section 501(c)(7) organizations. Enter: 10 Initiation fees and capital contributions included on Part VIII, line 12 ........ a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . . . . . . . b 11 Section 501(c)(12) organizations. Enter: а b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b 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. 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 С 13c

Did the organization receive any payments for indoor tanning services during the tax year?

excess parachute payment(s) during the year

If "Yes," complete Form 4720, Schedule O.

If "Yes," see instructions and file Form 4720, Schedule N.

If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

16

14a

b 15

X

Χ

X

14a

Section A. Governing Body and Management

P

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 in Schedule O. See instructions.
	Check if Schedule O contains a response or note to any line in this Bort VI

					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	15			
	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 in Schedule O.					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	15			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with				TO MAKE THE PROPERTY	January Cale
	any other officer, director, trustee, or key employee?		:	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct					
	supervision of officers, directors, or trustees, or key employees to a management company or other person?		;	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed	1?		4		X
5	Did the experiencian because guerra during the course of the first			5		X
6	Did the organization have members or stockholders?			6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint					
	one or more members of the governing body?		7	a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,					
	stockholders, or persons other than the governing body?		7	ь	1	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during					
	the year by the following:					
а	The governing body?		8	а	Х	
b	Each committee with authority to act on behalf of the governing body?				X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at		•	-	21	
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9			X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue C	ode)				
	, in the second of the second	-		T	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10	)a	103	X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			-		
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	* 181 W O 1	. 10	h	-	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing	the form?	. 11	-	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	, and form.				
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		. 12	a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise				X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"		.	-	21	
	describe in Schedule O how this was done		12		х	
13	Did the organization have a written whistleblower policy?				X	
14	Did the organization have a written document retention and destruction policy?				X	
15	Did the process for determining compensation of the following persons include a review and approval by				21	115015
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official		. 15	2		X
b	Other officers or key employees of the organization		. 15			X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		. 13			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement					
	with a taxable entity during the year?		. 16	2	NOTE: 12	X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its		. 10	a	10.42	
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the					
	organization's exempt status with respect to such arrangements?		. 16	h h		
Sect	tion C. Disclosure	• • • • • • •	. 10	<u> </u>		
17	List the states with which a copy of this Form 990 is required to be filed ▶ North Carolina					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Se	ction 501(c)				
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.	0.1011 001 (0)				
	Own website Another's website Upon request Other (explain in Schedule O)					
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of intere	et policy and				
	financial statements available to the public during the tax year.	st policy, and				
20	State the name, address, and telephone number of the person who possesses the organization's books and record	lai E				
20		15.				
EEA	STEPHEN ANGEL (828)837-2775, ONE FOLK SCHOOL ROAD, BRASSTOWN, NC 28902					

Form 990 (2018)	Form	990	(2018)	
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JOHN C CAMPBELL FOLK SCHOOL, INC

56-0552780

age 7

Form 990 (2018)

# 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 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 and/or Box 7 of Form 1099-MISC) 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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any relate	d organization	on com	pens	sated	an	y curre	nt of	ficer, director, or tr	ustee.	
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	box	cer an	Po neck n ess pe nd a di	rson i recto	than one is both ar r/trustee)	n )	(D)  Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) HOWARD MALOVANY PRESIDENT	4.00	Х		х				a	0	0
(2) ABLE ALLEN	1.00									
VICE PRESIDENT (3) BARRY KEMPSON	1.00	X	-	X	_		-	0	0	0
SECRETARY		X		Х				o	0	0
(4) JESSE AUSTIN TREASURER	4.00	х		Х				0	0	0
(5) DONICK CARY	1.00								0	
DIRECTOR  (6) MARTHA COURSEY  DIRECTOR	1.00	X						0	0	00
(7) CARL DREHER DIRECTOR	1.00	Х						o	0	0
(8) PAT FOX DIRECTOR	1.00	Х						0	0	0
(9) LAURA LEDFORD DIRECTOR	1.00	Х						o	0	0
(10)CELIA LARSON DIRECTOR	1.00	Х						o	0	0
(11) FORREST OLIPHANT DIRECTOR	1.00	х						o	0	0
(12)JANE_OLIVER DIRECTOR	1.00	Х								
(13)DINA NORRIS DIRECTOR	1.00	X		$\dagger$	$\dagger$	$\top$		0	0	0
(14)JACK SMOOT DIRECTOR	1.00	X						0	0	0
DIMECTOR		Δ						o	0	0

Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII (B) (D) Total revenue Related or Unrelated Revenue exempt function revenue excluded from tax under sections 512-514 business Federated campaigns . . . . . . . 1a Contributions, Gifts, Grants and Other Similar Amounts Membership dues . . . . . . . . . . . b 1b C 1c Related organizations . . . . . . . . d 1d Government grants (contributions) . . 1e 91,000 All other contributions, gifts, grants, and similar amounts not included above 557,960 Noncash contributions included in lines 1a-1f: \$ Total. Add lines 1a-1f . . . . . . . . . . . . . . . . 648,960 **Business Code** Program Service Revenue 2a TUITION HOUSING MEALS 900099 4,980,390 4,980,390 b f All other program service revenue . . . . . . 4,980,390 Investment income (including dividends, interest, and other similar amounts)  $\dots \dots \dots$ 351,451 351,451 Income from investment of tax-exempt bond proceeds (i) Real (ii) Personal 6a Gross rents . . . . . . . . 1,700 b Less: rental expenses . . . . c Rental income or (loss) . . . 1,700 d Net rental income or (loss) . 1,700 1,700 7a Gross amount from sales of (i) Securities (ii) Other assets other than inventory 29,315 b Less: cost or other basis and sales expenses . . . . 22,082 c Gain or (loss) . . . . . . . 7,233 7,233 7,233 Other Revenue 8a Gross income from fundraising events (not including of contributions reported on line 1c). See Part IV, line 18 . . . . . . . . . . a 157,310 b Less: direct expenses . . . . . . . . b 31,497 c Net income or (loss) from fundraising events . 125,813 125,813 9a Gross income from gaming activities. See Part IV, line 19 . . . . . . . . . . . . a b Less: direct expenses . . . . . . . . b c Net income or (loss) from gaming activities . . 10a Gross sales of inventory, less returns and allowances . . . . . . . . . a 787,833  ${f b}$  Less: cost of goods sold . . . . . . . .  ${f b}$ 424,275 c Net income or (loss) from sales of inventory . . 363,558 363,558 Miscellaneous Revenue **Business Code** 11a SALE OF DONATED ITEMS 900099 5,908 5,908 b MISCELLANEOUS 900099 58,590 58,590 e Total. Add lines 11a-11d . . . . . . . . . . . . . . . . . . . 64,498 6,543,603 5,044,888 849,755

## 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). Check if Schedule O contains a response or note to any line in this Part IX Do not include amounts reported on lines 6b, 7b, (B) (C) (D) Total expenses Program service Management and Fundraising 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations 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 Benefits paid to or for members . . . . . . . . . . . . . . . Compensation of current officers, directors, trustees, and key employees ........ 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 1,899,133 1,168,105 649,668 81,360 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) . . 118,175 118,175 9 389,383 389,383 10 154,922 76,496 70,061 8,365 11 Fees for services (non-employees): a Legal....... b C 15,600 15,600 Professional fundraising services. See Part IV, line 17 . e f Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) . . 236,078 157,351 78,727 12 386,290 341,156 45,134 13 314,369 153,073 129,034 32,262 14 15 16 219,493 164,620 54,873 17 286,169 260,234 25,935 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 21 22 Depreciation, depletion, and amortization . . . . . . 311,234 311,234 23 Insurance .............. 80,130 80,130 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) INSTRUCTOR PAY 558,990 558,990 b SUPPLIES 642,090 542,352 99,738 C SPECIAL PROJECTS AND EVENTS 137,566 113,996 22,151 1,419 d е All other expenses 27,294 13,176 14,118 25 Total functional expenses. Add lines 1 through 24e 5,776,916 3,860,783 1,747,593 168,540 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 following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part X			
			(A)	T	(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing	178,367	1	404,764
	2	Savings and temporary cash investments	1,563,958	2	2,145,841
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	12,510	4	19,802
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and			
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
		organizations (see instructions). Complete Part II of Schedule L		6	
S	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use	351,739	8	360,998
Ä	9	Prepaid expenses and deferred charges	42,173	9	38,320
	10a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 10a 9,263,181			
	b	Less: accumulated depreciation 10b 4,248,355	5,162,683	10c	5,014,826
	11	Investments - publicly traded securities	10,066,597	11	9,482,599
	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	43,245	15	43,245
	16	Total assets. Add lines 1 through 15 (must equal line 34)	17,421,272	16	17,510,395
1	17	Accounts payable and accrued expenses	358,151	17	367,312
	18	Grants payable		18	
	19	Deferred revenue	872,215	19	1,060,701
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
es	22	Loans and other payables to current and former officers, directors,			
Liabilities		trustees, key employees, highest compensated employees, and			
la l		disqualified persons. Complete Part II of Schedule L	The second secon	22	
	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		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	1,230,366	26	1,428,013
		Organizations that follow SFAS 117 (ASC 958), check here ▶ 🗓 and			
es		complete lines 27 through 29, and lines 33 and 34.			
anc	27	Unrestricted net assets	15,702,446	27	15,425,571
Rai	28	Temporarily restricted net assets	399,175	28	574,562
		Permanently restricted net assets	89,285	29	82,249
vet Assets of Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and			
5		complete lines 30 through 34.			
NE		Capital stock or trust principal, or current funds		30	
2		Paid-in or capital surplus, or land, building, or equipment fund		31	
		Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	16,190,906	33	16,082,382
	34	Total liabilities and net assets/fund balances	17,421,272	34	17,510,395

