INSPECTION COPY

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.

and ending

OMB No. 1545-0047 **Open to Public** Inspection

Department of the Treasury Internal Revenue Service

A For the 2020 calendar year, or tax year beginning

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

В	Check if applicable	C Name of organization		D Employer identifi	cation number					
	Addre	SAVE THE MUSIC FOUNDATION								
-	Name	THIS CAME MILE MICTO FORMOAD	ON	13-60898	16					
-	chang	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone numbe						
\vdash	return _Final	1515 RPOADWAY 219T FLOOP	HUUIII/Suite	212-846-						
	⊥return, termin ated			G Gross receipts \$	3,762,171.					
	Amen				H(a) Is this a group return					
F	return Applic tion			for subordinates						
	pendir	SAME AS C ABOVE		H(b) Are all subordinates in						
1	Tax-ex	empt status: X 501(c)(3) 501(c) ()	or 527	1	list. See instructions					
		e: WWW.SAVETHEMUSIC.ORG		H(c) Group exemptio						
		organization; X Corporation Trust Association Other	L Year		A State of legal domicile: NY					
P	art I	Summary								
	1	Briefly describe the organization's mission or most significant activities: SAVE	THE M	USIC FOUNDA'	TION HAS					
& Governance	1	PROVIDED MORE THAN \$58 MILLION WORTH OF N	EW MUS	SICAL INSTRU	MENTS TO					
rua	2	Check this box if the organization discontinued its operations or dispos	sed of more	than 25% of its net ass	sets.					
ove	3			3	19					
Ü	4	Number of independent voting members of the governing body (Part VI, line 1b)			19					
es	5	Total number of individuals employed in calendar year 2020 (Part V, line 2a)			13					
Ž	6	Total number of volunteers (estimate if necessary)		6	54					
Activities	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			0.					
_	b	Net unrelated business taxable income from Form 990-T, Part I, line 11			0.					
e				Prior Year	Current Year					
	8	Contributions and grants (Part VIII, line 1h)		485,887.	3,748,468.					
Revenue	9	Program service revenue (Part VIII, line 2g)		0.	0.					
Re	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		0. 31.	0.					
	111	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			8,874.					
_	_	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		485,918.	3,757,342.					
	1	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		33,416.	1,562,716.					
	45	Benefits paid to or for members (Part IX, column (A), line 4)		265,657.	963,827.					
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Professional fundraising fees (Part IX, column (A), line 11e)		205,057.	903,827.					
Sen	h	Total fundraising expenses (Part IX, column (D), line 25) 609, 42	21.	U.	0.					
X	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	The second of the second of	136,107.	521,509.					
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		435,180.	3,048,052.					
		Revenue less expenses. Subtract line 18 from line 12		50,738.	709,290.					
50		Total de le de de la constantina de la contracta de la contrac		ginning of Current Year	End of Year					
ets	20	Total assets (Part X, line 16)		1,362,523.	1,902,699.					
ASS	21	Total liabilities (Part X, line 26)		326,055.	156,941.					
Net Assets or	22	Net assets or fund balances. Subtract line 21 from line 20		1,036,468.	1,745,758.					
P	art II	Signature Block								
Unc	ler pena	lties of perjury, I declare that I have examined this return, including accompanying schedules	s and stateme	nts, and to the best of my	knowledge and belief, it is					
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of wh	nich preparer	has any knowledge.						
				5	28/2021					
Sig	n	Signature of officer		Date	•					
Hei	е	HENRY DONAHUE, EXEC DIR/VP			· · · · · · · · · · · · · · · · · · ·					
		Type or print name and title	Tr	ata Ia . F	T DTIN					
		Print/Type preparer's name Preparer's signature		Oate Check Check	PTIN					
Paid			SKNIA ()	5/25/21 self-employ						
	parer	Firm's name MARKS PANETH LLP	11-3518842							
USE	Only	Firm's address 685 THIRD AVENUE		21	2 E02 0000					
D.4	. 41 15	NEW YORK, NY 10017		Phone no. 21	2-503-8800					
Ma	v tne li	RS discuss this return with the preparer shown above? See instructions			X Yes No					
	01 12-2	3-20 LHA For Paperwork Reduction Act Notice, see the separate instruction	ma		Form 990 (2020)					

Form **8868**

(Rev. January 2020)

Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

File a separate application for each return,

► Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Name of exempt organization or other filer, see instructions. Taxpayer identification number (TIN) Type or print SAVE THE MUSIC FOUNDATION 13-6089816 File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date for filina vour 1515 BROADWAY, 21ST FLOOR instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions. NEW YORK, NY 10036 Enter the Return Code for the return that this application is for (file a separate application for each return) Return Application Application Return Code Is For Code Is For Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07 Form 990-BL 02 Form 1041-A 80 Form 4720 (individual) 03 Form 4720 (other than individual) 09 Form 990-PF 10 04 Form 5227 Form 990-T (sec. 401(a) or 408(a) trust) Form 6069 11 Form 990-T (trust other than above) Form 8870 06 12 LYNN ALBALA The books are in the care of ► 1515 BROADWAY - NEW YORK, NY 10036 Telephone No. ► 212-846-7599 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box \blacktriangleright . If it is for part of the group, check this box \blacktriangleright and attach a list with the names and TINs of all members the extension is for. I request an automatic 6-month extension of time until NOVEMBER 15, 2021, to file the exempt organization return for the organization named above. The extension is for the organization's return for: ► X calendar year 2020 or tax year beginning , and ending Final return If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Change in accounting period If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less 0. any nonrefundable credits. See instructions. If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2020)

MAIL TO: DEPARTMENT OF THE TREASURY
INTERNAL REVENUE SERVICE CENTER
OGDEN, UT 84201-0045

	rt III Statement of Program Service Accomplishments	age z
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission:	21
•	SAVE THE MUSIC FOUNDATION HELPS KIDS, SCHOOLS, AND COMMUNITIES REACH	
	THEIR FULL POTENTIAL THROUGH THE POWER OF MAKING MUSIC. THE FOUNDATION	
	WAS CREATED TO ADDRESS THE INEQUITY IN AVAILABILITY OF MUSIC EDUCATION	
	FOR STUDENTS IN MANY OF THE UNITED STATES' MOST CHALLENGED	
	Did the organization undertake any significant program services during the year which were not listed on the	
2	, F 000 000 F70	Na
	prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O.	_ INO
2	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	ן _{Nio}
3	<u> </u>	_ INO
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured 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	
4-	revenue, if any, for each program service reported. (Code:) (Expenses \$ 2,296,664 • _ including grants of \$ 1,562,716 • _) (Revenue \$)	,
4a	(Code:) (Expenses \$	— '
	ORGANIZATION DEDICATED TO CREATING SYSTEMIC CHANGE IN THE AMERICAN	
	PUBLIC SCHOOL SYSTEM BY RESTORING INSTRUMENTAL MUSIC PROGRAMS AND BY	
		<u>~</u>
	FOUNDATION WAS CREATED TO ADDRESS THE INEQUITY IN AVAILABILITY OF MUSIC	<u> </u>
	EDUCATION FOR STUDENTS IN MANY OF THE UNITED STATES' MOST CHALLENGED	
	COMMUNITIES. SINCE ITS CREATION, SAVE THE MUSIC FOUNDATION, WORKING	
	WITH LOCAL SCHOOL DISTRICTS, HAS RESTORED MUSIC EDUCATION PROGRAMS IN	
	MORE THAN 2,163 PUBLIC SCHOOLS IN 276 SCHOOL DISTRICTS AROUND THE	
	COUNTRY, IMPROVING THE LIVES OF MORE THAN 2 MILLION CHILDREN ACROSS THI	<u>E</u>
	UNITED STATES. DURING THAT TIME, THE FOUNDATION HAS PROVIDED \$58	
	MILLION WORTH OF NEW INSTRUMENTS TO SCHOOL DISTRICTS ACROSS THE	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$	}
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$	>
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ► 2,296,664.	

Form 990 (2020) SAVE THE MUSIC FOUNDATION
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	_
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			,,
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			,,
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		\ _V
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			X
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		x
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			x
_	Schedule D, Part III	8		
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			x
40	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	40		x
44	or in quasi endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X	10		122
11				
_	as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
а	• • •	11a	х	
h	Part VI Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	Ha	- 21	
D	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	1110		
٠	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
Ч	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	110		
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	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		Х
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		Х
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			l
	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	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			l
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			l
	complete Schedule G, Part III	19		X
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		_	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	l

Form 990 (2020) SAVE THE MUSIC FOUNDATION

Part IV Checklist of Required Schedules (continued)

	· · · · · · · · · · · · · · · · · · ·		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
2 4a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			37
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	04-		
اہ	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	<u> 24</u> u		
ZJa	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	200		
-	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If	00		Х
20	"Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	28c 29	Х	Λ
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	_29		
30		30		х
31	contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete</i>	<u> </u>		
-	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			37
	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	07		Х
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI. Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	37		
38	·	38	х	
Pa	Note: All Form 990 filers are required to complete Schedule O rt V Statements Regarding Other IRS Filings and Tax Compliance	- 00		
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
С				
	(gambling) winnings to prize winners?	1c	X 200	(0000)

Form 990 (2020)

SAVE THE MUSIC FOUNDATION

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

				Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return	13			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	[2b	X	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority ov	er, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a		X
b	If "Yes," enter the name of the foreign country				
	See instructions for filling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FE	3AR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	.	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization	ion solicit			
	any contributions that were not tax deductible as charitable contributions?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	;			
	were not tax deductible?	.	6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provide	ed to the payor?	7a	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	X	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required				
	to file Form 8282?		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year				
е			7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	······	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	Г	7g 		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a F	orm 1098-C?	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.	- 1	0-		
a	Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9a		
b 10	, , , , , , , , , , , , , , , , , , , ,	·····	9b		
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 10a				
a	Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b				
ь 11	Section 501(c)(12) organizations. Enter:				
''	Out of the second form and the second				
h	Gross income from members or snareholders Gross income from other sources (Do not net amounts due or paid to other sources against				
	amounts due or received from them.)				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	İ			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	$\overline{}$			
	Is the organization licensed to issue qualified health plans in more than one state?	1	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	I			
С	Enter the amount of reserves on hand				
	Did the organization receive any payments for indoor tanning services during the tax year?		14a		Х
	If IIV and the Michael English of the American A		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or				
	excess parachute payment(s) during the year?		15		Х
	If "Yes," see instructions and file Form 4720, Schedule N.				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?		16		Х
	If "Yes," complete Form 4720, Schedule O.				

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

	Check if Schedule O contains a response or note to any line in this Part VI			X								
Sec	tion A. Governing Body and Management											
			Yes	No								
1a	Enter the number of voting members of the governing body at the end of the tax year											
	If there are material differences in voting rights among members of the governing body, or if the governing											
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.											
b	Enter the number of voting members included on line 1a, above, who are independent											
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 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, trustees, or key employees to a management company or other person?	3		х								
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X								
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X								
6	5 8111											
7a	Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	6		Х								
<i>1</i> a	more members of the governing body?	7a		х								
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	7.4										
	persons other than the governing body?	7b		x								
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	7.0										
а	The governing body?	8a	х									
b	Each committee with authority to act on behalf of the governing body?	8b	X									
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	- 0.0										
Ū	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		x								
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)											
	(This dection b requests information about policies not required by the internal nevenue dode.)		Yes	No								
10a	Did the organization have local chapters, branches, or affiliates?	10a		X								
	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?	10b										
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х									
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.											
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х									
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х									
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe											
	in Schedule O how this was done	12c	Х									
13	Did the organization have a written whistleblower policy?	13	Х									
14	Did the organization have a written document retention and destruction policy?	14	Х									
15	Did the process for determining compensation of the following persons include a review and approval by independent											
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?											
а	The organization's CEO, Executive Director, or top management official	15a	Х									
b	Other officers or key employees of the organization	15b	Х									
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).											
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?	16a		Х								
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its 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?	16b										
Sec	tion C. Disclosure											
17	List the states with which a copy of this Form 990 is required to be filed ▶AK, AR, AZ, CA, CT, DC, FL, GA, HI	IL,	KS,	ΚY								
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s	on l y)	availa	ble								
	for public inspection. Indicate how you made these available. Check all that apply.											
	X Own website Another's website X Upon request Other (explain on Schedule O)											
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	cial									
	statements available to the public during the tax year.											
20	State the name, address, and telephone number of the person who possesses the organization's books and records											
	LYNN ALBALA - 212-846-7599											
	1515 BROADWAY, NEW YORK, NY 10036											

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

X

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.

