## Form **990-EZ**

# Short Form Return of Organization Exempt From Income Tax

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

2023

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

Do not enter social security numbers on this form, as it may be made public.

Go to www.irs.gov/Form990EZ for instructions and the latest information.

Open to Public Inspection

_		z = 2023 calendar year, or tax year beginning $z = z = 2023$ , and ending $z = z = 2023$ , and ending $z = 2023$	<u> 30</u>	, 2024	
В	Check if applicat	D Empl		dentification number	
Ļ	_	ess change	. 1	005005	
늗	=	Number and street (or B.O. hav if mail is not delivered to street address)  Deem/suite E. Televiere	43-1095885		
F	Final				
F	term	nated 9050 OLIVE BLVD.		924-5731	
늗	_	OT TYPERED NO. 62122		mption	
		ation pending OLIVETTE, MO 63132 Num			
		nting Method: X Cash Accrual Other (specify) H Chec		if the organization is	
	Websi			ed to attach Schedule B	
			n 990	).	
		of organization: X Corporation Trust Association Other			
		es 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II,	_	70 560	
		n (B)) are \$500,000 or more, file Form 990 instead of Form 990-EZ  Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions f	\$	78,568.	
Р	art I	<b>-</b>			
_	Τ.	Check if the organization used Schedule O to respond to any question in this Part I			
	1	Contributions, gifts, grants, and similar amounts received	1	55,603.	
	2	Program service revenue including government fees and contracts	2	22,773.	
	3	Membership dues and assessments	3		
	4	Investment income	4		
	5a	Gross amount from sale of assets other than inventory 5a			
	b	Less: cost or other basis and sales expenses			
	C	Gain or (loss) from sale of assets other than inventory (subtract line 5b from line 5a)	5c		
	6	Gaming and fundraising events:			
ē	a	Gross income from gaming (attach Schedule G if greater than			
Revenue		\$15,000)			
ş	b	Gross income from fundraising events (not including \$ of contributions			
_		from fundraising events reported on line 1) (attach Schedule G if the sum of such			
		gross income and contributions exceeds \$15,000)			
	C	Less: direct expenses from gaming and fundraising events			
	d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d		
	7a	Gross sales of inventory, less returns and allowances 7a 192.			
	b	Less: cost of goods sold SEE SCHEDULE O 7b		400	
	C	Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a)	7c	192.	
	8	Other revenue (describe in Schedule 0)	8		
_	9	<b>Total revenue</b> . Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	78,568.	
	10	Grants and similar amounts paid (list in Schedule 0)	10		
	11	Benefits paid to or for members	11	18 252	
es	12	Salaries, other compensation, and employee benefits	12	17,358.	
Expenses	13	Professional fees and other payments to independent contractors	13	28,186.	
ğ	14	Occupancy, rent, utilities, and maintenance	14	6,578.	
ш	15	Printing, publications, postage, and shipping	15	262.	
	16	Other expenses (describe in Schedule 0) SEE SCHEDULE O	16	15,613.	
_	17	Total expenses. Add lines 10 through 16	17	67,997.	
S	18	Excess or (deficit) for the year (subtract line 17 from line 9)	18	10,571.	
set	19	Net assets or fund balances at beginning of year (from line 27, column (A))		4.4 - 4.4	
Net Assets		(must agree with end-of-year figure reported on prior year's return)	19	12,530.	
Net	20	Other changes in net assets or fund balances (explain in Schedule 0)	20	0.	
_	21	Net assets or fund halances at end of year. Combine lines 18 through 20	21	23.101.	