	rm 990 (2018) JOHN C CAMPBELL FOLK SCHOOL, INC	56-05527	780	F	Page 1:				
Pa	art XI Reconciliation of Net Assets								
	Check if Schedule O contains a response or note to any line in this Part XI				🗆				
1	Total revenue (must equal Part VIII, column (A), line 12)	. 1		543,					
2		. 2		776,					
3	Revenue less expenses. Subtract line 2 from line 1	. 3		766,					
4									
5	g (10000) on invocations	. 5		190, 875,	211)				
6		. 6							
7	Investment expenses	. 7							
8									
9	Other changes in net assets or fund balances (explain in Schedule O)	. 9			0				
10	the state of the s								
Tara Control State	33, column (B))	. 10	16,	082,	382				
Pa	art XII Financial Statements and Reporting				-				
	Check if Schedule O contains a response or note to any line in this Part XII				. 🗆				
				Yes	No				
1	Accidal Diller								
	If the organization changed its method of accounting from a prior year or checked "Other," explain in								
	Schedule O.				14				
<b>2</b> a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a		X				
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or		931						
	reviewed on a separate basis, consolidated basis, or both:			6					
	Separate basis Consolidated basis Both consolidated and separate basis		-						
b	Were the organization's financial statements audited by an independent accountant?		. 2b	X					
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				30				
	separate 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 audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	X					
	If the organization changed either its oversight process or selection process during the tax year, explain in				1				
	Schedule O.				4				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in		and control to the	500/18/10/10/10/10/10/10	HOLEVEL SHOP SHOW				
	the Single Audit Act and OMB Circular A-133?		. 3a		Х				
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the								
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b						
EEA			Form	990 (2	2018)				