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

X Check this box if neither the organization ne	or any related	orga	niza	tion	con	npen	sate	ed any current officer, di	rector, or trustee.	
(A)	(B)	(C)						(D)	(E)	(F)
Name and title	Average	(do	Position (do not check more than one				nne	Reportable	Reportab l e	Estimated
	hours per	box, unless person is both an		an	compensation	compensation	amount of			
	week		officer and a d		recto	r/trus	tee)	from	from related	other
	(list any	irecto						the	organizations	compensation
	hours for related	e or d	tee			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	organizations	Individual trustee or director	Institutional trustee		99/	Highest compensated employee		(***-27 1033-141100)		and related
	below	dualt	utions	<u>.</u>	mplo	sst co oyee	ь			organizations
	line)	Indivi	Instit	Officer	Key employee	Highe	Former			
(1) DANIELLE ZALAZNICK	50.00									
SENIOR DIRECTOR, GROWTH & PARTNERSHI					Х			178,637.	0.	36,244.
(2) CHIHO FEINDLER	50.00									
SENIOR DIRECTOR, PROGRAMS & POLICY						Х		101,836.	0.	12,715.
(3) ARIEL USATIN	50.00									
SENIOR DIRECTOR, PHILANTHROPY						Х		103,180.	0.	1,159.
(4) ALLEN MURABAYASHI	0.50							_	_	
DIRECTOR		Х						0.	0.	0.
(5) AMY DOYLE	4.00									_
CO-CHAIR (OUTGOING)		Х		Х				0.	0.	0.
(6) AMY WIGLER	0.50									
DIRECTOR (OUTGOING)		Х						0.	0.	0.
(7) BRIANNA CAYO COTTER	1.00									
DIRECTOR		Х						0.	0.	0.
(8) CHRIS MCCARTHY	3.00							_	_	_
CHAIR		Х		Х				0.	0.	0.
(9) ELENA DIAZ	0.50									_
DIRECTOR		Х						0.	0.	0.
(10) ELIZABETH WINDRAM	0.50									•
DIRECTOR	1 00	Х						0.	0.	0.
(11) GILLIAN RYAN	1.00								0	
DIRECTOR (OUTGOING)	0 50	Х						0.	0.	0.
(12) GORDON SINGER	0.50	.							0	0
DIRECTOR CONNECTION	60 00	Х						0.	0.	0.
(13) HENRY DONAHUE	60.00	х						0.	0.	0.
EXECUTIVE DIRECTOR; ASST SECRETARY (14) JENNIFER GRADY	2.00	Δ		Х				0.	0.	<u> </u>
DIRECTOR; CORPORATE TREASURER	2.00	Х		х				0.	0.	0.
(15) KATHERINE VON JAN	1.00	Λ		_				0.	0.	<u> </u>
DIRECTOR	<u> </u>	Х						0.	0.	0.
(16) KEVIN NG	0.50							•	<u> </u>	•
DIRECTOR	3.55	х						0.	0.	0.
(17) LAURIE SCHELL	2.00							·	•	•
DIRECTOR; CORPORATE SECRETARY		х		x				0.	0.	0.
	<u> </u>									

Form **990** (2020)

(15) LIBBLITE FRAM O. 50 DIFFERENCE (17) LIBBLITE FRAM O. 50 DIFFERENCE (18) LIBBLITE FRAM O. 50 O. 0. 0. 0. O. 0.	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
Name and site Average house hou				,			J						(F)	
Nour Per Per Nour Per Per Nour	• •				Pos	ition			1 ' '			F:		hd.
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Pour for related organization Pour for related organization Pour for the organi		week	offi	cer ar	nd a di	irecto	r/trus	tee)		•			other	
Case		, ,	octor						the	organizations	s	com	pensa	tion
Case			r dire				ted			(W-2/1099-M i S	SC)	fı	om the	е
Case			stee c	ruste		l	ensa		(W-2/1099-MISC)			_		
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Case			lividu	it ati	icer	me /	thest ploye	rmer				org	anızatı	วทร
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X		1 50	┝						0.		<u> </u>			•
1.50 X		1.50	x						0.		0 -			0.
X		1.50	1					\vdash						
(21) MIREYA D'ANGELO DIRECTOR DIRECTOR DIRECTOR (OUTGOING) DIRECTOR DIRECTO			\mathbf{x}						0.		0.			0.
A	(21) MIREYA D'ANGELO	2.00									-			
A	DIRECTOR		\mathbf{x}						0.		0.			0.
DIRECTOR	(22) MORRIS L. REID	0.50												
DIRECTOR (24) NOAH KERNER (24) NOAH KERNER (25) SARUK KOPLIN DIRECTOR (OUTGOING) (25) SHAKIM COMERRE (26) SHAKIM COMERRE (26) SHAKIM COMERRE (27) AU	DIRECTOR (OUTGOING)		x						0.		0.			0.
24) NOAH KERNER	(23) NAT ZILKHA	1.50												
DIRECTOR (OUTGOING)	DIRECTOR		Х						0.		0.			0.
25) FAUL KOPLIN 0.50 X 0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0	(24) NOAH KERNER	0.50												
DIRECTOR (OUTGOING) X 0.0.0.0.0. (26) SHAKIM COMPERE 0.50 X 0.0.0.0.0.0. 1b Subtotal	DIRECTOR		X						0.		0.			0.
Compensation Substitute Subst	(25) PAUL KOPLIN	0.50							_					
Subtotal			X						0.		0.			<u> </u>
Total from continuation sheets to Part VII, Section A Total (add lines 1b and 1c) Total (add lines 1b and 1c) Total (add lines 1b and 1c) Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization Total (add lines 1b and 1c) Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) Name and business address NONE Description of services Total number of independent contractors (including but not limited to those listed above) who received more than		0.50												•
Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c) 2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 3 Bid the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? ff *Yes," complete Schedule J for such individual 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? ff *Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? ff *Yes," complete Schedule J for such person 5 X Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) (B) (C) Name and business address NONE Description of services Compensation	DIRECTOR (OUTGOING)		X					<u> </u>					0 1	
Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization Yes No												-		
Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization Tyes No Jean Specific Report Compensation from the organization of the calendar year ending with or within the organization. Report compensation for the calendar year ending with or within the organization of services Total number of independent contractors (including but not limited to those listed above) who received more than Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization of reportable compensation from the organization from the organization of individual for services rendered to the organization? If "Yes," complete Schedule J for such individual for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) Name and business address NONE Description of services Total number of independent contractors (including but not limited to those listed above) who received more than													0 1	
compensation from the organization Yes No								<u> </u>	•	000 of war and all			U, I.	10.
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual isted on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) Name and business address NONE Description of services Total number of independent contractors (including but not limited to those listed above) who received more than	· -	ot limited to th	ose	nste	a ac	ove	e) Wri	o re	eceived more than \$100,	ooo or reportable	,			3
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For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person 5 X Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) (B) (C) Compensation Compensation Total number of independent contractors (including but not limited to those listed above) who received more than	•			•	•	•		·		•		3		X
and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	•													
Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) Name and business address NONE (B) Compensation	•	•		•					•	· ·		4	х	
Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) (B) (C) Compensation NONE Description of services Compensation 2 Total number of independent contractors (including but not limited to those listed above) who received more than				-										
Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) (B) (C) Compensation NONE Description of services Compensation 2 Total number of independent contractors (including but not limited to those listed above) who received more than	rendered to the organization? If "Yes." com	plete Schedule	e J f	or su	ıch r	oers	on .					5		Х
the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) (B) (C) Compensation Compensation Compensation Total number of independent contractors (including but not limited to those listed above) who received more than														
(A) Name and business address NONE Description of services Compensation 2 Total number of independent contractors (including but not limited to those listed above) who received more than	1 Complete this table for your five highest cor	mpensated inc	lepe	nder	nt co	ontra	actor	rs th	nat received more than \$	100,000 of comp	ensa	tion fr	om	
Name and business address NONE Description of services Compensation Total number of independent contractors (including but not limited to those listed above) who received more than	the organization. Report compensation for t	the ca l endar ye	ear e	endir	ng w	ith c	or wi	thin	the organization's tax y	ear.				
2 Total number of independent contractors (including but not limited to those listed above) who received more than														
, · · · · · · · · · · · · · · · · · · ·	Name and business	address	N	INC	<u> </u>			_	Description of s	ervices	c	ompe	nsatio	<u> </u>
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	·	•	ot lir	nited	d to t	_	_	ted	above) who received mo	ore than				

Form 990 SAVE THE	MUSIC F	'OU	JND	ľA('I0	N			**_**	9816
D 1 1/11	t Compensated Employees (continued)									
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average			Pos	ition			Reportab l e	Reportable	Estimated
	hours	(cl	heck	all ·	that	арр	ly)	compensation	compensation	amount of
	per							from	from related	other
	week (list any	l b				Highest compensated employee		the organization	organizations (W-2/1099-M I SC)	compensation from the
	hours for	direct				demp		(W-2/1099-MISC)	(88-2/1099-8865)	organization
	related	ee or	stee			nsate		(** 2/ 1000 1/1100)		and related
	organizations	trust	nal tru		oyee	ompe				organizations
	below	Individual trustee or director	Institutional trustee	je j	Key employee	nest c	Former			
	line)	lndi	lust	Officer	Key	High	Forr			
(27) SWAY CALLOWAY	0.50									
DIRECTOR		Х						0.	0.	0.
(28) TOM CHAVEZ	0.50								_	
DIRECTOR		Х						0.	0.	0 .
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Total to Part VII, Section A, line 1c										

-*<u>9816</u>

			Check if Schedule O contains a response or note to a	ny lin	e in this Part VIII			
			Check if Cenedule & contains a response of note to a	11y 1111	(A)	(B)	(C)	(D)
					Total revenue	Related or exempt	Unrelated	Revenuè excluded
							business revenue	from tax under
								sections 512 - 514
ts st	1	а	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts		b	Membership dues					
o, ğ		С	Fundraising events 198,65	54.				
E ii			Related organizations 1d					
୍ର ଖ୍ର			Government grants (contributions) 1e 293,67	75.				
Sig			All other contributions, gifts, grants, and					
북 위		•		ا ہ				
들됨								
Ĕ		g	Noncash contributions included in lines 1a-1f 1g \$1,017,21					
<u>ठ</u> ह		h	Total. Add lines 1a-1f		3,748,468.			
			Business C	ode				
و ا	2	а						
. Ş.		b						
je gj		c						
E S								
Ba		d		-				
Program Service Revenue		е						
<u>~</u>			All other program service revenue					
\rightarrow		g	Total. Add lines 2a-2f	▶				
	3		Investment income (including dividends, interest, and					
			other similar amounts)					
	4		Income from investment of tax-exempt bond proceeds					
	5		Royalties		1,383.			1,383.
			(i) Real (ii) Person	nal	•			
	6	_						
	o			_				
			Less: rental expenses 6b	-				
			Rental income or (loss) 6c					
			Net rental income or (loss)	▶				
	7	а	Gross amount from sales of (i) Securities (ii) Other	er				
			assets other than inventory 7a					
		b	Less: cost or other basis					
e l			and sales expenses 7b					
Revenue		c	Gain or (loss) 7c					
ě			Net gain or (loss)					
<u>ا</u> ۾								
ther	8	а	Gross income from fundraising events (not					
ᅙ			including \$ 198,654. of					
			contributions reported on line 1c). See					
			Part IV, line 18 8a 12,32					
		b	Less: direct expenses 8b 4,82	29.				
			Net income or (loss) from fundraising events		7,491.			7,491.
			Gross income from gaming activities. See					
	-		Part IV, line 19					
		h	Less: direct expenses 9b					
			Net income or (loss) from gaming activities					
	10	а	Gross sales of inventory, less returns					
			and allowances 10a					
		b	Less: cost of goods sold 10b					
		С	Net income or (loss) from sales of inventory	▶				
			Business C	ode				
Siz]	11	а						
ĕ		b						
Miscellaneous Revenue								
See		ď	All other revenue					
Ξ			All other revenue					
			Total. Add lines 11a-11d		2 757 240	^	^	0 074
	12		Total revenue. See instructions		3,757,342.	0.	0.	8,874.