Form 990-EZ (2023)

Pa	art II	Balance Sheets (see the instructions for Part II	l)					
		Check if the organization used Schedule O to re	espond to any questi	on in this Part II				
				(A) Beginning of year		(B) l	End of year	
22	Cash,	, savings, and investments	Γ	12,530.	22		23,1	01.
23		and buildings			23			
24		assets (describe in Schedule 0)			24			
25		assets		12,530	25		23,1	01.
26		liabilities (describe in Schedule 0)		0.				0.
27		ssets or fund balances (line 27 of column (B) must agree with line 2		12,530			23,1	01.
$\overline{}$	art III	Statement of Program Service Accomplishm	ents (see the instru	ctions for Part III)	1	Е	xpenses	
		Check if the organization used Schedule O to re	espond to any questi	on in this Part III	X	(Required	d for section	
Wha	at is the	organization's primary exempt purpose? SEE SCHEDULE					and 501(c)( ions; optiona	
		rganization's program service accomplishments for each of its three largest progra		ses. In a clear and concise		others.)	ions, optiona	.1 101
		ibe the services provided, the number of persons benefited, and other relevant info		ses. III a cieai aliu colicise		,		
28	SEE	SCHEDULE O						
20								
	(Grants	) If this amount includes forcis	an granta shook hara		$\overline{}$	28a	61,3	95
29	Grants	s \$ ) If this amount includes foreig	grigiants, check here			204	01,5	<del></del>
29								
	<del></del>	A			$\overline{}$	00.		
	(Grants	s \$ ) If this amount includes foreig	gn grants, cneck nere			29a		
30								
	<del></del>				$\overline{}$			
	(Grants	,	gn grants, check here			30a		
31	-					l l		
	(Grants	,	gn grants, check here			31a	<u> </u>	<del></del>
	Total   art IV	program service expenses (add lines 28a through 31a)	Employees			32	61,3	95.
Pa	art IV	1			ee the i	nstructions fo	or Part IV)	
		Check if the organization used Schedule O to re	<u> </u>					Ш
			(b) Average hours	(C) Reportable compensation (Forms		alth benefits, ibutions to	( ) _ = =	
		(a) Name and title	per week devoted to position	W-2/1099-MÌSC/ 1099-NEC)		oyee benefit and deferred	amount of compensa	
_			position	(if not paid, enter -0-)		pensation	Compense	
		NA RUSS						
		ING DIRECTOR	30.00	9,692.		0.		0.
		TH TUCKER						
	ESII		10.00	0.		0.		0.
		A ZWEIER						
SE	CRE	ΓARY	10.00	0.		0.		0.
SU	SAN	HONEYWELL						
DI	RECT	TOR	5.00	0.		0.		0.
JO	HN I	KADDOURI						
DI	RECT	ror	5.00	0.		0.		0.
TR	ACY	HUTTER						
	RECT		5.00	0.		0.		0.
		PALMER		-				
		TOR (RESIGNED 3/19/2024)	5.00	0.		0.		0.
==		1011 (1122101122 0 / 13 / 1021 /	3,00				+	
			_					
							+	
							+	
							<del>                                     </del>	
							1	

