#### \*\* PUBLIC DISCLOSURE COPY \*\*

132001 12-09-21

**Return of Organization Exempt From Income Tax** 

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

| Α             | For th            | e 2021 calendar year, or tax year beginning and e                                                           | ending        |                              |                                    |                          |  |
|---------------|-------------------|-------------------------------------------------------------------------------------------------------------|---------------|------------------------------|------------------------------------|--------------------------|--|
| В             | Check if applicab | C Name of organization                                                                                      |               | D Employer identifi          | cation number                      |                          |  |
|               | Addre             | SAVE THE MUSIC FOUNDATION                                                                                   |               |                              |                                    |                          |  |
|               | Name              | THE CAME THE MICTO POINT ATT                                                                                | 13-60898      | 16                           |                                    |                          |  |
|               | Initial<br>return |                                                                                                             | Room/suite    | E Telephone numbe            |                                    |                          |  |
|               | Final<br>return   | 1515 RPOADWAY 21CT FLOOP                                                                                    | 212-846-      |                              |                                    |                          |  |
|               | termi             |                                                                                                             |               | G Gross receipts \$          | 8,299,93                           | <del>1.</del>            |  |
|               | Amer<br>return    | ded NEW YORK NY 10036                                                                                       |               | H(a) Is this a group re      |                                    |                          |  |
|               | Appli<br>tion     | F Name and address of principal officer: HENRY DONAHUE                                                      |               | for subordinates             |                                    | No                       |  |
|               | pendi             | <sup>ng</sup> SAME AS C ABOVE                                                                               |               | H(b) Are all subordinates in |                                    | No                       |  |
| <u></u>       | Tax-ex            | empt status: X 501(c)(3) 501(c) ( ) ◀ (insert no.) 4947(a)(1) or                                            | r 527         | If "No," attach a            | list. See instructions             |                          |  |
| J             | Websi             | te: ► WWW.SAVETHEMUSIC.ORG                                                                                  |               | H(c) Group exemption         | n number 🕨                         |                          |  |
|               |                   | forganization: X Corporation Trust Association Other                                                        | <b>L</b> Year | of formation: 1955           | <b>VI</b> State of legal domicile: | <u>NY</u>                |  |
| Р             | art I             | Summary                                                                                                     |               |                              |                                    |                          |  |
| a             | 1                 | Briefly describe the organization's mission or most significant activities: SAVE                            |               |                              |                                    |                          |  |
| Š             | <u> </u>          | MISSION IS TO HELP STUDENTS, SCHOOLS, AND                                                                   |               |                              |                                    |                          |  |
| Governance    | 2                 | Check this box if the organization discontinued its operations or dispose                                   | ed of more    |                              |                                    |                          |  |
| Š             | 3                 |                                                                                                             |               | 3                            |                                    | 21                       |  |
| و             | 8 4               | Number of independent voting members of the governing body (Part VI, line 1b) $$                            |               |                              |                                    | 21                       |  |
| 9             | <u>s</u> 5        | Total number of individuals employed in calendar year 2021 (Part V, line 2a)                                |               |                              |                                    | 17<br>67                 |  |
| Activities &  | 6                 | Total number of volunteers (estimate if necessary)                                                          |               |                              |                                    |                          |  |
| 2             | 7 a<br>د ا        | Total unrelated business revenue from Part VIII, column (C), line 12                                        |               |                              |                                    | 0 <b>.</b><br>0 <b>.</b> |  |
| _             | l p               | Net unrelated business taxable income from Form 990-T, Part I, line 11                                      |               |                              |                                    | <i>J</i> •               |  |
| 4             |                   | Contributions and grants (Part VIII line 1b)                                                                |               | Prior Year<br>3,748,468.     | Current Year 8,201,721             | 1                        |  |
|               | 8 9               | Contributions and grants (Part VIII, line 1h)  Program service revenue (Part VIII, line 2g)                 |               | 0.                           |                                    | 0.                       |  |
| Beyonia       | 10                | Program service revenue (Part VIII, line 2g)  Investment income (Part VIII, column (A), lines 3, 4, and 7d) |               | 0.                           |                                    | 0.                       |  |
| ď             | 11                | Other revenue (Part VIII, column (A), lines 5, 4, and 70)                                                   |               | 8,874.                       |                                    |                          |  |
|               | 12                | Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)                          |               | 3,757,342.                   |                                    |                          |  |
| _             | 13                | Grants and similar amounts paid (Part IX, column (A), lines 1-3)                                            |               | 1,562,716.                   |                                    |                          |  |
|               | 14                | Benefits paid to or for members (Part IX, column (A), line 4)                                               |               | 0.                           | 1                                  | 0.                       |  |
| u             | 15                | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)                           |               | 963,827.                     | 1,160,01                           | 5.                       |  |
| Fynancae      | i<br>2   16a      | Professional fundraising fees (Part IX, column (A), line 11e)                                               |               | 0.                           |                                    |                          |  |
| ٥             | <u> </u>          | Total fundraising expenses (Part IX, column (D), line 25)   743,65                                          |               |                              |                                    |                          |  |
| Ú             | 17                | Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)                                                |               | 521,509.                     |                                    | 1.                       |  |
|               | 18                | Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)                                   |               | 3,048,052.                   |                                    |                          |  |
| _             | 19                | Revenue less expenses. Subtract line 18 from line 12                                                        |               | 709,290.                     | 3,022,91                           | <u>6 .</u>               |  |
| Net Assets or | ces               |                                                                                                             | Ве            | ginning of Current Year      | End of Year                        |                          |  |
| set           | [ 20              | Total assets (Part X, line 16)                                                                              |               | 1,902,699.                   | 5,156,663                          |                          |  |
| at As         | ਤੂੰ <b>21</b>     | Total liabilities (Part X, line 26)                                                                         |               | 156,941.                     | 387,988                            |                          |  |
| Ž             | 7 22              | Net assets or fund balances. Subtract line 21 from line 20                                                  |               | 1,745,758.                   | 4,768,67                           | <u>1.</u>                |  |
|               | art II            | Signature Block                                                                                             |               |                              | The second state of the Port State |                          |  |
|               |                   | alties of perjury, I declare that I have examined this return, including accompanying schedules a           |               |                              | y knowledge and beliet, it i       | S                        |  |
| tru           | e, corre          | ct, and complete. Declaration of preparer (other than officer) is based on all information of which         | cii preparer  |                              | ıy 5, 2022                         |                          |  |
| o:,           |                   | Signature of officer                                                                                        |               | Date                         | iy 5, 2022                         |                          |  |
| Sig           |                   | HENRY DONAHUE, EXEC DIR/VP                                                                                  |               |                              |                                    |                          |  |
| He            | i e               | Type or print name and title                                                                                |               |                              |                                    |                          |  |
| _             |                   | Print/Type preparer's name Preparer's signature                                                             | 1             | Date Check                   | PTIN                               |                          |  |
| Pai           | id                | MAGDALENA M. CZERNIAWSKI, MAGDALENA M. CZE                                                                  |               | 5/03/22 if self-employ       |                                    |                          |  |
|               | eparer            | Firm's name CBIZ MARKS PANETH LLC                                                                           |               |                              | 87-3707167                         |                          |  |
|               | e Only            | Firm's address 685 THIRD AVENUE                                                                             |               | THITSLIN                     |                                    |                          |  |
| -             | - •               | NEW YORK, NY 10017                                                                                          |               | Phone no. 21                 | 2-503-8800                         |                          |  |
| Ma            | ay the I          | RS discuss this return with the preparer shown above? See instructions                                      |               |                              | 77                                 | No                       |  |
| $\overline{}$ |                   |                                                                                                             |               |                              |                                    |                          |  |