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 (B) Program service expenses (A) Total expenses (C) Management and general expenses **(D)** Fundraising expenses Do not include amounts reported on lines 6b. 7b, 8b, 9b, and 10b of Part VIII. Grants and other assistance to domestic organizations 1,562,716. 1,562,716. and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 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 214,881. 214,881. Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 597,656. 344,574. 11,216. 241,866. Other salaries and wages 7 Pension plan accruals and contributions (include 20,670. 12,655. 409 7,606. section 401(k) and 403(b) employer contributions) 69,397. 42,196. 366. 25,835. Other employee benefits 9 61,223. 26,587. 859. 33,777. Payroll taxes 10 Fees for services (nonemployees): a Management 30,976. 8,887. 2,370. 19,719. Legal 120,370. 120,370. Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 28,520. 12,500. 3,520. <u> 12,500.</u> column (A) amount, list line 11g expenses on Sch O.) 10,073.400. 9,673. Advertising and promotion 12 1,109. 3,820. 7,140. 2,211. Office expenses 13 44,929. 20,740. 24,189. Information technology 14 Royalties 15 16 Occupancy 928. 748. 180. 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 Payments to affiliates 21 21,666. 10,833. 10,833. Depreciation, depletion, and amortization 22 Insurance 23 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) DELIVERY AND ADVOCACY 252,185. 252,185. PRODUCTION COSTS 3,107. 3,107. c MISCELLANEOUS 1,615. 1,615. d All other expenses 3,048,052. 2,296,664. 141,967. 609,421. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

Form 990 (2020)
Part X Balance Sheet

Pai	τX	Balance Sneet					
		Check if Schedule O contains a response or r	ote to ar	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		568,336.	1	1,124,590.	
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net			674,531.	3	699,097.
	4	Accounts receivable, net			45,758.	4	44,670.
	5	Loans and other receivables from any current			·		
		trustee, key employee, creator or founder, sub					
		controlled entity or family member of any of the				5	
	6	Loans and other receivables from other disqu	•				
		under section 4958(f)(1)), and persons describ	-	·		6	
ø	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			19,822.	8	9,394.
As	9	B			26,993.	9	19,531.
	10a	Land, buildings, and equipment: cost or other			·		·
		basis. Complete Part VI of Schedule D		65,000.			
	b		10b		27,083.	10c	5,417.
	11	Investments - publicly traded securities	·	11			
	12	Investments - other securities. See Part IV, line		12			
	13	Investments - program-related. See Part IV, lin		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must ed			1,362,523.	16	1,902,699.
	17	Accounts payable and accrued expenses			110,595.	17	1,902,699. 156,941.
	18	Grants payable			18		
	19	Deferred revenue	27,418.	19			
	20	Tax-exempt bond liabilities		20			
	21	Escrow or custodial account liability. Complet				21	
s	22	Loans and other payables to any current or fo	rmer offic	cer, director,			
Liabilities		trustee, key employee, creator or founder, sub	ostantial (contributor, or 35%			
api		controlled entity or family member of any of the	nese pers	ons		22	
Ë	23	Secured mortgages and notes payable to unre	elated thi			23	
	24	Unsecured notes and loans payable to unrela	ted third	parties		24	
	25	Other liabilities (including federal income tax,					
		parties, and other liabilities not included on lin	es 17 - 24). Complete Part X			
		of Schedule D			188,042.	25	0.
	26	Total liabilities. Add lines 17 through 25			326,055.	26	156,941.
		Organizations that follow FASB ASC 958, c	heck her	e ▶ X			
Ses		and complete lines 27, 28, 32, and 33.					
auc	27	Net assets without donor restrictions			-8,555.	27	694,158. 1,051,600.
Ba	28	Net assets with donor restrictions			1,045,023.	28	1,051,600.
pu		Organizations that do not follow FASB ASC	958, ch	eck here 🕨 🗌			
£		and complete lines 29 through 33.					
S 01	29	Capital stock or trust principal, or current fund	ds			29	
set	30	Paid-in or capital surplus, or land, building, or	equipme	nt fund		30	
As	31	Retained earnings, endowment, accumulated	income,	or other funds		31	
Net Assets or Fund Balances	32	Total net assets or fund balances			1,036,468.	32	1,745,758.
	33	Total liabilities and net assets/fund balances			1,362,523.	33	1,902,699.

Form **990** (2020)

Form	990 (2020) SAVE THE MUSIC FOUNDATION	**_	***9816	Pa	age 12				
Pa	rt 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	3,75						
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,04	8,0)52. 290.				
3	Revenue less expenses. Subtract line 2 from line 1								
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,03	36,4	<u> 168.</u>				
5	Net unrealized gains (losses) on investments	5							
6	Donated services and use of facilities	6							
7	Investment expenses	7							
8	Prior period adjustments	8							
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,								
_	column (B))	10	1,74	15,7	<u> 758.</u>				
Pa	rt XII Financial Statements and Reporting								
	Check if Schedule O contains a response or note to any line in this Part XII				X				
1	Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule		_ [Yes	No				
22	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		x				
Za	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed				1				
	separate basis, consolidated basis, or both:	ona							
	Separate basis Consolidated basis Both consolidated and separate basis								
h	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 separate								
	consolidated basis, or both:	,							
	X 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?		20	X					
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche								
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin		:						
	Act and OMB Circular A-133?	•	3a		X				
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required								
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			1					
				n 990	(2020)				

032012 12-23-20

SCHEDULE A

(Form 990 or 990-EZ)

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.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization
SAVE THE MUSIC FOUNDATION

Employer identification number

-*9816

Pa	rt I	Reason for Public (Charity Status.	(All organizations must o	omp l ete th	nis part.) S	ee instructions.	
Γhe	organi	ization is not a private found						
1		A church, convention of chi	urches, or associatio	on of churches described	l in sectio	n 170(b)(1)(A)(i).	
2		A school described in secti	ion 170(b)(1)(A)(ii).(Attach Schedule E (Forn	n 990 or 99	90-EZ).)		
3		A hospital or a cooperative					i).	
4		A medical research organization	· -				•	the hospital's name,
		city, and state:						•
5		An organization operated for	or the benefit of a col	llege or university owned	or operat	ed by a go	vernmental unit describ	ed in
		section 170(b)(1)(A)(iv). (C	Complete Part II.)					
6		A federal, state, or local gov	vernment or governm	nental unit described in	section 17	'0(b)(1)(A)	(v).	
7	X	An organization that norma	-				• •	pub l ic described in
		section 170(b)(1)(A)(vi). (C	•		J		3	•
8		A community trust describe	•	(1)(A)(vi). (Complete Par	t II.)			
9		An agricultural research org				ed in conju	nction with a land-grant	college
		or university or a non-land-g				•	•	
		university:		,				
10		An organization that norma	lly receives (1) more	than 33 1/3% of its supp	ort from c	ontribution	ns, membership fees, an	d gross receipts from
		activities related to its exem	npt functions, subjec	t to certain exceptions;	and (2) no	more than	33 1/3% of its support f	rom gross investment
		income and unrelated busin	ness taxab l e income	(less section 511 tax) fro	m busines	ses acquir	red by the organization a	after June 30, 1975.
		See section 509(a)(2). (Cor	mplete Part III.)					
11		An organization organized a	and operated exc l usi	vely to test for public sa	fety. See	section 50	9(a)(4).	
12		An organization organized a	and operated exc l usi	vely for the benefit of, to	perform tl	ne functior	ns of, or to carry out the	purposes of one or
		more publicly supported org	ganizations describe	d in section 509(a)(1) d	r section :	509(a)(2)	See section 509(a)(3). (Check the box in
		lines 12a through 12d that	describes the type o	f supporting organization	n and com	olete lines	12e, 12f, and 12g.	
а		Type I. A supporting orga	anization operated, s	upervised, or controlled	by its supp	orted orga	anization(s), typically by	giving
		the supported organization	on(s) the power to reg	gularly appoint or elect a	majority c	f the direc	tors or trustees of the su	upporting
		organization. You must o	omplete Part IV, Se	ections A and B.				
b		Type II. A supporting orga	anization supervised	or controlled in connect	tion with its	s supporte	d organization(s), by hav	ving
		control or management o	f the supporting orga	anization vested in the sa	ame perso	ns that cor	ntro l or manage the supp	ported
		organization(s). You mus	t complete Part IV,	Sections A and C.				
С		Type III functionally inte	grated. A supportin	g organization operated	in connect	ion with, a	and functionally integrate	ed with,
		its supported organization	n(s) (see instructions). You must complete I	Part IV, Se	ctions A,	D, and E.	
d		Type III non-functionally	•					
		that is not functionally int	-		-			veness
	_	requirement (see instructi	•	•	•			
е		Check this box if the orga					Type I, Type II, Type III	
	- Cnta	functionally integrated, or	• •	nally integrated supporti	ng organiz	ation.		
f		er the number of supported or ride the following information	•	d organization(s)				
		i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	nization listed	(v) Amount of monetary	(vi) Amount of other
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see instructions)	support (see instructions)
				above (see instructions))				
					 			
					<u></u>			

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.)

Sed	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total	
	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")	4034772.	4006981.	3901249.	485,887.	3748468.	16177357 .	
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	4034772.	4006981.	3901249.	485,887.	3748468.	16177357.	
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)						1656772.	
	Public support. Subtract line 5 from line 4.						14520585.	
	ction B. Total Support							
	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total	
	Amounts from line 4	4034772.	4006981.	3901249.	485,887.	3748468.	16177357.	
8	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties,	715	F 1FF	0 556	2.1	1 202	0 040	
	and income from similar sources	715.	5,157.	2,556.	31.	1,383.	9,842.	
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		275,584.			10 220	287,904.	
	assets (Explain in Part VI.)		2/3,304.				16475103.	
	Total support. Add lines 7 through 10		1			12	104/5105.	
	Gross receipts from related activities,	,	,	Contract Contract		-		
13	First 5 years. If the Form 990 is for the			_			. □	
Sec	organization, check this box and store ction C. Computation of Publi							
_	Public support percentage for 2020 (li			volumn (fl)		14	88.14 %	
	Public support percentage from 2019					15	86.38 %	
						·		
100	16a 33 1/3% support test - 2020. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization							
h	b 33 1/3% support test - 2019. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box							
~	and stop here. The organization qualifies as a publicly supported organization							
17a	17a 10% -facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more,							
	and if the organization meets the facts	ŭ					· ·	
	meets the facts-and-circumstances te					viriow the organiz	▶ □	
h	10% -facts-and-circumstances test	ŭ	•					
~	more, and if the organization meets the	•					· - ·	
	organization meets the facts-and-circu				•		ightharpoonup	
18	Private foundation. If the organizatio		•				· · · · · · · · · · · · · · · · · · ·	

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.)

Se	ction A. Public Support	ziow, picase com	piete i art ii.)				
Cale	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Gifts, grants, contributions, and				, ,		
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	Amounts included on lines 2 and 3 received	1					
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year	1					
(Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Se	ction B. Total Support		_				
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties,						
	and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	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						
13	assets (Explain in Part VI.)						
	First 5 years. If the Form 990 is for th	e organization's f	irst, second, third.	fourth, or fifth tax	year as a section 5	501(c)(3) organizatio	 on,
	check this box and stop here	· ·		· ·	•	.,.,	
Se	ction C. Computation of Public	c Support Per	rcentage				
15	Public support percentage for 2020 (li	ne 8, co l umn (f), c	divided by line 13,	co l umn (f))		15	%
	Public support percentage from 2019					16	%
<u>Se</u>	ction D. Computation of Inves	tment Income	e Percentage				
	Investment income percentage for 20					17	%
	Investment income percentage from 2					18	%
19a	a 33 1/3% support tests - 2020. If the	organization did r	not check the box	on line 14, and line	e 15 is more than 3	33 1/3%, and l ine 17	7 is not
	more than 33 1/3%, check this box an	-					
k	33 1/3% support tests - 2019. If the	•					
	line 18 is not more than 33 1/3%, chec			•		•	
20	Private foundation If the organization	n did not chock a	hay an line 1/1 10	a or 10h chack th	nie hav and ead inc	etructione	

Part IV | Supporting Organizations

(Complete only if you checked a box in line 12 on 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 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 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
	4		
	1		
	2		
	3a		
	Ja		
	3b		
	3с		
	30		
	4a		
	Ale		
	4b		
	40		
	4c		
	5a		
	5b		
	5c		
	6		
	3		
	7		
	8		
	J		
	9a		
	Ωh		
	9b		
	9с		
	40		
	10a		
	10b		
m 9	90 or 99	0-EZ	2020
		,	

Par	t 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 in lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described in line 11a above?	11b		
С	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	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		
Sec	tion 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		
Sec	tion 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 in 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			
<u>C</u>	supported organizations played in this regard.	3		
Sec	tion 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 instructions)	•		
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	struction		·
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	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 line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
_	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	_		
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	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.

Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions All other Type III non-functionally integrated supporting organizations must complete Sections A through E. Section A - Adjusted Net Income	Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Organi	zations	
All other Type III non-functionally integrated supporting organizations must complete Sections A through E. Section A - Adjusted Net Income (A) Prior Year (B) Current Year (optional) 1	1	Check here if the organization satisfied the Integral Part Test as a qualify	ng trust on N	lov. 20, 1970 (<i>explain in</i>	Part VI). See instructions.
1 Net short-term capital gain 1				·	
2 Recoveries of prior-year distributions 3 Other gross income (see instructions) 4 Add lines 1 through 3. 5 Depreciation and depletion 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) 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 Section B - Minimum Asset Amount 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 b Average monthly cash balances c Fair market value of other non-exempt-use assets 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): Acquisition indebtedness applicable to non-exempt-use assets 2 3 Subtract line 2 from line 1d. 4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 Multiply line 5 by 0.035. 6 Multiply line 5 by 0.035. 7 Recoveries of prior-year distributions 7 Recoveries of prior-year distributions 7 Recoveries of prior-year (from Section A, line 8, column A) 7 A Enter greater of line 2 or line 3. 8 Minimum asset amount for prior year (from Section B, line 8, column A) 8 Enter greater of line 2 or line 3.	Sect	ion A - Adjusted Net Income		(A) Prior Year	
3 Other gross income (see instructions) 4 Add lines 1 through 3. 5 Depreciation and depletion 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) 7 Other expenses (see instructions) 7 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 Section B - Minimum Asset Amount 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 b Average monthly value of securities b Average monthly value of other non-exempt-use assets 1 to d Total (add lines 1a, 1b, and 1c) c Piscount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 C S S S S S S S S S S S S S S S S S S	1	Net short-term capital gain	1		
4 Add lines 1 through 3. 5 Depreciation and depletion 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) 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 Section B - Minimum Asset Amount 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 b Average monthly value of securities b Average monthly value of other non-exempt-use assets 1 to c Fair market value of other non-exempt-use assets 1 to d Total (add lines 1a, 1b, and 1c) c Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 a Subtract line 2 from line 1d. 4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 Multiply line 5 by 0.035. 7 Recoveries of prior-year distributions 7 A Solution of the company of the second of the company of the se	2	Recoveries of prior-year distributions	2		
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6 Multiply line 5 by 0.035. 7 Recoveries of prior-year distributions 7 Ninimum Asset Amount (add line 7 to line 6) Section C - Distributable Amount 1 Adjusted net income for prior year (from Section A, line 8, column A) 2 Enter 0.85 of line 1. 2 Inter greater of line 2 or line 3.		see instructions).	4		
7 Recoveries of prior-year distributions 7 Minimum Asset Amount (add line 7 to line 6) 8 Section C - Distributable Amount 1 Adjusted net income for prior year (from Section A, line 8, column A) 2 Enter 0.85 of line 1. 2 Inter greater of line 2 or line 3. 4 Enter greater of line 2 or line 3.	5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
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3 Minimum asset amount for prior year (from Section B, line 8, column A) 4 Enter greater of line 2 or line 3. 4	2		2		
4 Enter greater of line 2 or line 3.	3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
	4				
	5	· · · · · · · · · · · · · · · · · · ·	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to		· · · · · · · · · · · · · · · · · · ·			
emergency temporary reduction (see instructions).	-	•	6		
7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see	7			d Type III supporting orga	nization (see
instructions).	-		, -5	J	(

Schedule A (Form 990 or 990-EZ) 2020

	t i Type in Neil Failetienany integrated eest	a/(o/ Capporting Orga	inzatione (continu	iea)	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported			
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpose	3	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 2020 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2020	ıs	(iii) Distributable Amount for 2020
1_	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2020				
а	From 2015				
b	From 2016				
С	From 2017				
d	From 2018				
е	From 2019				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2020 distributable amount				
<u>i</u>	Carryover from 2015 not applied (see instructions)				
<u>i</u>	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2020 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2020 distributable amount				
С	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2020, 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 2020. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j and 4c.				
8	Breakdown of line 7:				
	Excess from 2016				
	Excess from 2017				
	Excess from 2018				
d	Excess from 2019				
	Excess from 2020				

Schedule A (Form 990 or 990-EZ) 2020

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:
SPECIAL EVENTS REVENUE
2017 AMOUNT: \$ 275,584.
2020 AMOUNT: \$ 12,320.

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Organization type (check one):

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No. 1545-0047

2020

Name of the organization

SAVE THE MUSIC FOUNDATION

-*9816

Filers of: Section: X 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule ___ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

 $\ \ \, \text{LHA} \ \ \, \text{For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.}$

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

Name of organization Employer identification number

SAVE THE MUSIC FOUNDATION 13-6089816

Part I	Contributors (see instructions). Use duplicate copies of	f Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_1		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$150,000	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$110,000	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$100,000	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization Employer identification number

SAVE THE MUSIC FOUNDATION 13-6089816

Part I	Contributors (see instructions). Use duplicate copies	of Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$150,000	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10		\$190,292	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11		\$100,000	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12		\$75,000	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

SAVE THE MUSIC FOUNDATION

-*9816

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
5	1,545 ONE-YEAR SUBSCRIPTION PASSES TO MASTERCLASS.		
		\$ 278,100.	04/14/20
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
023453 11-25		\$Schodulo B (Form (990, 990-EZ, or 990-PF) (2020)

Name of organization Employer identification number

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SAVE	THE	MUSIC	FOUNDATION	N

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Part III	from any one contributor. Complete columns (a completing Part III, enter the total of exclusively religious,) through (e) and the following I	ine entry. For or	ganizations [e year (Finter this info once) \$ \$		
(a) No from	Use duplicate copies of Part III if additional	space is needed.				
Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
		(e) Transfer	of gift			
	Transferee's name, address, al	nd ZI P + 4	Re	elationship of transferor to transferee		
(a) No.			T			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
		(e) Transfer	of gift			
	-		_			
	Transferee's name, address, a	nd ZIP + 4	He	lationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
		-				
		(e) Transfer	of wift			
		(e) Hansiel	or girt			
	Transferee's name, address, a	nd ZIP + 4	Re	elationship of transferor to transferee		
		-				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
Parti						
		(e) Transfer	of gift			
	Transferee's name, address, a	nd ZIP + 4	Re	elationship of transferor to transferee		

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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.

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

SAVE THE MUSIC FOUNDATION

Employer identification number **-***9816

Pai	t I Organizations Maintaining Donor Advise	d Funds or Other Similar	Funds or Ac	counts. Complete if the
	organization answered "Yes" on Form 990, Part IV, Iin			
		(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 v	writing that the assets held in do	nor advised fund	ds
	are the organization's property, subject to the organization's $% \left(1\right) =\left(1\right) \left(1$			
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant fund	s can be used o	nly
	for charitable purposes and not for the benefit of the donor o	r donor advisor, or for any other	purpose conferr	ing
_	impermissible private benefit?			Yes No
Pai	TII Conservation Easements. Complete if the org	ganization answered "Yes" on Fo	orm 990, Part IV,	line 7.
1	Purpose(s) of conservation easements held by the organization			
	Preservation of land for public use (for example, recrea	· · · · · · · · · · · · · · · · · · ·		orically important land area
	Protection of natural habitat	Prese	rvation of a certi	fied historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in	the form of a co	nservation easement on the last
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b				2b
С	Number of conservation easements on a certified historic stru			2c
d	Number of conservation easements included in (c) acquired a			
	listed in the National Register			2d
3	Number of conservation easements modified, transferred, rel	leased, extinguished, or terminat	ed by the organi	zation during the tax
	year ▶			
4	Number of states where property subject to conservation eas	sement is located		
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, har	ndling of	
	violations, and enforcement of the conservation easements it			
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforce	cing conservatio	n easements during the year
				
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing	conservation ea	sements during the year
	▶ \$			
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of sec	tion 170(h)(4)(B)	
	and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization reports conservation		•	
	balance sheet, and include, if applicable, the text of the footn	note to the organization's financia	al statements tha	at describes the
Da	organization's accounting for conservation easements. † III Organizations Maintaining Collections of	f Art Historical Traceures	o or Othor C	imilar Assets
Га		•	s, or Other 3	iiiliai Assets.
4.	Complete if the organization answered "Yes" on Form			
та	If the organization elected, as permitted under FASB ASC 95			
	of art, historical treasures, or other similar assets held for pub	·		ice of public
	service, provide in Part XIII the text of the footnote to its finar			. aleaakada
р	If the organization elected, as permitted under FASB ASC 95	•		
	art, historical treasures, or other similar assets held for public	exhibition, education, or research	on in furtherance	e of public service,
	provide the following amounts relating to these items:			•
	(i) Revenue included on Form 990, Part VIII, line 1			L .
_				
2	If the organization received or held works of art, historical treating the first of the control		r tinancia i gain, į	oroviae
	the following amounts required to be reported under FASB A			Α
а	Revenue included on Form 990, Part VIII, line 1			
b	Assets included in Form 990, Part X			▶ \$

Pai	t III Organizations Maintaining Co	ollections of Ar	t, Histo	rical Tre	asures, o	r Other	Simi l ar <i>i</i>	Assets	(continu	ued)
3	Using the organization's acquisition, accessio	n, and other record	s, check	any of the	following that	t make sig	nificant us	e of its	•	<u> </u>
	collection items (check all that apply):									
а	Public exhibition	d	ı 🔲 L	oan or exc	hange progra	am				
b	Scholarly research	е	. 🗌	Other						
С	Preservation for future generations									
4	4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.									
5	During the year, did the organization solicit or	receive donations of	of art, his	torical treas	sures, or othe	er simi l ar a	ssets			
	to be sold to raise funds rather than to be mai	intained as part of tl	he organi	zation's co	llection?				Yes	No_
Pai	t IV Escrow and Custodial Arrang	j ements. Comple	ete if the	organizatio	n answered	"Yes" on F	orm 990,	Part I V, I	ine 9, or	
	reported an amount on Form 990, Part	: X, l ine 21.								
1a	Is the organization an agent, trustee, custodia	ın or other intermed	iary for c	ontribution	s or other as	sets not in	cluded			
	on Form 990, Part X?							\square	Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII a									
									Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
2 a	Did the organization include an amount on Fo	rm 990, Part X, l ine	21, for es	scrow or cu	ustodia l acco	ount liability	y?		Yes	☐ No
<u>b</u>	If "Yes," explain the arrangement in Part XIII.									
Pai	t V Endowment Funds. Complete if	the organization an	swered "	Yes" on Fo	rm 990, Part	t IV, line 10).			
		(a) Current year	(b) Pr	rior year	(c) Two yea	ırs back 🚺	d) Three yea	ars back	(e) Four	years back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and 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 curre	ent year end balance	e (line 1g,	, column (a)) he l d as:					
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
С	Term endowment >9	6								
	The percentages on lines 2a, 2b, and 2c shou	ld equal 100%.								
За	Are there endowment funds not in the posses	sion of the organiza	ation that	are he l d ar	nd administe	red for the	organizati	ion	_	
	by:								`	Yes No
	(i) Unrelated organizations								3a(i)	
	(ii) Related organizations								3a(ii)	
b	If "Yes" on line 3a(ii), are the related organizat	ions l isted as requir	ed on Sc	hedu l e R?					3b	
4	Describe in Part XIII the intended uses of the		wment fu	ınds.						
Pai	t VI Land, Buildings, and Equipme									
	Complete if the organization answered	"Yes" on Form 990), Part IV,							
	Description of property	(a) Cost or o			or other	. , ,	cumulated		(d) Book	value
		basis (investr	nent)	basis	(other)	depi	reciation			
1a	Land									
b	Buildings									
С	Leasehold improvements									
d	Equipment				F 000		F0 F0	_	_	445
	Other	•			5,000.		<u>59,58</u>	3.		,417.
<u>Total</u>	. Add lines 1a through 1e. (Column (d) must eq	ual Form 990, Part	X. columi	n (B), line 1	0c.)				5	,417.