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the

	instructions for Part V.) Check if the organization used Sch. O to respond to any question in this	-ait	V	LX	
00			Yes	No	
33					
34	activity in Schedule 0  Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended	33		X	
7	documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O. See instructions	34		х	
35 a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported	04			
	on lines 2, 6a, and 7a, among others)?	35a		х	
b	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b	N/	_	
	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax				
	requirements during the year? If "Yes," complete Schedule C, Part III	35c		Х	
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes,"				
	complete applicable parts of Schedule N	36		X	
	Enter amount of political expenditures, direct or indirect, as described in the instructions				
b	Did the organization file Form 1120-POL for this year?	37b		X	
38 a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; or were any such loans made				
	in a prior year and still outstanding at the end of the tax year covered by this return?	38a		X	
	If "Yes," complete Schedule L, Part II, and enter the total amount involved	-			
39	Section 501(c)(7) organizations. Enter:				
	Initiation fees and capital contributions included on line 9 39a N/A	-			
	Gross receipts, included on line 9, for public use of club facilities N/A	4			
4U a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911  0 • ; section 4955  0 •				
	section 4911				
U	transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any				
	of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		х	
c	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on	400			
·	organization managers or disqualified persons during the year under sections 4912, 4955, and 4958				
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed				
	by the organization				
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter				
	transaction? If "Yes," complete Form 8886-T	40e		Х	
41	List the states with which a copy of this return is filed <b>NONE</b>				
42 a	The organization's books are in care of $\frac{\text{THE ORGANIZATION}}{\text{Telephone no.}}$ Telephone no. $\frac{314-92}{\text{Telephone no.}}$				
	Located at: 9656 OLIVE BLVD., OLIVETTE, MO ZIP+4	313	2		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority				
	over a financial account in a foreign country (such as a bank account, securities account, or other financial		Yes		
	account)?	42b		X	
	If "Yes," enter the name of the foreign country				
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	40		v	
C	At any time during the calendar year, did the organization maintain an office outside the United States?	42c		X	
49	If "Yes," enter the name of the foreign country  Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here				
43	and enter the amount of tax-exempt interest received or accrued during the tax year 43	N/A		ш	
	40	14/11			
			Yes	No	
44 a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of				
	Form 990-EZ	44a		х	
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead				
_	of Form 990-EZ	44b		х	
C	Did the organization receive any payments for indoor tanning services during the year?	44c		Х	
	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation				
	in Schedule O	44d			
45 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		Х	
	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section				
	512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ. See instructions	45b			

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D٩	no A
гαι	16 4

									Yes	No
	organization engage, directly or indirectly, in po complete Schedule C, Part I	olitical campaign activities				•		46		Х
Part VI	Section 501(c)(3) Organizations	s Only						70		
	All section 501(c)(3) organizations must		19b and 52, an	d complete	e the tables for li	nes 50 a	nd 51.			
	Check if the organization used Schedule	O to respond to any	question in thi	s Part VI						
					_				Yes	No
47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year?  If "Yes," complete Sch. C, Part II										v
								47 48		X
	organization make any transfers to an exempt r							49a		X
	was the related organization a section 527 organization.							49b		
•	e this table for the organization's five highest c							ch rec	eived r	nore
than \$10	0,000 of compensation from the organization.	If there is none, enter "N	one."							
	(a) Name and title of each employee		(b) Averag		(C) Reportable compensation (For		ealth benefits,		Estim	
	2702			per week devoted to position		emp plans,	oyee benefit and deferred		ount of mpens	
	NOI	NE	poort		1099-NEC)	cor	npensation	1 001	Пропо	
								+		
								L		
f Total nu	mber of other ampleyage paid eyer \$100,000									
	mber of other employees paid over \$100,000 e this table for the organization's five highest c	omnensated independen			ived more than \$10	– 10 000 of	comnensati	on fro	m the	
-	tion. If there is none, enter "None." <b>NO</b>		t contractors wi	io cacii icco	ived more than $\phi$ it	0,000 01	compensati	011 110	III tilo	
	Name and business address of each independe			(b	) Type of service		(c) C	ompe	nsatio	1
<b>d</b> Total nur	mber of other independent contractors each re	ceiving over \$100,000								
<b>52</b> Did the o	organization complete Schedule A? <b>Note:</b> All se	ection 501(c)(3) organiza	ntions must attac	ch a			-	_	_	_
	ed Schedule A							Ye		No
•	s of perjury, I declare that I have examined this						y knowledg	e and	belief,	it is
true, correct, a	nd complete. Declaration of preparer (other th	an officer) is based on ai	i information of	wnich prepa	rer nas any knowie	age.				
Sign	Signature of officer					Date				
Here	ARIANNA RUSS, ARTIS	TIC DIRECTO	)R							
	Type or print name and title									
	Print/Type preparer's name	Preparer's signature		Date	Check	if	PTIN			
Paid	TERESA M. HUTTER,				self- em	ployed				
Preparer	CPA						P017			
Use Only	Firm's name HUTTER CPA,				Firm's		8-259			
,	Firm's address 1931 BELLEV				Phone	<sub>no.</sub> 31	4-474	-79	998	
	SAINT LOUIS						T	77.,		٦
viay the IRS d	iscuss this return with the preparer shown abo	ve? See instructions						Ye		<u>No</u>
							F	orin <b>9</b>	an-F7	(2023)

#### SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

#### **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

Name of the organization

MID AMERICA DANCE COMPANY

**Employer identification number** 

OMB No. 1545-0047

43-1095885 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 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). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 X An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes above (see instructions))

Schedule A (Form 990) 2023 MID AMERICA DANCE COMPANY 43-1095885 Page 2

Part II 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.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</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						
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.						
Sec	ction B. Total Support		T		T	_	Г
	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	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.)						
	<b>Total support.</b> Add lines 7 through 10		,				
	Gross receipts from related activities,	•				12	
13	First 5 years. If the Form 990 is for the			•	•	* * * *	
Sec	organization, check this box and stop ction C. Computation of Publi						<u>-</u>
	-			column (fl)		14	
	Public support percentage for 2023 (I Public support percentage from 2022					15	<u>%</u> %
	33 1/3% support test - 2023. If the o			n line 13, and line			
100	<b>stop here.</b> The organization qualifies	-				iore, cricek triis bo.	
h	33 1/3% support test - 2022. If the o		-				
~	and <b>stop here.</b> The organization qual					or more, eneek ar	
17a	10% -facts-and-circumstances test	•					
	and if the organization meets the fact						
	meets the facts-and-circumstances te		•	-	•		
b	10% -facts-and-circumstances test	-	-	*	-	17a, and line 15 is	10% or
	more, and if the organization meets the	-					
	organization meets the facts-and-circu				-		
<u> 18</u>	<b>Private foundation.</b> If the organization		-				<u> </u>
							(Farm 000) 0002

#### 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.)

Sec	ction A. Public Support	elow, please comp	iete Part II.)				_
	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	62,707.	20,276.	79,532.	35,047.	55,603.	253,165.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	85,428.	18,430.	2,695.	19,112.		148,630.
3	Gross receipts from activities that are not an unrelated trade or business 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						
	Total. Add lines 1 through 5	148,135.	38,706.	82,227.	54,159.	78,568.	401,795.
	Amounts included on lines 1, 2, and 3 received from disqualified persons					1,655.	1,655.
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					1,655.	1,655.
8	Public support. (Subtract line 7c from line 6.)						400,140.
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	148,135.	38,706.	82,227.	54,159.	78,568.	401,795.
t	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	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.)	148,135.	38,706.	82,227.	54,159.	78,568.	401,795.
14	First 5 years. If the Form 990 is for the	ne organization's fir	st, second, third, f	ourth, or fifth tax y	ear as a section 50	01(c)(3) organizatio	on,
0-	check this box and stop here	- 0 D					
	ction C. Computation of Publi			. (2)		1	99.59 %
	Public support percentage for 2023 (li	, (,,	, ,			15	1 2 2 2 2
	Public support percentage from 2022 ction D. Computation of Inves					16	100.00 %
	Investment income percentage for 20			ne 13 column (fl)		17	.00 %
	Investment income percentage from 2		•			18	%
	33 1/3% support tests - 2023. If the						
	more than 33 1/3%, check this box ar						X
k	33 1/3% support tests - 2022. If the						
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organizatio	n did not check a b	oox on line 14, 19a	, or 19b, check thi	s box and see inst	tructions	

#### 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.)

		Yes	No
	1		
	2		
	За		
	3b		
	3c		
	4a		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
	7		
	8		
	9a		
	9b		
	9c		
	10a		
	401		
ule	10b A (Forn	n 990)	2023