| Pai | statement of Program Service Accomplishments                                                                                                 |
|-----|----------------------------------------------------------------------------------------------------------------------------------------------|
|     | Check if Schedule O contains a response or note to any line in this Part III                                                                 |
| 1   | Briefly describe the organization's mission:                                                                                                 |
|     | SAVE THE MUSIC FOUNDATION HELPS KIDS, SCHOOLS, AND COMMUNITIES REACH                                                                         |
|     | THEIR FULL POTENTIAL THROUGH THE POWER OF MAKING MUSIC.                                                                                      |
|     |                                                                                                                                              |
|     |                                                                                                                                              |
| 2   | Did the organization undertake any significant program services during the year which were not listed on the                                 |
|     | prior Form 990 or 990-EZ?                                                                                                                    |
|     | If "Yes," describe these new services on Schedule O.                                                                                         |
| 3   | Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No                        |
|     | 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 |
|     | revenue, if any, for each program service reported.                                                                                          |
| 4a  | (Code:) (Expenses \$ 4,251,447. including grants of \$ 3,388,283. ) (Revenue \$)                                                             |
|     | SAVE THE MUSIC FOUNDATION ("FOUNDATION") IS A 501(C)(3) NONPROFIT                                                                            |
|     | ORGANIZATION DEDICATED TO CREATING SYSTEMIC CHANGE IN THE AMERICAN                                                                           |
|     | PUBLIC SCHOOL SYSTEM BY RESTORING INSTRUMENTAL MUSIC PROGRAMS AND BY                                                                         |
|     | RAISING PUBLIC AWARENESS ABOUT THE IMPORTANCE OF MUSIC EDUCATION. THE                                                                        |
|     | FOUNDATION WAS CREATED TO ADDRESS THE INEQUITY IN AVAILABILITY OF MUSIC                                                                      |
|     | 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 2,290 PUBLIC SCHOOLS IN 286 SCHOOL DISTRICTS AROUND THE                                                                            |
|     | COUNTRY, IMPACTING THE LIVES OF HUNDREDS OF THOUSANDS OF STUDENTS.                                                                           |
|     | DURING THAT TIME, THE FOUNDATION HAS DONATED OVER \$63 MILLION WORTH OF                                                                      |
|     | NEW MUSICAL INSTRUMENTS, EQUIPMENT, AND TECHNOLOGY TO SCHOOL DISTRICTS                                                                       |
| 4b  | (Code:) (Expenses \$                                                                                                                         |
|     |                                                                                                                                              |
|     |                                                                                                                                              |
|     |                                                                                                                                              |
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|     |                                                                                                                                              |
|     |                                                                                                                                              |
|     |                                                                                                                                              |
|     |                                                                                                                                              |
| 4c  | (Code:) (Expenses \$ including grants of \$) (Revenue \$)                                                                                    |
|     |                                                                                                                                              |
|     |                                                                                                                                              |
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|     |                                                                                                                                              |
|     |                                                                                                                                              |
|     |                                                                                                                                              |
|     |                                                                                                                                              |
| 4d  | Other program services (Describe on Schedule O.)                                                                                             |
|     | (Expenses \$ including grants of \$ ) (Revenue \$ )                                                                                          |
| 4e  | Total program service expenses ► 4,251,447.                                                                                                  |