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

**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 **2018** 

Open to Public Inspection

Internal Revenue Service

Name of the organization

Department of the Treasury

JOHN C CAMPBELL FOLK SCHOOL INC

Employer identification number

		CAMPBELL FOLK SCHOOL,					56-0552					
	art I		ty Status (All o	organizations must	complete	e this pa	rt.) See instruction	ons.				
Th	e orga	anization is not a private foundation be										
1	Ш	A church, convention of churches,					•					
2	X	A school described in section 170	b)(1)(A)(ii). (Attach	n Schedule E (Form 990	or 990-EZ	Z).)						
3		A hospital or a cooperative hospital	service organization	on described in section	170(b)(1)	(A)(iii).						
4		A medical research organization op	erated in conjuncti	on with a hospital descr	ibed in sec	ction 170(	b)(1)(A)(iii). Enter th	е				
		hospital's name, city, and state:										
5		An organization operated for the ber	nefit of a college or	university owned or ope	rated by a	governme	ntal unit described in					
		section 170(b)(1)(A)(iv). (Complete		,	1.5	-						
6		A federal, state, or local governmen	t or governmental	unit described in sectio	n 170(b)(1	I)(A)(v).						
7		An organization that normally receive					om the general public	<b>:</b>				
		described in section 170(b)(1)(A)(vi). (Complete Part II.)										
8		A community trust described in sec										
9		An agricultural research organization			erated in c	conjunction	with a land-grant co	illege				
		or university or a non-land-grant coll						noge .				
		university:	-9	, occurrency, Enter t	no namo, c	ony, and ou	ate of the conlege of					
10		An organization that normally receive	es: (1) more than 3	3 1/3% of its support fro	m contribu	tions mem	hershin fees and are	199				
		receipts from activities related to its						, , , , , , , , , , , , , , , , , , , ,				
		support from gross investment incom										
		acquired by the organization after Ju					nom businesses					
11	П	An organization organized and oper										
12		An organization organized and opera						606				
		of one or more publicly supported or										
		Check the box in lines 12a through 1										
	а	Type I. A supporting organization										
		the supported organization(s) the						iiviiig				
		supporting organization. You m			inty of the	directors o	i dastees of the					
	b	Type II. A supporting organization			ith ite eun	norted ara	anization(c) by bayin	24				
	-	control or management of the su										
		organization(s). You must com			i sons mai	COTILIOT OF	manage the supporte	eu .				
	С	Type III functionally integrated			nnootion w	with and fo	ımatiamallı, inta avata d					
		its supported organization(s) (se						with,				
	d	Type III non-functionally integ						4:/->				
	-	that is not functionally integrated.										
		requirement (see instructions). Y					ni and an altenuvenes	55				
	е	Check this box if the organization					Tune II Tune III					
	•	functionally integrated, or Type II				sa Type I,	Type II, Type III					
	f	Enter the number of supported organ		negrated supporting org	anization.							
		Provide the following information abo		ranization(a)				• • • • •				
	9 (1)	Name of supported organization			6.01.00	Total Control of the						
	(1)	Marile of Supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10		organization ur governing	(v) Amount of monetary support (see	(vi) Amount of other support (see				
				above (see instructions))	docum		instructions)	instructions)				
					Vac	NI-						
				-	Yes	No						
(A)												
(B)												
(C)	)											
(D)												
(E)												
Tota												

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.)

Se	ction A. Public Support			,		10 7 10 11 11 11 11		
Cale	endar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total	
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						()	
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities fumished by a governmental unit to the organization without charge							
4	Total. Add lines 1 through 3							
5	The portion of total contributions by							
	each person (other than a							
	governmental unit or publicly							
	supported organization) included on							
	line 1 that exceeds 2% of the amount							
	shown on line 11, column (f)							
6	Public support. Subtract line 5 from line 4							
Sec	tion B. Total Support			a   1	THE REPORT OF THE PROPERTY OF			
Cale	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total	
7	Amounts from line 4					1	(1)	
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. (s	ee instructions)				12		
13	First five years. If the Form 990 is for the organization, check this box and stop here			rth, or fifth tax yea	r as a section 501	(c)(3)	▶□	
	tion C. Computation of Public Su							
14	Public support percentage for 2018 (line 6, c						%	
15	Public support percentage from 2017 Sched						%	
16a	33 1/3% support test - 2018. If the organiz						_	
L	box and stop here. The organization qualifi						▶ ∐	
b	33 1/3% support test - 2017. If the organiz							
· -	this box and <b>stop here.</b> The organization qu						▶ ⊔	
17a								
b	organization	. If the organization	on did not check a nd-circumstances"	box on line 13, 16a test, check this bo	a, 16b, or 17a, and x and <b>stop here.</b>	lline	▶ □	
	Explain in Part VI how the organization meet				5 (8)	(B)		
8	supported organization	ant shook a harr-	n line 12 46- 46	47 47		• • • • • • • •	▶ ⊔	
3	instructions				K this box and see	•	ъП	

JOHN C CAMPBELL FOLK SCHOOL, INC Schedule A (Form 990 or 990-EZ) 2018 56-0552780 Page 3 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose . Gross receipts from activities that are not an unrelated trade or business under section 513 . Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . . . . . . The value of services or facilities furnished by a governmental unit to the organization without charge . . . . . Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year  $\cdot$  . c Add lines 7a and 7b . . . . . . . . . . . . . . . Public support. (Subtract line 7c from Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total Amounts from line 6 . . . . . . . . . . . . . . . 10a Gross income from interest, dividends,

	royalties, and income from similar sources					
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975					
С	Add lines 10a and 10b					
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on					
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)					
13	Total support. (Add lines 9, 10c, 11, and 12.)					
14	First five years If the Form 900 is for the or	rannization's first	accord third fount	h au 60h tarrira	 1(0)	

	and 12.)			
14	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c organization, check this box and stop here	)(3)		П
Se	ction C. Computation of Public Support Percentage			
15	Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f))	15		%
16	Public support percentage from 2017 Schedule A, Part III, line 15	16		%
Se	ction D. Computation of Investment Income Percentage			
17	Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f))	17		%
18	Investment income percentage from 2017 Schedule A, Part III, line 17			%
19a	33 1/3% support tests - 2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	and line		
	33 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	anizatio	n	
20	Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instruction	s	▶ [	٦

#### Part IV Supporting Organizations

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

## Section A. All Supporting Organizations

- 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.
- 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 (b) and (c) 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 12a or 12b in Part I, answer (b) and (c) 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 (b) and (c) below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **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?
- 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 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI**.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in Part VI*.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
  - **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.)