Par	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		
Sect	ction 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 or	fficers,		
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supporting organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among			
	supported organizations and what conditions or 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			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sect	ction C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sect	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		
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			
800	supported organizations played in this regard. Stion E. Type III Functionally Integrated Supporting Organizations	3		
Seci				
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see ins	tructions).		
а				
b				
C	5 The gradual of the state of the stat	tity (see instructior	l ' l	NI.
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а				
	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	2a		
b	that these activities constituted substantially all of its activities.  Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,	24		
IJ	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 lines 3a and 3b below.	20		
u	trustees of each of the supported organizations? If "Yes" or "No" provide details in <b>Part VI.</b>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	32		
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		

Pa	t V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Organ	izations	g
1	Check here if the organization satisfied the Integral Part Test as a qualify	ing trust on I	Nov. 20, 1970 ( explain in	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu			
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		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	<b>Discount</b> 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-function	ally integrate	ed Type III supporting orga	nization (see

Schedule A (Form 990) 2023

instructions).

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)							
	on D - Distributions	1 / / · · · · · · · · · · · · · · · · ·	Contine	100)	Current Year		
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1	04		
2	Amounts paid to perform activity that directly furthers exemp	<u> </u>					
	organizations, in excess of income from activity			2			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations		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 (describe in Part VI). 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) Underdistributior Pre-2023	าร	(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						
а	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)						
<u>j</u>	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.						
4	Distributions for 2023 from Section D,						
	line 7: \$						
	Applied to underdistributions of prior years						
	Applied to 2023 distributable amount						
	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						
<u>ن</u>	Excess from 2021						

Schedule A (Form 990) 2023

e Excess from 2023

332028 12-21-23 Schedule A (Form 990) 2023

#### SCHEDULE O (Form 990)

Department of the Treasury

### Supplemental Information to Form 990 or 990-EZ

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

**Open to Public** Go to www.irs.gov/Form990 for the latest information. Inspection

Internal Revenue Service Name of the organization

43-1095885 MID AMERICA DANCE COMPANY FORM 990-EZ, PART I, LINE 7, GROSS PROFIT FROM SALES OF INVENTORY: INCOME: GROSS RECEIPTS 192. 2. RETURNS AND ALLOWANCES 0. 192. 3. LINE 1 LESS LINE 2 4. COST OF GOODS SOLD (LINE 13) 0. 5. GROSS PROFIT (LINE 3 LESS LINE 4) 192. FORM 990-EZ, PART I, LINE 16, OTHER EXPENSES: DESCRIPTION OF OTHER EXPENSES: AMOUNT: **INSURANCE** 2,329. OFFICE SUPPLIES & SOFTWARE 2,463. COSTUMES, PROPS, & EQUIPMENT 1,348. RESIDENCY 7,662. 1,528. STORAGE BANK FEES 42. 241. MEALS TOTAL TO FORM 990-EZ, LINE 16 15,613. FORM 990-EZ, PART III, PRIMARY EXEMPT PURPOSE - TO ENTERTAIN AND EDUCATE THROUGH INNOVATIVE DANCE EXPERIENCES.

FORM 990-EZ, PART III, LINE 28, PROGRAM SERVICE ACCOMPLISHMENTS:

THE MODERN AMERICAN DANCE COMPANY PRODUCED THE FOLLOWING

PROGRAMS DURING THE FISCAL YEAR:

JANUARY 19 & 20, 2024. THE MODERN AMERICAN DANCE COMPANY (MADCO) IS

OMB No. 1545-0047

**Employer identification number** 

Name of the organization **Employer identification number** 43-1095885 MID AMERICA DANCE COMPANY EXCITED TO PRESENT THE RETURN OF "DARE TO DANCE," A FESTIVAL SHOWCASING INNOVATIVE WORKS BY TALENTED CHOREOGRAPHERS FROM ACROSS THE COUNTRY. EACH EVENING WILL FEATURE A FRESH PROGRAM, WITH HIGHLY CURATED CHOREOGRAPHERS PERFORMING ALONGSIDE MADCO, PRESENTING THEIR MOST IMPACTFUL PIECES. THE FESTIVAL ALSO INCLUDES MASTER CLASSES AND NETWORKING OPPORTUNITIES, FOSTERING CONNECTIONS BETWEEN VISITING ARTISTS AND THE ST. LOUIS COMMUNITY. ORIGINALLY SCHEDULED FOR LINDENWOOD UNIVERSITY'S SCHEIDEGGER CENTER, THE EVENT WAS RELOCATED TO COCA'S CATHERINE BERGES THEATER DUE TO WEATHER CLOSURES. MARCH 22 - MAY 3, 2024. "DANCE MOVEMENT PROGRAM FOR PEOPLE WITH MULTIPLE SCLEROSIS." HARNESSING BOTH THE JOY AND THE POWER OF DANCE AND MOVEMENT, AS WELL AS THE ENERGY OF MUSIC AND CONNECTION, OUR 6-WEEK SPRING SERIES OFFERED A UNIQUE AND INSPIRING DANCE EXPERIENCE! IN PERSON AND ON ZOOM! APRIL 19 & 20, AND 26 & 27, 2024, 8PM "BOUND" IS AN INNOVATIVE COLLABORATION BETWEEN MADCO AND THE LUMINARY, FEATURING CHOREOGRAPHY BY CJ BURROUGHS AND MADCO ARTISTIC DIRECTOR ARIANNA RUSS. THE CONCERT BLENDS DANCE, SOUND, AND ART IN AN INTIMATE SETTING, WHERE THE AUDIENCE EXPERIENCES THE PHYSICAL POWER OF DANCE UP CLOSE. THE OPENING PIECE, "BETWEEN BLOSSOMS" BY BURROUGHS BRINGS AN AFFECTIONATE ENERGY THAT HIGHLIGHTS MADCO'S ATHLETICISM, WHILE RUSS'S WORK, "FROM THE ASH," REASSERTS THE VISCERAL CONNECTION BETWEEN BODIES AND SPACE. "BOUND" IMMERSES AUDIENCES IN A DYNAMIC ENERGY, SPARKING A RENEWED CONNECTION TO THE TRANSFORMATIVE IMPACT OF DANCE. JUNE 4-14, 2024, "UNIVERSITY OF IOWA DEPARTMENT OF DANCE SUMMER INTENSIVE - LED BY MADCO." DANCERS IN THE UI DEPARTMENT OF DANCE KICKED OFF THEIR SUMMER WITH AN EXCITING WORKSHOP LED BY MADCO'S ARTISTIC DIRECTOR, ARIANNA RUSS, AN ALUMNA OF IOWA'S BA (2013) AND MFA (2018)

Schedule O (Form 990) 2023 Page **2** 

Name of the organization  MID AMERICA DANCE COMPANY	Employer identification number 43-1095885
DANCE PROGRAMS. OFFERED TUITION-FREE, THE TWO-WEEK PROGRAM	INCLUDED
DAILY TECHNIQUE CLASSES AND REHEARSALS OF MADCO REPERTOIRE	, FEATURING
EXCERPTS FROM FORWARD ACTION BY RUSS, POWERBALL BY EMILY S	HOEN BRANCH,
AND SHE'S MY SPIDERWEB BY ANNIE MITCHELL. THE EXPERIENCE C	ULMINATED IN
A JOINT PERFORMANCE AT SPACE PLACE THEATRE, WHERE UI DANCERS SHARED THE	
STAGE WITH MADCO FOR THEIR SPRING CONCERT, BOUND.	
FORM 990-EZ, PART V, INFORMATION REGARDING PERSONAL BENEFI	T CONTRACTS:
THE ORGANIZATION DID NOT, DURING THE YEAR, RECEIVE ANY FUN	DS, DIRECTLY,
OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT.	
THE ORGANIZATION, DID NOT, DURING THE YEAR, PAY ANY PREMIUMS, DIRECTLY,	
OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT.	