Part VII	Investments -	Other	Securities.
----------	---------------	-------	-------------

Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	l-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
<u>(F)</u>			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
		14 - O - E 000 B - I V P - 40	
Complete if the organization answered "Yes" (a) Description of investment	on Form 990, Part IV, line (b) Book value	(c) Method of valuation: Cost or end	Lof-vear market value
, · ·	(b) book value	(c) Method of Valuation. Cost of end	
<u>(1)</u>			
(2)			
(3)			
(5) (6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"	on Form 990. Part IV. line	11d. See Form 990. Part X. line 15.	
	Description	, , , , , , , , , , , , , , , , , , ,	(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990. Part X. col. (B) line Part X Other Liabilities.	15.))	
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25.	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990. Part X, col. (B) line	25.)		
2. Liability for uncertain tax positions. In Part XIII, provide	•	the organization's financial statements the	nat reports the
organization's liability for uncertain tax positions under		•	· —

Pa	rt XI	Reconciliation of Revenue per Audited Financial Stat	ements with i	Revenue per Re	turn.	
		Complete if the organization answered "Yes" on Form 990, Part IV, lin	e 12a.			
1	Total	revenue, gains, and other support per audited financial statements			1	4,368,148.
2		ints included on line 1 but not on Form 990, Part VIII, line 12:				
а		nrealized gains (losses) on investments				
b		ted services and use of facilities		610,806.		
С	Reco	veries of prior year grants	2c			
d	Other	(Describe in Part XIII.)	2d			
е	Add I	ines 2a through 2d			2e	610,806.
3	Subtr	act line 2e from line 1			3	3,757,342.
4		ints included on Form 990, Part VIII, line 12, but not on line 1:				
а	Inves	tment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other	(Describe in Part XIII.)	4b			
С	Add I	nes 4a and 4b			4c	0.
5	Total	revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		· <u>··</u> ·····	5	3,757,342.
Pa	rt XII	Reconciliation of Expenses per Audited Financial Sta		Expenses per F	Returr).
		Complete if the organization answered "Yes" on Form 990, Part IV, lin	e 12a.			
1	Total	expenses and losses per audited financial statements			1	3,658,858.
2	Amou	ints included on line 1 but not on Form 990, Part IX, line 25:				
а	Dona	ted services and use of facilities	2a	610,806.		
b	Prior	year adjustments	2b			
С	Other	losses	2c			
d	Other	(Describe in Part XIII.)	2d			
е	Add I	nes 2a through 2d			2e	610,806.
3	Subtr	act line 2e from line 1			3	3,048,052.
4		ints included on Form 990, Part IX, line 25, but not on line 1:				
а	Inves	tment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other	(Describe in Part XIII.)	4b			
С	Add I	nes 4a and 4b			4c	0.
5		expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18	3.)		5	3,048,052.
Pa	rt XIII	Supplemental Information.				
Prov	ide the	descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	; Part IV, lines 1b	and 2b; Part V, line 4	; Part X	, line 2; Part XI,
lines	2d and	d 4b; and Part XII, lines 2d and 4b. Also complete this part to provide an	y additional inform	nation.		
PAI	RT X	, LINE 2:				
THI	E FO	UNDATION BELIEVES IT HAS NO UNCERTAL	N TAX POS	SITIONS AS	OF I	DECEMBER
31	, 20	20 AND 2019 IN ACCORDANCE WITH ACCOU	NTING STA	NDARDS COD	IFIC	CATION
("2	ASC") TOPIC 740, WHICH PROVIDES STANDARI	S FOR EST	ABLISHING	AND	
CLZ	ASSI	FYING ANY TAX PROVISIONS FOR UNCERTA	IN TAX PO	SITIONS.		
_						

SCHEDULE G

Department of the Treasury

Internal Revenue Service

(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.

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization							ntification number		
SAVE THE MUSIC FOUNDATION							**-***9816		
Part I Fundraising Activities. required to complete this par	Complete if the organization answe	red "Y	es" or	n Form 990, Part IV, I	line 1	7. Form 990 - EZ	filers are not		
 Indicate whether the organization rais a Mail solicitations b Internet and email solicitations c Phone solicitations d In-person solicitations 2 a Did the organization have a written of key employees listed in Form 990, P b If "Yes," list the 10 highest paid individendments 	sed funds through any of the followin e Solicitat f Solicitat g Special or oral agreement with any individual art VII) or entity in connection with providuals or entities (fundraisers) pursua	tion of tion of fundra (includ	non-g gover lising of ling of ona l fu	overnment grants nment grants events ficers, directors, trus undraising services?		Yes			
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have c or con contrib	ustody trol of	(iv) Gross receipts from activity	to (Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization		
		Yes	No						
Total			•						
3 List all states in which the organization or licensing.		ontrib	utions	or has been notified	it is	exempt from re	gistration		

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 HOMETOWN 2 NONE (add col. (a) through HOMETOWN col. (c)) (total number) (event type) (event type) 210,974. 210,974. 1 Gross receipts 198,654. 198,654. 2 Less: Contributions 3 Gross income (line 1 minus line 2) 12,320. 12,320. 4 Cash prizes 5 Noncash prizes Direct Expenses 6 Rent/facility costs 7 Food and beverages 8 Entertainment 4,829. 4,829 9 Other direct expenses 4,829. 10 Direct expense summary. Add lines 4 through 9 in column (d) 7,491 11 Net income summary. Subtract line 10 from line 3, column (d) 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. (d) Total gaming (add (b) Pull tabs/instant (c) Other gaming (a) Bingo Revenue bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes Rent/facility costs 5 Other direct expenses Yes Yes % Yes 6 Volunteer labor No No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) **9** Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? **b** If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? **b** If "Yes," explain:

Sch	edule G (Form 990 or 990-EZ) 2020 SAVE THE MUSIC FOUNDATION	<u> </u>	<u>8 T 0</u>	Page 3
11	Does the organization conduct gaming activities with nonmembers?		Yes	☐ No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed			
	to administer charitable gaming?		Yes	No
13	Indicate the percentage of gaming activity conducted in:			
		120	ĺ	0.4
	The organization's facility	13a		<u>%</u>
	An outside facility	13b		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name			
	Address >			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	. 🔲	Yes	☐ No
b	If "Yes," enter the amount of gaming revenue received by the organization \$\bigs\tau\$ smooth \$\text{\colored}\$ and the amount			
	of gaming revenue retained by the third party > \$			
_	If "Yes," enter name and address of the third party:			
	in Tes, enternance and address of the till d party.			
	Name			
	Name			
	Address			
16	Gaming manager information:			
	Name			
	Gaming manager compensation > \$			
	daming manager compensation			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
a			Yes	No
	retain the state gaming license?		163	NO
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
	organization's own exempt activities during the tax year > \$			
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Par	t III, lin	ies 9, 9	}b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.			

Schedule G	i (Form 990 or 990-EZ)	SAVE THE	MUSIC E	FOUNDATION	**-***9816	Page 4
Part IV	i (Form 990 or 990-EZ) Supplemental Info	rmation (continued	d)			g
		100	-7			
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SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

OMB No. 1545-0047

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

Open to Public Inspection

26. å [] **Employer identification number** **-**9816 (h) Purpose of grant or assistance X Yes MUSIC EDUCATION MUSIC EDUCATION MUSIC EDUCATION MUSIC EDUCATION MUSIC EDUCATION MUSIC EDUCATION Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of noncash assistance INSTRUMENTS INSTRUMENTS INSTRUMENTS INSTRUMENTS INSTRUMENTS INSTRUMENTS MUSIC MUSIC MUSIC MUSIC MUSIC MUSIC (f) Method of valuation (book, FMV, appraisal, other) FMV 16,922. FMV FMVFMVFMV44,455, FMV 50,595. 6,847. 60,747. 84,835 (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. 0 0 0 0 0 0 (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section (if applicable) SAVE THE MUSIC FOUNDATION Enter total number of other organizations listed in the line 1 table 115 115 115 115 115 115 **-***0321 **-**4235 **-***0306 **-***0784 **-**7693 **-**5313 General Information on Grants and Assistance (b) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization DISTRICT - 3011 WEST GRAND BLVD -DETROIT PUBLIC SCHOOLS COMMUNITY BALTIMORE CITY PUBLIC SCHOOLS GREENBRIER COUNTY SCHOOLS or government DANBURY PUBLIC SCHOOLS DAYTON PUBLIC SCHOOLS CABELL COUNTY SCHOOLS BALTIMORE, MD 21202 HUNTINTON, WV 25702 Name of the organization LEWISBURG, WV 24901 200 EAST NORTH AVE 63 BEAVER BROOK RD DANBURY, CT 06810 DETROIT, MI 48202 115 S. LUDLOW ST OH 45402 202 CHESTNUT ST 2850 5TH AVE Part I Part II DAYTON, N

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2020

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rm 990) SAVE THE MUSIC FOUNDATION **-**9816 timestic Governments (Schedule I/Form 990). Part II.)
990) SAVE THE MUSIC FOUNDATION Lation of Grants and Other Assistance to Domestic Organiz
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Schedule

(a) Name and address of (b) EIN (c) IRC sectorganization or government if applicated the sectorganization or government or government if applicated the sectorganization or government if applicated the sectorganization or government if applicated the sectorganization or government if applicated the sectorganization or government is applicated to sectorganize the sectorganization or government is applicated to sectorganize the sectorganization or government is applicated to sectorganize the sectorganize the sectorganize the sectorganization or government is applicated to sectorganize the sectorganization or government is applicated to sectorganize the sectorganization or government is applicated to sectorganize the sectorganization or government is applicated to sectorganize the sectorganization or government is applicated to sectorganize the sec	(b) EIN		tion (d) Amount of (e) Amou ole cash grant assistan	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GUITARS OVER GUNS 169 E FLAGLER ST STE 1134 MIAMI, FL 33131	**************************************	501(C)(3)	.0	9,000,6	FMV	MUSIC INSTRUMENTS	MUSIC EDUCATION
ISD #13 COLUMBIA HEIGHTS PUBLIC SCHOOLS - 1440 49TH NE - COLUMBIA HEIGHTS, MN 55421	0600***-**	115	.0	17,022.	FMV	MUSIC INSTRUMENTS	MUSIC EDUCATION
LOGAN COUNTY SCHOOLS 506 HOLLY AVE LOGAN, WV 25601	**-***0344	115	0.	44,455.	FMV	MUSIC INSTRUMENTS	MUSIC EDUCATION
LOS ANGELES UNIFIED SCHOOL DISTRICT - 333 S BEAUDRY AVE - LOS ANGELES, CA 90017	**-**1908	115	.0	5,047.	FMV	MUSIC INSTRUMENTS	MUSIC EDUCATION
METROPOLITAN NASHVILLE PUBLIC SCHOOLS - 2601 BRANSFORD AVE - NASHVILLE, TN 37204	**_**7138	115	0.	47,706.	FMV	MUSIC INSTRUMENTS	MUSIC EDUCATION
MIAMI-DADE COUNTY PUBLIC SCHOOLS 1450 NE SECOND AVE SUITE 912 MIAMI, FL 33132	**-***0572	115	.0	120,455.	FMV	MUSIC INSTRUMENTS	MUSIC EDUCATION
NEW YORK CITY DEPARTMENT OF EDUCATION - 52 CHAMBER ST - NEW YORK, NY 10007	**-**0434	115	0	50,089.	FMV	MUSIC INSTRUMENTS	MUSIC EDUCATION
NEWARK ARTS COUNCIL 17 ACADEMY ST STE 702 NEWARK, NJ 07102	**-**2819	501(C)(3)	.0	9,000.	FMV	MUSIC INSTRUMENTS	MUSIC EDUCATION
NEWARK BOARD OF EDUCATION 15 STATE ST NEWARK, NJ 07104	**-**2140	115	•0	382,680.	FMV	MUSIC INSTRUMENTS	MUSIC EDUCATION
							Schedule I (Form 990)

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Page 1

Schedu	schedule I (Form 990)	SAVE THE MUSI	IC FOUNDATION			**-**
Part II	Continuation of	Part II Continuation of Grants and Other Assista	ance to Domestic Organizations and Domestic C	Sovernments	(Schedule I (Form 990), Part II.)	