# Form 990 (2021) 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? See instructions                                                                                                                                                                        | 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                                                                                                                                           |         |     |          |
|     | similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III                                                                                                                                                                                | 5       |     | X        |
| 6   | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to                                                                                                                                              |         |     |          |
|     | provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I                                                                                                                                           | 6       |     | X        |
| 7   | Did the organization receive or hold a conservation easement, including easements to preserve open space,                                                                                                                                                              |         |     |          |
|     | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II                                                                                                                                                                   | 7       |     | X        |
| 8   | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete                                                                                                                                           |         |     |          |
|     | Schedule D, Part III                                                                                                                                                                                                                                                   | 8       |     | X        |
| 9   | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for                                                                                                                                          |         |     |          |
|     | amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?                                                                                                                                              |         |     |          |
|     | 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                                                                                                                                                           |         |     |          |
|     | or in quasi endowments?  f "Yes," complete Schedule D, Part V                                                                                                                                                                                                          | 10      |     | X        |
| 11  | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,                                                                                                                                      |         |     |          |
|     | as applicable.                                                                                                                                                                                                                                                         |         |     |          |
| а   | in resp. complete constants by                                                                                                                                                                                                                                         |         |     |          |
|     | Part VI                                                                                                                                                                                                                                                                | 11a     | X   |          |
| b   | Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total                                                                                                                                           |         |     |          |
|     | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII                                                                                                                                                                                            | 11b     |     | X        |
| С   | Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total                                                                                                                                            |         |     | 37       |
|     | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII                                                                                                                                                                                           | 11c     |     | <u> </u> |
| d   |                                                                                                                                                                                                                                                                        |         |     | - V      |
|     | Part X, line 16? If "Yes," complete Schedule D, Part IX                                                                                                                                                                                                                | 11d     |     | X        |
| e   | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X                                                                                                                                                  | 11e     |     | <u> </u> |
| f   | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses                                                                                                                                                |         | Х   |          |
| 100 | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," <i>complete</i> | 11f     |     |          |
| ıza |                                                                                                                                                                                                                                                                        | 12a     | Х   |          |
| h   | Schedule D, Parts XI and XII  Was the organization included in consolidated, independent audited financial statements for the tax year?                                                                                                                                | 120     |     |          |
| b   | If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional                                                                                                                                                  | 12b     |     | x        |
| 13  | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E                                                                                                                                                                      | 13      |     | X        |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States?                                                                                                                                                                            | 14a     |     | X        |
| b   |                                                                                                                                                                                                                                                                        | · · · · |     |          |
| ~   | investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000                                                                                                                                             |         |     |          |
|     | or more? If "Yes," complete Schedule F, Parts I and IV                                                                                                                                                                                                                 | 14b     |     | х        |
| 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      |     | Х        |
| 16  | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to                                                                                                                                               |         |     |          |
|     | or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV                                                                                                                                                                                            | 16      |     | _ X      |
| 17  | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,                                                                                                                                                |         |     |          |
|     | column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions                                                                                                                                                                                   | 17      |     | X        |
| 18  | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines                                                                                                                                           |         |     |          |
|     | 1c and 8a? If "Yes," complete Schedule G, Part II                                                                                                                                                                                                                      | 18      | X   |          |
| 19  | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"                                                                                                                                                 |         |     |          |
|     | complete Schedule G, Part III                                                                                                                                                                                                                                          | 19      |     | X        |
|     | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H                                                                                                                                                                            | 20a     |     | X        |
|     | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?                                                                                                                                                           | 20b     |     |          |
| 21  | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or                                                                                                                                                            |         | 77  |          |
|     | domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II                                                                                                                                                                      | 21      | X   |          |