	Yes
1	
2	
3a	
3b	
3с	
4a	
4b	
4c	
5a	
5b	
5с	
6	
7	
8	
9a	
9b	
9с	
0a	

10 m	art iv Supporting Organizations (continued)			
4	4. Headha ann air-tion ann an t-1 191 ann an t-1 191 ann an t-1 191 ann ann an t-1 191 ann an t-1 191 ann an t-1	3.78626.00	Yes	No
T	1 Has the organization accepted a gift or contribution from any of the following persons?			
	a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?			
	b A family member of a person described in (a) above?	11a		
		11b	ļ	
Se	c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	Ston Dr. Type Toupporting Organizations		Vaa	NI.
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		Yes	No
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	4		
	organizations and what conditions of restrictions, if any, applied to such powers during the tax year.	_ 1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
_	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part</b>			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Se	ction C. Type II Supporting Organizations			
	state of the state		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		163	IVO
	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).	1		
Se	ction D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	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	and redesigned to	
2				
	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	Manual Control	
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	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	HARD STANGE CO. 1	
Sec	ction E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see in	structi	ions).	
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	E S S S S S S S S S S S S S S S S S S S			
С	= " Journal of the first of the	see ins	structi	ons).
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	y and 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.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in 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.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	b and the state of			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		
FFA				

1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All others Type III non-functionally integrated suggestions are a grant or an area.	trust or	n Nov. 20, 1970 (expla	ain in Part VI). See
instructions. All other Type III non-functionally integrated supporting organ Section A - Adjusted Net Income	izations	(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		(0)4.07.2.7
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c	***	
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI):	9.3		
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		<del></del>
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,	+		
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functionally	and the second second	ed Type III supporting	organization (see
instructions).	mograt	ca Type III supporting	organization (See

Pa	rt V Type III Non-Functionally Integrated 509(a)(	3) Supporting Organi	zations (continued)	32700 rage
Se	ction D - Distributions			Current Year
_1	Amounts paid to supported organizations to accomplish exe			
2	Amounts paid to perform activity that directly furthers exempt	ot purposes of supported		
	organizations, in excess of income from activity			
_3	Administrative expenses paid to accomplish exempt purpos	es of supported organizat	ions	
_4	Amounts paid to acquire exempt-use assets			
_5	Qualified set-aside amounts (prior IRS approval required)			
_6	Other distributions (describe in Part VI). See instructions.			
_7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	ne organization is respons	sive	
	(provide details in Part VI). See instructions.			
_9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount	· · · · · · · · · · · · · · · · · · ·		
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
_1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018			
	(reasonable cause required - explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2018			
	From 2013			
	From 2014			
	From 2015			
	From 2016			
	From 2017			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2018 distributable amount			
i	Carryover from 2013 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from			
	Section D, line 7: \$			
	Applied to underdistributions of prior years			
	Applied to 2018 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, if			
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in <b>Part VI</b> . See instructions.			
6	Remaining underdistributions for 2018. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
	Excess distributions carryover to 2019. Add lines 3j	100		
	and 4c.			
	Breakdown of line 7:			
	Excess from 2014			
	Excess from 2015			
	Excess from 2016			
d	Excess from 2017			