(a) Name and address of (b) EIN (c) IRC section organization or government if applicable cash grant non-cash grant assistant assistant	(a) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ORLEANS PARISH PUBLIC SCHOOLS 3510 GENERAL DEGAULLE NEW ORLEANS, LA 70114	0086***	115	.0	173,019.	FMV	MUSIC INSTRUMENTS	MUSIC EDUCATION
PAJARO VALLEY UNIFIED SCHOOL DISTRICT - 294 GREEN VALLEY RD -	**-**	115	•0	52,207.	ΔМЯ	MUSIC INSTRUMENTS	MUSIC EDUCATION
PATERSON PUBLIC SCHOOLS 90 DELAWARE AVE PATERSON, NJ 07503	***-**	115	•0	35,125.	FMV	MUSIC INSTRUMENTS	MUSIC EDUCATION
ROANOKE CITY PUBLIC SCHOOLS 40 DOUGLASS AVE ROANOKE, VA 24012	**_**	115	•0	47,867.	FMV	MUSIC INSTRUMENTS	MUSIC EDUCATION
SCHOOL DISTRICT OF PHILADELPHIA 440 N BROAD ST PHILADELPHIA, PA 19130	**_**4102	115	•0	18,360.	PMV	MUSIC INSTRUMENTS	MUSIC EDUCATION
STERLING UNIFIED SCHOOL DISTRICT 376 - 308 EAST WASHINGTON AVE - STERLING, KS 67579	**-***7727	115	•0	47,767.	FMV	MUSIC INSTRUMENTS	MUSIC EDUCATION
WAYNE COUNTY SCHOOLS 212 N COURT ST WAYNE, WV 25570	**_**	115	•0	50,595,1	FMV	MUSIC INSTRUMENTS	MUSIC EDUCATION
WETZEL COUNTY SCHOOL DISTRICT 333 FOUNDRY ST NEW MARTINVILLE, WV 26155	**-***0413	115	.0	44,455.	FMV	MUSIC INSTRUMENTS	MUSIC EDUCATION
WINDHAM PUBLIC SCHOOLS 355 HIGH ST UNIT B WILLIMANTIC, CT 06226	**-**1204	115	•0	16,747.	FMV	MUSIC INSTRUMENTS	MUSIC EDUCATION
							Schedule I (Form 990)

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Page 1

	izations and Domestic Governments (Schedule I (Form 990), Part II.)
SAVE THE MUSIC FOUNDATION	to Domestic Organ
THE MUSIC	Assistance
THE	d Other
\mathtt{SAVE}	of Grants an
e I (Form 990)	Continuation
Schedul	Part II

(a) Name and address of (b) EIN (c) IRC section organization or government (b) EIN (c) IRC section (d) Amount of assistance (book, FMV, appraisal, other)	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WOOD COUNTY SCHOOL DISTRICT 1210 THIRTEENTH ST PARKERSBURG, WV 26101	**-**0418	115	0.	50,595.	FMV	MUSIC INSTRUMENTS	MUSIC EDUCATION
YOUNG MUSICIAN UNITE 1260 NW 28TH ST #103 MIAMI, FL 33142	**-**0764	501(C)(3)	0.	34,628.	FMV	MUSIC INSTRUMENTS	MUSIC EDUCATION
							Schedule I (Form 990)

-9816

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Schedule I (Form 990) 2020

Part III Grants and Other

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

SAVE THE MUSIC FOUNDATION

Questions Regarding Compensation

Employer identification number **-***9816

			Yes	No
1 a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		X
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			77
а	The organization?	5a		X
b	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			77
а	The organization?	6a		X
b	Any related organization?	6b		X
_	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			77
	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			37
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2020

Schedule J (Form 990) 2020

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	3C compensation	(C) Retirement and	elqi	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Sille	(a)-(i)(a)	reported as deferred on prior Form 990
(1) DANIELLE ZALAZNICK	Ξ	178,367.	0	270.	8,472.	27,772.	214,881.	0
SENIOR DIRECTOR, GROWTH & PARTNERSHI			0	0.	0.	0.	0.	0
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	Schedule J (Form 990) 2020
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SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

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

Name of the organization SAVE THE MUSIC FOUNDATION Employer identification number **-***9816

Pa	rt I Types of Property					•			
	·	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contri amounts report Form 990, Part VII	ted on	Method noncash cor	(d) of determin ntribution a	_	s
1	Art - Works of art								
2	Art - Historical treasures								
3	Art - Fractional interests								
4	Books and publications								
5	Clothing and household goods								
6	Cars and other vehicles								
7	Boats and planes								
8	Intellectual property								
9	Securities - Publicly traded								
10	Securities - Closely held stock								
11	Securities - Partnership, LLC, or								
	trust interests								
12	Securities - Miscellaneous								
13	Qualified conservation contribution -								
	Historic structures								
14	Qualified conservation contribution - Other								
15	Real estate - Residential								
16	Real estate - Commercial								
17	Real estate - Other								
18	Collectibles								
19	Food inventory								
20	Drugs and medical supplies								
21	Taxidermy								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts								
25	Other (MUSIC INSTRUM)	Х	7,050	704	,971.	COST			
26	Other (ITEMS TO DIST)	Х	1,545	278	,100.	COST			
27	Other (MEMORABILIA/D)	Х	241	34	,200.	COST			
28	Other ()								
29	Number of Forms 8283 received by the organiz	zation during	the tax year for c	ontributions					
	for which the organization completed Form 828				29				
				•				Yes	No
30a	During the year, did the organization receive by	y contributio	n any property rep	orted in Part I, lines	s 1 throug	h 28, that it			
	must hold for at least three years from the date	of the initia	I contribution, and	which isn't require	d to be us	sed for			
	exempt purposes for the entire holding period?	?					30a		Х
b	If "Yes," describe the arrangement in Part II.								
31								Х	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash								
	contributions?		~	•			32a		Х
b	If "Yes," describe in Part II.								
33	If the organization didn't report an amount in c	olumn (c) fo	a type of property	for which column	(a) is chec	ked,			
	describe in Part II.								
LHA	For Paperwork Reduction Act Notice, see	the Instruct	tions for Form 990).		Sched	ule M (Forr	n 990)	2020

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

OMB No. 1545-0047

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

Name of the organization

SAVE THE MUSIC FOUNDATION

Inspection **Employer identification number** **-***9816

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
OVER 2,159 PUBLIC SCHOOLS IN MORE THAN 276 SCHOOL DISTRICTS AROUND THE
COUNTRY, IMPACTING THE LIVES OF MILLIONS OF STUDENTS.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
COMMUNITIES.
FORM 990, PART III, LINE 4A:
COUNTRY.
THE FOUNDATION HAS DEVELOPED A UNIQUE MODEL TO FOSTER EQUITABLE ACCESS
TO COMPREHENSIVE MUSIC EDUCATION FOR ALL CHILDREN. THROUGH STRATEGIC
PARTNERSHIPS WITH SCHOOL DISTRICTS, THE FOUNDATION PROVIDES BRAND-NEW
MUSICAL INSTRUMENTS, EQUIPMENT, METHOD BOOKS, PROFESSIONAL DEVELOPMENT
AND PROGRAM SUPPORT TO PUBLIC ELEMENTARY, MIDDLE, AND HIGH SCHOOLS,
JUMP-STARTING DORMANT MUSIC PROGRAMS ACROSS THE COUNTRY. TO MAKE
CERTAIN THAT MUSIC PROGRAMS REMAIN A CORE PART OF THE CURRICULUM IN
PUBLIC SCHOOLS, AND THAT THE PROGRAMS LIVE ON IN PERPETUITY, THE
FOUNDATION WORKS WITH SCHOOLS THAT HAVE AGREED TO IMPLEMENT A
SEQUENTIAL INSTRUMENTAL MUSIC PROGRAM BASED ON LOCAL, STATE, AND
NATIONAL STANDARDS FOR MUSIC EDUCATION.
THE FOUNDATION VALUES MUSIC AS A CRITICAL LEARNING TOOL THAT KEEPS
STUDENTS ENGAGED IN SCHOOL, HELPS DEVELOP WELL-ROUNDED INDIVIDUALS, AND
ENCOURAGES SKILLS THAT ARE VITAL FOR SUCCESS IN THE 21ST CENTURY.

Name of the organization

SAVE THE MUSIC FOUNDATION

Employer identification number **-***9816

PROGRAM AND POLICY STAFF MEMBERS FROM THE FOUNDATION WORK CLOSELY WITH

SUPERINTENDENTS, SCHOOL BOARD MEMBERS, PRINCIPALS, ARTS COORDINATORS,

AND MUSIC EDUCATORS IN EACH SCHOOL DISTRICT TO IDENTIFY SCHOOLS THAT

ARE ELIGIBLE TO PARTICIPATE. THE FOUNDATION WORKS WITH LOCAL

POLICY-MAKERS AND ADVOCATES TO HELP ENSURE THAT SCHOOLS THAT ARE NOT

CURRENTLY ELIGIBLE TO PARTICIPATE IN THE FOUNDATION'S RESTORATION OF

MUSIC EDUCATION PROGRAMS TAKE THE STEPS NEEDED TO BECOME ELIGIBLE. THE

FOUNDATION WORKS TO ENABLE EVERY SCHOOL WITHIN THE DISTRICT TO HAVE

ACCESS TO MUSIC EDUCATION.

THE FOUNDATION OFFERS FOUR DIFFERENT TYPES OF GRANT PACKAGES TO PUBLIC

SCHOOLS BASED ON GRADE LEVEL, NEED, AND THE SCHOOL'S MUSIC PROGRAMMING

GOALS. THE GRANT PACKAGES ARE DECIDED UPON WITH THE INPUT OF DISTRICT

ADMINISTRATORS, SCHOOL LEADERS, AND THE FOUNDATION'S PROGRAM AND POLICY

STAFF. THE FOUNDATION EXPANDS ITS REACH IN SERVING ALL PUBLIC SCHOOL

STUDENTS PRE-KINDERGARTEN THROUGH 12TH GRADE. A SCHOOL MUST CONDUCT

THEIR INSTRUMENTAL MUSIC PROGRAM AS PART OF THE REGULAR SCHOOL DAY,

PROVIDE A DESIGNATED SPACE FOR MUSIC INSTRUCTION AND COMMIT TO HIRING A

FULL-TIME, CERTIFIED MUSIC EDUCATOR. BY GUARANTEEING THAT EACH GRANT

RECIPIENT SCHOOL FULFILLS THE SCHEDULE, SPACE, AND STAFF REQUIREMENTS,

THE FOUNDATION FOSTERS A SUSTAINABLE MUSIC PROGRAM.

CORE GRANT

THE CORE GRANT IN THE FORM OF BAND, STRING OR MARIACHI HAS BEEN OUR

CORNERSTONE GRANT THAT WE PROVIDE TO THE MAJORITY OF OUR GRANTEE

SCHOOLS ACROSS THE COUNTRY. EACH GRANT IS VALUED AT APPROXIMATELY

\$71,000 AND JUMP STARTS A NEW INSTRUMENTAL PROGRAM AT A SCHOOL WITH

WOODWIND, BRASS, PERCUSSION, STRING, OR MARIACHI INSTRUMENTS, MUSIC

Name of the organization SAVE THE MUSIC FOUNDATION

Employer identification number **-**9816

STANDS, METHOD BOOKS, AND PROGRAM SUPPORT FOR 10 YEARS.

INTRO TO MUSIC GRANT

THE INTRO TO MUSIC GRANT WAS DEVELOPED IN 2018 AND INCLUDES EVERYTHING

A MUSIC TEACHER NEEDS TO PROVIDE PREK-5TH GRADE STUDENTS WITH

SEQUENTIAL, STANDARDS-BASED GENERAL MUSIC INSTRUCTION, FOCUSED IN

ACTIVE MUSIC-MAKING AND ENGAGEMENT. THE GRANT IS VALUED AT

APPROXIMATELY \$20,000, INCLUDING DEVELOPMENTALLY-APPROPRIATE AND

CULTURALLY-RELEVANT INSTRUMENTS AND RESOURCES: DIGITAL PIANO, ACOUSTIC

GUITAR, ORFF INSTRUMENTS, WORLD DRUMS, RECORDERS, HAND-HELD PERCUSSION,

BOOMWHACKERS, A CLASSROOM SET OF UKULELES, METHOD BOOKS, AND PROGRAM

SUPPORT FOR 10 YEARS.