Form 990 (2021) 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   |          |
| <b>2</b> 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                                                                                                              |     |     |          |
|             | 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                                                                                                            |     |     |          |
|             | any tax-exempt bonds?                                                                                                                                                                                                           | 24c |     |          |
|             | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?                                                                                                                         | 24d |     | _        |
| 25a         | Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit                                                                                                                    |     |     | X        |
|             | transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I                                                                                                                                   | 25a |     |          |
| b           | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and                                                                                                      |     |     |          |
|             | that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete                                                                                                           | OEL |     | x        |
| 00          | Schedule L, Part I                                                                                                                                                                                                              | 25b |     |          |
| 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%                                                                                                                         | 06  |     | x        |
| 27          | controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II  Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, | 26  |     | 25       |
| 21          | 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? <i>If</i> "Yes," complete Schedule L, Part III                                                                                                 | 27  |     | X        |
| 28          | Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,                                                                                                          | 1   |     |          |
|             | instructions for applicable filing thresholds, conditions, and exceptions):                                                                                                                                                     |     |     |          |
| а           | A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>                                                                                                         |     |     |          |
| -           | "Yes," complete Schedule L, Part IV                                                                                                                                                                                             | 28a |     | x        |
| b           | A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV                                                                                                                                 | 28b |     | X        |
|             | A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If</i>                                                                                                                 |     |     |          |
| _           | "Yes," complete Schedule L, Part IV                                                                                                                                                                                             | 28c |     | x        |
| 29          | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M                                                                                                                        | 29  | Х   |          |
| 30          | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation                                                                                                     |     |     |          |
|             | contributions? If "Yes," complete Schedule M                                                                                                                                                                                    | 30  |     | Х        |
| 31          | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I                                                                                                              | 31  |     | Х        |
| 32          | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete                                                                                                                |     |     |          |
|             | Schedule N, Part II                                                                                                                                                                                                             | 32  |     | X        |
| 33          | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations                                                                                                                      |     |     |          |
|             | sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I                                                                                                                                                       | 33  |     | X        |
| 34          | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and                                                                                                       |     |     |          |
|             | Part V, line 1                                                                                                                                                                                                                  | 34  |     | X        |
| 35 a        | Did the organization have a controlled entity within the meaning of section 512(b)(13)?                                                                                                                                         | 35a |     | X        |
| b           | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity                                                                                                       |     |     |          |
|             | within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2                                                                                                                                         | 35b |     |          |
| 36          | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?                                                                                                      |     |     | l        |
|             | 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                                                                                                                |     |     |          |
|             | and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI                                                                                                                    | 37  |     | X        |
| 38          | Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?                                                                                                                  |     | 37  |          |
| Pai         | Note: All Form 990 filers are required to complete Schedule O  Statements Regarding Other IRS Filings and Tax Compliance                                                                                                        | 38  | X   | <u> </u> |
| ·a          |                                                                                                                                                                                                                                 |     |     |          |
|             | Check if Schedule O contains a response or note to any line in this Part V                                                                                                                                                      |     | V   |          |
| 4-          | Enter the number reported in box 3 of Form 1096, Enter -0- if not applicable                                                                                                                                                    |     | Yes | No       |
| _           |                                                                                                                                                                                                                                 |     |     |          |
| b           | Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable                                                                                                                                                 |     |     |          |
| U           | (gambling) winnings to prize winners?                                                                                                                                                                                           | 1c  | Х   |          |
|             | O3 F                                                                                                                                                                                                                            |     | 000 |          |