#### **SCHEDULE D** (Form 990)

# **Supplemental Financial Statements**

► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

2018

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

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

Inspection

Τ0	THE COMPANY THE POLICE OF THE	Employer identification framper						
	HN C CAMPBELL FOLK SCHOOL, INC	56-0552780						
Pa	Organizations Maintaining Donor Advised Funds or Other Similar Funds or Acco	unts.						
	Complete if the organization answered "Yes" on Form 990, Part IV, line 6.							
	(a) Donor advised funds	(b) Funds and other accounts						
1	Total number at end of year							
2	Aggregate value of contributions to (during year) .							
3	Aggregate value of grants from (during year)							
4	Aggregate value at end of year							
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised							
	funds are the organization's property, subject to the organization's exclusive legal control?							
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used							
	only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose							
	conferring impermissible private benefit?							
Pa	Irt II Conservation Easements.							
	Complete if the organization answered "Yes" on Form 990, Part IV, line 7.							
1	Purpose(s) of conservation easements held by the organization (check all that apply).							
	Preservation of land for public use (e.g., recreation or education)	lly important land area						
	☐ Protection of natural habitat ☐ Preservation of a certified							
	Preservation of open space							
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a co	onservation						
	easement on the last day of the tax year.	Held at the End of the Tax Year						
а	Total number of conservation easements							
b	Total acreage restricted by conservation easements							
С	Number of conservation easements on a certified historic structure included in (a)							
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a	. 20						
_	historic structure listed in the National Register	. 2d						
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the orga							
	tax year ►							
4	Number of states where property subject to conservation easement is located							
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of							
•		□ v <sub>**</sub> □ v <sub>*</sub>						
6	violations, and enforcement of the conservation easements it holds?							
•	tail and volumeer flours devoted to monitoring, inspecting, handling of violations, and emorcing conservation	n easements during the year						
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation ea	as we will all of an Alexander						
,	S     S	sements during the year						
8		(D) (D)						
0	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(							
9	and section 170(h)(4)(B)(ii)?							
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense states							
	balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that	t describes the						
Dar	organization's accounting for conservation easements.  rt III Organizations Maintaining Collections of Art, Historical Treasures, or Ot	han Oimilan Amada						
rai		ner Similar Assets.						
	Complete if the organization answered "Yes" on Form 990, Part IV, line 8.							
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement a							
	works of art, historical treasures, or other similar assets held for public exhibition, education, or research in fu							
	public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these iter							
	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and be							
	works of art, historical treasures, or other similar assets held for public exhibition, education, or research in fu	urtherance of						
	public service, provide the following amounts relating to these items:							
	(i) Revenue included on Form 990, Part VIII, line 1							
	(ii) Assets included in Form 990, Part X	▶ \$						
	If the organization received or held works of art, historical treasures, or other similar assets for financial gain,	provide the						
	following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:							
а	Revenue included on Form 990, Part VIII, line 1	▶ \$						
	Assets included in Form 990, Part X							

100/04/12/10	edule D (Form 990) 2018 JOHN C CAMPBEI							56-05	52780		Page 2
P	Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)										
3	and the responsibility and strict records, check any of the following that are a significant use of its										
	collection items (check all that apply):										
а	Public exhibition		d 🗌 Lo	an or exc	hange prog	rams					
k	Scholarly research										
C	Preservation for future generations								************		
4	We have a sign of the sign of										
	XIII.			· · · · · · · · · · · · · · · · · · ·		9424	, and the	sarpood iii i ait			
5	During the year, did the organization solicit or re	eceive	donations of a	art histori	cal treasure	s or other sim	nilar				
	assets to be sold to raise funds rather than to be	e mair	ntained as par	t of the o	rganization's	collection?	iliai		П	Yes	П No
Pá	art IV Escrow and Custodial Arran	aeme	ents.		gariizatione	o delicotion i	<u> </u>		··· Ц	163	NO
	Complete if the organization a			n Form	990. Par	t IV line 9	or rer	oorted an amo	unt on F	orm	
	990, Part X, line 21.					111,00,	, 0, 10,	sortou un umo	unit on i	OIIII	
1a		or othe	r intermediary	for contri	ibutions or c	ther assets n	nt				
										Yes	□No
b		d com	plete the follow	ving table	· · · · · ·				••• Ш	162	
								Δ	mount		
С	Beginning balance						10		TIOUTE		
d	Additions during the year										
е	Distributions during the year										
f	Ending balance										
2a	Did the organization include an amount on Form								П	Yes	□No
b	If "Yes," explain the arrangement in Part XIII. C							· · · · · · · · · · · · · · · · · · ·			7
Pa	rt V Endowment Funds.						2311		• • • •	• • •	
	Complete if the organization ar	swer	ed "Yes" o	n Form	990. Par	t IV. line 10	).				
			Current year		Prior year	(c) Two years		(d) Three years back	(a) Fo	ur years	book
1a	Beginning of year balance		•	(.,,		(c) me your	Buok	(a) Timee years back	(e) 10	ui yeais	Dack
b	Contributions										
С	Net investment earnings, gains, and		3								-
	losses										
d	Grants or scholarships										
е	Other expenditures for facilities and								_		
	programs										
f	Administrative expenses										
g	End of year balance								_		
2	Provide the estimated percentage of the current	vear er	nd balance (lir	ne 1a. col	umn (a)) hel	lq ae.					
а	Board designated or quasi-endowment		%		(-)/ 110						
b	Permanent endowment ▶ %										
С	Temporarily restricted endowment		%								
	The percentages on lines 2a, 2b, and 2c should e	equal 1									
3a	Are there endowment funds not in the possession			that are	held and ad	ministered for	the				
	organization by:									Yes	No
	(i) unrelated organizations								. 3a(i)	103	140
	ATTA CONTRACTOR OF THE STATE OF								. 3a(ii)		
b	If "Yes" on line 3a(ii), are the related organization	ns listed	d as required	on Sched	lule R?				. 3b		
4	Describe in Part XIII the intended uses of the org	anizati	ion's endowm	ent funds	i.				. 00		
Par	t VI Land, Buildings, and Equipme										
	Complete if the organization and		ed "Yes" on	Form	990. Part	IV. line 11a	a See	Form 990 Pa	art X line	≏ 1∩	
	Description of property		(a) Cost or othe		(b) Cost or			ccumulated	(d) Boo		
-		1	(investmen		3 6	ther)		preciation	(d) D00	k value	
1a	Land				1	87,359				187,3	350
b	Buildings					81,599	2	,663,734		17,8	
	Leasehold improvements				0,0	,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	4,	, , , ,	,05
120	Equipment				1.7	68,010	1	,248,196		519,8	214
е	Other					26,213		336,425		289,7	
Total.	. Add lines 1a through 1e. (Column (d) must equ	al Forn	n 990. Part X	column	(B), line 100					14,8	
EEA	, , , , , ,		,	,	,_,,	.,	• • • •		hedule D (F		