J DILLA MUSIC TECH GRANT

THE J DILLA MUSIC TECH GRANT WAS DEVELOPED IN 2018 AND FOCUSES ON

DELIVERING THE FUTURE OF MUSIC LEARNING THROUGH INNOVATIVE MUSIC TECH

TOOLS AND CURRICULUM FOR HIGH SCHOOL STUDENTS. OUR GOAL IS TO BRING OUT

STUDENTS' INNER CREATIVITY, TALENT, AND CONFIDENCE BY TEACHING THE

FUNDAMENTALS OF ELECTRONIC MUSIC CREATION, RECORDING, AND PRODUCTION.

IN 2019, THE MUSIC TECH GRANT WAS NAMED AFTER THE LATE, INFLUENTIAL

INDUSTRY RAPPER AND HIP-HOP RECORD PRODUCER J DILLA. THE GRANT IS

VALUED AT APPROXIMATELY \$72,000, WHICH INCLUDES HARDWARE AND SOFTWARE

TO SUPPORT INSTRUCTION IN AUDIO RECORDING, AUDIO ENGINEERING, DJ-ING,

BEAT-MAKING, ALONG WITH IN-DEPTH TRAINING FOR MUSIC TEACHERS, INCLUDING

A ONE-ON-ONE MENTORSHIP WITH AN ARIZONA STATE UNIVERSITY PROFESSOR OF

MUSIC EDUCATION, AND PROGRAM SUPPORT FOR 10 YEARS.

Schedule O (Form 990 or 990-EZ) 2020 Page 2 Name of the organization **Employer identification number** **-***9816 SAVE THE MUSIC FOUNDATION THE KEYS + KIDS GRANT SUPPORTS ANY TYPE OF MUSIC EDUCATION PROGRAM, INCLUDING VOCAL/CHORAL, GENERAL MUSIC, MUSICAL THEATRE, ETC. THE GRANT IS VALUED AT APPROXIMATELY \$22,000 AND INCLUDES A CONTEMPORARY, DIGITAL HYBRID PIANO, KEYBOARDS, METHOD BOOKS, AND PROGRAM SUPPORT FOR 10 YEARS. A GRANT OF INSTRUMENTS PROVIDES THE IMPETUS FOR MUSIC PROGRAMS TO BE RESTORED, BUT THIS IS ONLY THE BEGINNING OF OUR PARTNERSHIPS WITH SCHOOL DISTRICTS NATION-WIDE. GRANT RECIPIENT PRINCIPALS ARE PROVIDED WITH HANDS-ON GUIDANCE IN BUILDING AN INSTRUMENTAL MUSIC PROGRAM. THE FOUNDATION'S PROGRAM AND POLICY STAFF ASSISTS PRINCIPALS IN DEVELOPING THEIR MUSIC PROGRAM THROUGH WORKSHOPS, PERSONAL MEETINGS AND THE SAVE THE MUSIC FOUNDATION'S GUIDE TO BUILDING AN INSTRUMENTAL MUSIC PROGRAM. MUSIC EDUCATORS FROM GRANT RECIPIENT SCHOOLS HAVE THE OPPORTUNITY TO ATTEND PROFESSIONAL DEVELOPMENT WORKSHOPS THAT FOCUS ON GROWING THEIR SKILLS AND BUILDING THEIR MUSIC PROGRAMS. THERE HAVE BEEN CASES OF SAVE THE MUSIC FOUNDATION GRANT RECIPIENT COMMUNITIES WHERE SCHOOL PROGRAMS THAT HAD BEEN JUMPSTARTED BY THE FOUNDATION WERE THREATENED TO BE ELIMINATED. IN EACH CASE, A LETTER WAS SENT TO THE PRINCIPAL OF THE GRANTEE SCHOOL, SCHOOL BOARD MEMBERS AND SUPERINTENDENT FROM THE SCHOOL DISTRICT STATING CONCERN ABOUT THE PENDING ELIMINATION AND STATING THE ORIGINAL AGREEMENT TO MAINTAINING

THE PROGRAM MADE BY THE SCHOOL DISTRICT AND MEETINGS WERE SET UP TO

FOLLOW UP WITH SENIOR LEADERSHIP IN THE SCHOOL DISTRICTS. IN MOST

THE PROGRAMS WERE NOT ELIMINATED.

THE CONVERSATIONS THAT TAKE PLACE WHILE ADVOCATING IN LOCAL COMMUNITIES

PROVE MOST EFFECTIVE WHEN DECISION MAKERS, COMMUNITY MEMBERS,

STAKEHOLDERS, AND FUNDERS ARE ALREADY FAMILIAR WITH THE IMPORTANCE OF

MUSIC EDUCATION. FOR THIS REASON, SAVE THE MUSIC FOUNDATION EMPLOYS A

NUMBER OF STRATEGIES ON A NATIONAL SCALE TO LAY THE GROUNDWORK FOR

SUCCESSFUL LOCAL ADVOCACY.

SCHOOL LEADERS

THE FOUNDATION TARGETS SCHOOL LEADER CONFERENCES TO SPREAD THE WORD

ABOUT THE VITAL NEED FOR MUSIC EDUCATION. EACH YEAR, SCHOOL

ADMINISTRATORS GATHER TO SHARE INFORMATION THAT WILL ENABLE THEM TO

MAKE IMPORTANT DECISIONS ABOUT THE CURRICULUM IN THEIR SCHOOLS. BOTH

THE SCHOOL SUPERINTENDENTS ASSOCIATION (AASA) AND THE NATIONAL SCHOOL

BOARDS ASSOCIATION (NSBA) HAVE GRANTED THE FOUNDATION AND OTHER

MUSIC-EDUCATION ADVOCATES A SECTION OF THEIR CONVENTION SPACES TO BE

USED AS SPECIAL PAVILIONS DEVOTED TO SPREADING THE WORD ABOUT THE

IMPORTANCE OF MUSIC EDUCATION. SINCE 2005, SAVE THE MUSIC HAS BEEN

JOINED BY INSTRUMENT MANUFACTURERS, RETAILERS, AND THE NAMM FOUNDATION'

SUPPORT MUSIC COALITION IN THE MUSIC PAVILIONS. NSBA DID NOT TAKE PLACE

IN 2020 DUE TO COVID-19 PRECAUTIONS.

EDUCATIONAL WORKSHOPS

THE FOUNDATION OFTEN PROVIDES WORKSHOPS ON THE BENEFITS OF MUSIC

EDUCATION AT NATIONAL AND REGIONAL CONFERENCES INCLUDING ARTS EDUCATION

PARTNERSHIP (AEP) AND NATIONAL ASSOCIATION FOR MUSIC EDUCATION (NAFME)

EASTERN REGION CONFERENCE.

Name of the organization SAVE THE MUSIC FOUNDATION Employer identification number **-**9816

PROFESSIONAL DEVELOPMENT

THE FOUNDATION AND THEIR MANUFACTURING PARTNERS PRESENT HALF-DAY

PROFESSIONAL DEVELOPMENT WORKSHOPS FOR THE MUSIC TEACHERS IN ALL ACTIVE

GRANTEE SCHOOL DISTRICTS. THE CLINICS ARE PLANNED AND TAILORED TO EACH

SCHOOL'S DISTRICTS INDIVIDUAL NEEDS.

HONORS

THE FOUNDATION HONORS IN FRONT OF THOUSANDS OF SCHOOL DISTRICT LEADERS

AND ADMINISTRATORS FROM AROUND THE COUNTRY THOSE SCHOOL DISTRICT

OFFICIALS WHO HAVE BEEN SUPPORTIVE OF MUSIC EDUCATION AT AASA'S ANNUAL

NATIONAL CONFERENCE.

PRINCIPAL'S GUIDE

THE FOUNDATION HAS DEVELOPED A BUILDING YOUR INSTRUMENTAL MUSIC PROGRAM

BOOKLET THAT PROVIDES INFORMATION TO PRINCIPALS ON GETTING STARTED,

NEXT STEPS, STANDARDS, RESEARCH, AND OTHER SOURCES FOR ADDITIONAL

INFORMATION. EVERY NEW PRINCIPAL IN OUR NETWORK IS PROVIDED A COPY OF

THE GUIDE.

CONVENINGS

A CONVENING IS AN EVENT OVER THE COURSE OF ONE TO THREE DAYS WHERE

STAKEHOLDERS, SPEAKERS, AND SPECIAL GUESTS ARE GATHERED TOGETHER TO

DISCUSS THE FUTURE OF MUSIC EDUCATION IN THEIR COMMUNITY. STAKEHOLDERS

INCLUDE PUBLIC SCHOOL EDUCATORS, LOCAL COMMUNITY MUSIC PROGRAMS,

FOUNDATIONS AND NATIONAL FUNDERS, CITY LEADERS, CULTURAL INSTITUTIONS,

ARTS SERVICE ORGANIZATIONS, UNIVERSITIES, AND LOCAL MUSICIANS.

STAKEHOLDERS BUILD RELATIONSHIPS AND NETWORKS, SHARING RESOURCES AND

COMMITTING TO A SHARED VISION OF STRENGTHENING MUSIC EDUCATION IN THEIR

Name of the organization **Employer** identification number **-***9816 SAVE THE MUSIC FOUNDATION COMMUNITY. IN 2020, CONVENINGS WERE CANCELLED DUE TO COVID-19 PRECAUTIONS. FORM 990, PART III, LINE 4A (CONTINUATION): SOCIAL COMMUNICATIONS THE FOUNDATION SHARES GRANT RECIPIENT UPDATES AND STORIES IMPACT ON SOCIAL MEDIA PLATFORMS AND IN EMAIL COMMUNICATIONS WITH FOUNDATION STAKEHOLDERS. STORIES INCLUDE INTERVIEWS WITH STUDENTS, TEACHERS, AND PRINCIPALS, PICTURES AND VIDEOS OF STUDENTS PLAYING INSTRUMENTS IN THE CLASSROOM OR IN PERFORMANCE, AND EVENTS THAT OCCUR AROUND THE FOUNDATION'S INVESTMENT OF INSTRUMENTS AT A SCHOOL. IN THESE COMMUNICATIONS, FUNDERS AND PARTNERS ARE OFTEN ACKNOWLEDGED AS WELL AS THE DISTRICT'S CONTINUED SUPPORT OF MUSIC EDUCATION IN THEIR COMMUNITY. SHARING STORIES OF IMPACT SHOWS THE FOUNDATION'S CONSTANT RELATIONSHIP WITH ITS GRANT RECIPIENT SCHOOLS AND ADVOCATES FOR CONTINUED MUSIC EDUCATION IN PUBLIC SCHOOLS. SOCIAL COMMUNICATIONS ALSO INCLUDE RESEARCH ON HOW MUSIC EDUCATION POSITIVELY IMPACTS CHILDREN AND SUPPORT FOR MUSIC EDUCATION FROM MUSICAL ARTISTS, COMMUNITY LEADERS, AND LOCAL OR STATE LAWMAKERS. THE PROGRAM TEAM HAS TAKEN ACTION IN RESPONSE TO SCHOOL BUILDING CLOSURES DURING THE COVID-19 PANDEMIC. ALL SAVE THE MUSIC PARTNER SCHOOLS EXPERIENCED AT LEAST A MODERATE CHANGE IN LEARNING ENVIRONMENT, FOR EXAMPLE, VIRTUAL CLASSROOMS AND ASYNCHRONOUS LEARNING. ONLINE TEACHING & LEARNING RESOURCES IN MARCH 2020, THE FOUNDATION'S MUSIC EDUCATION RESOURCES PAGE ON THE SAVE THE MUSIC WEBSITE SIGNIFICANTLY EXPANDED LISTING OVER 100

Schedule O (Form 990 or 990-EZ) 2020 Name of the organization **Employer** identification number **-***9816 SAVE THE MUSIC FOUNDATION RESOURCES, INCLUDING ADVOCACY ORGANIZATIONS, DIGITAL CURRICULUM AND LESSONS, FREE MUSIC CLASSROOM APPS AND SOFTWARE, AND VIRTUAL CONCERTS AND TOURS OFFERED BY WORLD-RENOWN CULTURAL INSTITUTIONS. IN AUGUST 2020, THE MUSIC EDUCATION RESOURCES PAGE WAS RE-LAUNCHED WITH A NEW, USER-FRIENDLY DESIGN. AS OF DECEMBER 31, 2020, THIS PAGE AND SUB-PAGES ON THE WEBSITE HAVE BEEN EXTENSIVELY CURATED TO INCLUDE NEARLY 200 DIGITAL TOOLS FOR EDUCATORS, STUDENTS, AND PARENTS. EMAIL COMMUNICATIONS AND SOCIAL MEDIA HAVE BEEN USED TO PROMOTE THIS PAGE. VIRTUAL GATHERINGS FROM LATE MARCH TO EARLY JUNE 2020, SAVE THE MUSIC PROGRAM AND POLICY STAFF MEMBERS CONDUCTED OVER THIRTY VIDEO CONFERENCE CALLS WITH SCHOOL DISTRICT MUSIC COORDINATORS, MUSIC EDUCATORS, AND STUDENTS, ALL WHO HAD RECEIVED A SAVE THE MUSIC GRANT. ADMINISTRATORS AND TEACHERS WHO WERE INVITED TO PARTICIPATE TO SHARE CHALLENGES, SUCCESSES, CURRICULUM IDEAS, AND EDUCATION POLICY AS A GROUP. SAVE THE MUSIC HOSTED GUESTS FROM PARTNER ORGANIZATIONS TO PRESENT DURING THE CALLS TO SHARE THEIR EXPERTISE WITH PARTICIPANTS. FELLOW EDUCATORS SHARED THEIR OWN TALENTS WITH VIRTUAL CLASSROOMS IN PEER-TO-PEER LEARNING SESSIONS. THE J DILLA MUSIC TECH GRANT TEACHERS AND STUDENTS GATHERED TO HEAR FROM INDUSTRY PROFESSIONALS AND ARTISTS ABOUT THEIR CAREER PATHWAYS AND CURRENT JOB ROLES. THESE GATHERINGS SERVED AS WORKFORCE DEVELOPMENT SESSIONS AND ENGAGING ACTIVITIES FOR STUDENTS WHILE THEY WERE LEARNING FROM HOME. SAVE THE MUSIC'S VIRTUAL GATHERINGS EVOLVED INTO A FORMAL, SCHEDULED SERIES OF MASTER CLASSES BY AUGUST 2020 AS A RESPONSE TO THE

DISTRICT ARTS LEADERS VIDEO CALLS AT LEAST ONCE PER MONTH GATHER

CONTINUATION OF VIRTUAL INSTRUCTION INTO A NEW SCHOOL YEAR.

Name of the organization **Employer** identification number **-***9816 SAVE THE MUSIC FOUNDATION MUSIC COORDINATORS WHO HAVE RECEIVED A SAVE THE MUSIC GRANT. PARTICIPANTS EXCHANGE IDEAS AND ADVICE WITH EACH OTHER AND ALSO HEAR FROM EXPERTS IN THE NATIONAL EDUCATION POLICY AND ADVOCACY FIELD. MUSIC TEACHERS MASTERCLASS - A SERIES OF PROFESSIONAL DEVELOPMENT WORKSHOPS HELD ONCE A MONTH FEATURING SPECIAL GUEST PRESENTERS. THESE SESSIONS ARE OPEN TO ALL MUSIC EDUCATORS. MUSIC INDUSTRY MASTERCLASS - MUSIC TECH STUDENTS AND TEACHERS GATHER ONCE A MONTH TO HEAR FROM PROFESSIONALS AND ARTISTS TO SHOW THE MANY, MULTI-FACETED JOBS IN THE MUSIC INDUSTRY. MASTERCLASS DONATION MASTERCLASS IS THE ONLINE STREAMING PLATFORM THAT MAKES IT POSSIBLE FOR ANYONE TO WATCH OR LISTEN TO HUNDREDS OF VIDEO LESSONS TAUGHT BY 100+ OF THE WORLD'S BEST. IN MARCH OF 2020, A REPRESENTATIVE FROM MASTERCLASS CONTACTED THE FOUNDATION TO DONATE FREE, ONE-YEAR SUBSCRIPTION PASSES TO THE PLATFORM IN AN EFFORT TO EXTEND DIGITAL LEARNING TO THE EDUCATION COMMUNITY. IN APRIL, MAY, AND JUNE OF 2020, THE FOUNDATION GIFTED PASSES TO PARTNER EDUCATORS AND ADMINISTRATORS, PARTNER ORGANIZATIONS WITH SIMILAR MISSIONS TO THE FOUNDATION, AND EDUCATION ADVOCATES. PASS RECIPIENTS WERE ENCOURAGED TO USE A PASS TO BENEFIT THEIR OWN AT-HOME LEARNING BUT, MORE IMPORTANTLY, GIFT PASSES TO STUDENTS (OF HIGH SCHOOL AGE OR OLDER) IN THEIR DISTRICT. WEST MUSIC PARTNERSHIP FOR THE 2020-2021 SCHOOL YEAR, SAVE THE MUSIC HAS PARTNERED WITH WEST MUSIC TO PROVIDE PROFESSIONAL DEVELOPMENT WORKSHOPS FOR THREE SCHOOL

DISTRICTS WHO HAVE RECEIVED SAVE THE MUSIC GRANTS. ONCE TO TWICE A

MONTH, AN EXPERT IN MUSIC EDUCATION PRESENTS TO MUSIC TEACHERS SUCH

Name of the organization
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TOPICS AS INSTRUMENT PEDAGOGY AND LITERATURE IN THE MUSIC CLASSROOM.

THE WORKSHOPS ARE FREE OF CHARGE FOR THE SCHOOL DISTRICTS.

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

AMY DOYLE, CO-CHAIRPERSON, CHRIS MCCARTHY, CHAIRPERSON, HENRY DONAHUE,

EXECUTIVE DIRECTOR/ASSISTANT SECRETARY, AND BRIANNA CAYO COTTER, DIRECTOR,

HAVE A BUSINESS RELATIONSHIP.

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

PROCESS USED BY THE FOUNDATION TO REVIEW 990 - IRS FORM 990 IS PREPARED BY

OUTSIDE AUDITORS' TAX DEPARTMENT. IT IS SENT TO EXECUTIVE DIRECTOR AND

FINANCIAL PROFESSIONAL TO REVIEW AND THEN SENT TO THE AUDIT COMMITTEE FOR

THEIR REVIEW. AUDIT COMMITTEE MEETS AND APPROVES DRAFT 990. AFTER THE

AUDIT COMMITTEE APPROVES DRAFT 990, THE DRAFT 990 IS SENT TO FULL BOARD FOR

THEIR REVIEW. IF THERE ARE NO CORRECTIONS FROM THE BOARD, EXECUTIVE

DIRECTOR SIGNS AND 990 IS FILED.

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

MONITORING AND ENFORCING COMPLIANCE WITH CONFLICT OF INTEREST POLICY CONFLICT OF INTEREST POLICY STATEMENTS ARE REQUESTED FROM EACH MEMBER OF
THE BOARD OF DIRECTORS ANNUALLY. CONFLICT OF INTEREST POLICY STATEMENTS ARE
DISTRIBUTED WITH BOARD PACKETS AND AT EACH BOARD MEETING. REMINDERS ARE
SENT TO BOARD MEMBERS WHO HAVE NOT SUBMITTED A COMPLETED CONFLICT OF
INTEREST STATEMENT. STATEMENTS ARE REVIEWED TO KNOW AND ADDRESS ISSUES
REGARDING FAMILY AND BUSINESS RELATIONSHIPS. SAVE THE MUSIC FOUNDATION HAD
NO KNOWN CONFLICT OF INTEREST ISSUES THAT NEEDED TO DEAL WITH IN THE FISCAL
YEAR ENDED DECEMBER 31, 2020.

FORM 990, PART VI, SECTION B, LINE 15:

THE EXECUTIVE COMMITTEE OF THE SAVE THE MUSIC FOUNDATION (THE "COMMITTEE")

IS RESPONSIBLE FOR GOVERNANCE AND OVERSIGHT OF THE COMPENSATION AND

BENEFITS PROGRAMS FOR EXECUTIVE LEVEL STAFF (INCLUDING THE SENIOR DIRECTOR

OF GROWTH AND PARTNERSHIPS, THE SENIOR DIRECTOR OF PROGRAMS & POLICY, AND

THE SENIOR DIRECTOR OF DEVELOPMENT) AND ENSURING THAT THE COMPENSATION

POLICIES OF THE SAVE THE MUSIC FOUNDATION ARE CONSISTENT WITH AND IN

SUPPORT OF THE ORGANIZATION'S MISSION, VALUES AND GOALS.

THE INTENT OF THE COMMITTEE IS TO PROVIDE A COMPETITIVE TOTAL COMPENSATION

PROGRAM FOR EXECUTIVES THAT PROMOTES THE ORGANIZATION'S LONG-TERM STRATEGIC

OBJECTIVES, AND IS REASONABLE, APPROPRIATE, AND FAIR.

DETERMINE THE COMPENSATION OF THE KEY EMPLOYEES. THE COMMITTEE IS PROVIDED WITH COMPARABLE SALARY FOR SIMILAR POSITION IN SIMILAR SIZE AND TYPE

ORGANIZATIONS. THE EXECUTIVE DIRECTOR OR HIS DESIGNEE CONDUCTS AN ONGOING GOAL-SETTING AND PERFORMANCE MANAGEMENT PROCESS FOR KEY

THE COMMITTEE INCLUDES AT LEAST THREE INDEPENDENT BOARD MEMBERS THAT

EMPLOYEES. THE OUTCOME OF THIS PROCESS IS SHARED WITH THE COMMITTEE. THE

COMMITTEE IS ALSO PROVIDED OVERALL QUALIFICATIONS, SKILLS, EXPERIENCE,

OVERALL ACHIEVEMENTS TO THE ORGANIZATION, AND TENURE AT THE ORGANIZATION

FOR EACH EXECUTIVE. THE COMMITTEE MAKES THEIR DECISIONS ABOUT COMPENSATION

AND DOCUMENTS ITS DECISION IN THE COMMITTEE MEETING MINUTES. KEY EMPLOYEES

COMPENSATION IS THEN RATIFIED BY THE BOARD AS PART OF THE ORGANIZATION'S

ANNUAL BUDGET DURING EXECUTIVE SESSION OF A BOARD MEETING WITH QUORUM

PRESENT.

THE EXECUTIVE DIRECTOR OF THE SAVE THE MUSIC FOUNDATION IS AN EMPLOYEE OF MTV NETWORKS

(MTVN). HIS OR HER TIME AND SERVICES ARE CONTRIBUTED TO THE ORGANIZATION

Name of the organization SAVE THE MUSIC FOUNDATION	Employer identification number **-***9816
AS PART OF A SERVICES AGREEMENT BETWEEN SAVE THE MUSIC AND	MTVN, AND
COMPENSATION AND BENEFITS ARE SET AT THE VICE PRESIDENT LE	VEL FOR MTVN
EMPLOYEES.	
FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY	OF FORM 990:
AK, AR, AZ, CA, CT, DC, FL, GA, HI, IL, KS, KY, MA, MD, ME, MI, MN, MS, NH, N	J,NM,NY,NC,ND,OH
OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI	
FORM 990, PART VI, SECTION C, LINE 19:	
AVAILABILITY OF INFORMATION TO PUBLIC - AUDITED FINANCIAL	STATEMENTS ARE
AVAILABLE ON FOUNDATION'S WEBSITE. THE FOUNDATION'S GOVERN	ING DOCUMENTS,
CONFLICT OF INTERST POLICY, AND FINANCIAL STATEMENTS ARE A	VAILABLE TO THE
PUBLIC BY REQUEST.	
FORM 990, PART VII	
UNRELATED THIRD PARTY VIACOMCBS PAYS THE COMPENSATION OF H	ENRY DONAHUE,
EXECUTIVE DIRECTOR. THIS MEETS THE TAXABLE ORGANIZATION E	MPLOYEE
EXCEPTION AND IS NOT REQUIRED TO BE REPORTED ON PART VII.	
FORM 990, PART XII, LINE 2C:	
THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.	