Schedule D (For	m 990) 2018 JOHN C CAMPBEL	L FOLK SCHOOL, INC	56-0552	780 Page
Part VII	Investments - Other Securities.			
	Complete if the organization answere	ed "Yes" on Form 990, Pa	art IV, line 11b. See Form 990, F	Part X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market va	
(1) Financia	I derivatives			
(2) Closely-	held equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				-
(G)				
(H)				
Part VIII	b) must equal Form 990, Part X, col. (B) line 12.)			
rail VIII	Investments - Program Related.	d "Voo" on Form 000 D-	H IV 15- 44- 0- 5- 5- 600 5	
	Complete if the organization answere	u res on Form 990, Pa	IT IV, line 11c. See Form 990, P	art X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation:	
(1)			Cost or end-of-year market vali	ue
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b	) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets.			
	Complete if the organization answered	d "Yes" on Form 990, Par	rt IV, line 11d. See Form 990, P	art X, line 15.
	(a) De	escription	İ	(b) Book value
(1) CONST	RUCTION IN PROGRESS			35,02
	M COLLECTION EXHIBITS			8,17
	TY DEPOSITS			5
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	n /h) must savel Farm 000 Fart V and (D) ii a 45			
Part X	n (b) must equal Form 990, Part X, col. (B) line 15. Other Liabilities.	<u>)</u>		43,24
I dit X	Complete if the organization answered	"Ves" on Form 000 Bor	t IV/ line 11e er 11f Cae Form	000 D-4V
	line 25.	163 OH FOHH 990, Pai	tiv, line the of thi. See Forms	990, Part X,
	(a) Description of liability	(h) Paakvalua		
(1) Federal in		(b) Book value		
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
otal. (Column (b)	must equal Form 990, Part X, col. (B) line 25.)			
	uncertain tax positions. In Part XIII, provide the text	of the footnote to the argarinet	ion's financial statements that was a "	

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

Schools

Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

OMB No. 1545-0047

2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

▶ Attach to Form 990 or Form 990-EZ. ▶ Go to www.irs.gov/Form990 for the latest information.

JOHN C CAMPBELL FOLK SCHOOL, INC

Employer identification number 56-0552780

Part I YES NO 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? X 1 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, X 2 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during 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? If "Yes," please 3 X Does the organization maintain the following? Records indicating the racial composition of the student body, faculty, and administrative staff? 4a X Records documenting that scholarships and other financial assistance are awarded on a racially X 4b Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? X Copies of all material used by the organization or on its behalf to solicit contributions? X 4d If you answered "No" to any of the above, please explain. If you need more space, use Part II. Does the organization discriminate by race in any way with respect to: Students' rights or privileges? \* X X 5c X X 5e X X X 5q X If you answered "Yes" to any of the above, please explain. If you need more space, use Part II. Does the organization receive any financial aid or assistance from a governmental agency? X Has the organization's right to such aid ever been revoked or suspended? X If you answered "Yes" on either line 6a or line 6b, explain on Part II. 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," explain on Part II

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

# Supplemental Information Regarding Fundraising or Gaming Activities

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.

► Attach to Form 990 or Form 990-EZ.

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

2018

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection

OMB No. 1545-0047

JOHN C CAMPBELL FOLK SCHOOL	, INC			****	56-0	552780
Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17.  Form 990-EZ filers are not required to complete this part.						
1 Indicate whether the organization rais				vities. Check all that a	pply.	
a 🔲 Mail solicitations			Solicitation	of non-government gr		
b Internet and email solicitations		f 🔲		of government grants		
c Phone solicitations		g 📙	Special fun	draising events		
<ul><li>d In-person solicitations</li><li>2a Did the organization have a written or</li></ul>	oral agraement	with any indi	idual (in alua	line officers discretes	lance la care	
or key employees listed in Form 990,						Yes No
b If "Yes," list the 10 highest paid individe	luals or entities (	fundraisers)	pursuant to a	agreements under which	ch the fundraiser is to	
compensated at least \$5,000 by the o	rganization.					
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	custody o	draiser have r control of outions?	(iv) Gross receipts from activity.	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No		(1)	
1						
2						
3					,	
4						
5						
6						
7						
8						
9						
10						
Total						
3 List all states in which the organization i registration or licensing.	s registered or lic	ensed to sol	icit contribut	ions or has been notifi	ed it is exempt from	<u> </u>

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-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events FALL FESTIVA CRAFT AUCTIO (add col. (a) through NONE col. (c)) (event type) (event type) (total number) Revenue Gross receipts . 106,313 50,997 157,310 Less: Contributions Gross income (line 1 minus 106,313 50,997 157,310 Cash prizes Noncash prizes Rent/facility costs . . . . . . . . Direct Expenses Food and beverages . . . . . . 7 8 Entertainment . . . Other direct expenses 27,459 4,038 31,497 Direct expense summary. Add lines 4 through 9 in column (d) 31,497 11 Net income summary. Subtract line 10 from line 3, column (d) 125,813 Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. Revenue (b) Pull tabs/instant (d) Total gaming (add (a) Bingo (c) Other gaming bingo/progressive bingo col. (a) through col. (c)) Gross revenue . . . . . . . 1 Cash prizes Direct Expenses Noncash prizes Rent/facility costs Other direct expenses Yes Yes Yes 6 Volunteer labor No Direct expense summary. Add lines 2 through 5 in column (d) Enter the state(s) in which the organization conducts gaming activities: b If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? b If "Yes," explain:

#### SCHEDULE O (Form 990 or 990-EZ)

## Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ. ► Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

**Open to Public** 

Department of the Treasury Internal Revenue Service Name of the organization

Inspection Employer identification number

JOHN C CAMPBELL FOLK SCHOOL, INC	56-0552780						
01. Form 990 governing body review (Part VI, line 11)							
A COPY OF FORM 990 IS PROVIDED TO THE TREASURER, AS WELL AS THE BUSINESS M.	A COPY OF FORM 990 IS PROVIDED TO THE TREASURER, AS WELL AS THE BUSINESS MANAGER AND ALL						
BOARD MEMBERS, PRIOR TO FILING.							
02. Conflict of interest policy compliance (Part VI, line 12c)							
OFFICERS ARE REQUIRED ANNUALLY TO REPORT ANY POSSIBLE CONFLICTS OF INTEREST	Γ. OFFICERS ARE						
REQUIRED ANNUALLY TO REPORT ANY POSSIBLE CONFLICTS OF INTEREST.							
03. Governing documents, etc, available to public (Part VI, line 19)							
NO DOCUMENTS AVAILABLE TO THE PUBLIC.							
04. Explanation of other changes in net assets or fund balances (Part XI, 1	ine 9)						
UNREALIZED LOSSES ON INVESTMENTS							