Form 990 (2021) 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                                                                                                                                                                                   |            |     |    |
| b        | If at least one is reported on line 2a, did the organization file all required federal employment tax returns?                                                                                                                                                      | 2b         | Х   |    |
|          | Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.                                                                                                                                                           |            |     |    |
| За       | Did the organization have unrelated business gross income of \$1,000 or more during the year?                                                                                                                                                                       | <b>3</b> a |     | 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         |     |    |
|          | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a                                                                                                                                           |            |     |    |
|          | financial account in a foreign country (such as a bank account, securities account, or other financial account)?                                                                                                                                                    | 4a         |     | Х  |
| b        | If "Yes," enter the name of the foreign country                                                                                                                                                                                                                     |            |     |    |
|          | See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).                                                                                                                                                 |            |     |    |
| 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 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 provided to the payor?                                                                                                                     | 7a         | X   |    |
| b        | If "Yes," did the organization notify the donor of the value of the goods or services provided?                                                                                                                                                                     | 7b         | Х   |    |
| 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                                                                                                                                                                                                   |            |     | 37 |
| e        | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?                                                                                                                                                     | 7e         |     | X  |
| t<br>-   | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?                                                                                                                                                        | 7f         |     |    |
| g        | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | 7g<br>7h   |     |    |
| н<br>8   | Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the                                                                                                                                                                | /11        |     |    |
| Ü        | sponsoring organization have excess business holdings at any time during the year?                                                                                                                                                                                  | 8          |     |    |
| 9        | Sponsoring organizations maintaining donor advised funds.                                                                                                                                                                                                           |            |     |    |
| a        | Did the sponsoring organization make any taxable distributions under section 4966?                                                                                                                                                                                  | 9a         |     |    |
| b        | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?                                                                                                                                                                   | 9b         |     |    |
| 10       | Section 501(c)(7) organizations. Enter:                                                                                                                                                                                                                             |            |     |    |
| а        | Initiation fees and capital contributions included on Part VIII, line 12                                                                                                                                                                                            |            |     |    |
| b        | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities                                                                                                                                                                         |            |     |    |
| 11       | Section 501(c)(12) organizations. Enter:                                                                                                                                                                                                                            |            |     |    |
| а        | Gross income from members or shareholders 11a                                                                                                                                                                                                                       |            |     |    |
| b        | Gross income from other sources. (Do not net amounts due or paid to other sources against                                                                                                                                                                           |            |     |    |
|          | amounts due or received from them.)                                                                                                                                                                                                                                 |            |     |    |
|          | 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                                                                                                                                                                               |            |     |    |
| 13       | Section 501(c)(29) qualified nonprofit health insurance issuers.                                                                                                                                                                                                    | 40         |     |    |
| а        | Is the organization licensed to issue qualified health plans in more than one state?                                                                                                                                                                                | 13a        |     |    |
| <b>L</b> | <b>Note:</b> See the instructions for additional information the organization must report on Schedule O.  Enter the amount of reserves the organization is required to maintain by the states in which the                                                          |            |     |    |
| D        | organization is licensed to issue qualified health plans                                                                                                                                                                                                            |            |     |    |
| c        |                                                                                                                                                                                                                                                                     |            |     |    |
|          | Enter the amount of reserves on hand  Did the organization receive any payments for indoor tanning services during the tax year?                                                                                                                                    | 14a        |     | Х  |
|          | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O                                                                                                                                                           | 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 the instructions and file Form 4720, Schedule N.                                                                                                                                                                                                      |            |     |    |
| 16       | Is the organization an educational institution subject to the section 4968 excise tax on net investment income?                                                                                                                                                     | 16         |     | Х  |
|          | If "Yes," complete Form 4720, Schedule O.                                                                                                                                                                                                                           |            |     |    |
| 17       | Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any                                                                                                                                                            |            |     |    |
|          | activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?                                                                                                                                                                   | 17         |     |    |
|          | If "Yes," complete Form 6069.                                                                                                                                                                                                                                       |            |     |    |

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 21                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |          |         |         |
|          | 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        | District the second of the sec | 6        |         | X       |
| -        | 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | _        |         |         |
| 1 a      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 70       |         | Х       |
| <b>h</b> | more members of the governing body?  Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 7a_      |         | 21      |
| D        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 76       |         | Х       |
|          | persons other than the governing body?  Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 7b       |         | 21      |
| 8        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 0-       | Х       |         |
| _        | The governing body?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 8a       | X       |         |
| b        | Each committee with authority to act on behalf of the governing body?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 8b       | Λ       |         |
| 9        | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |          |         | v       |
| 800      | 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.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |          |         |         |
|          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |          | Yes     | No<br>X |
|          | Did the organization have local chapters, branches, or affiliates?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 10a      |         |         |
| b        | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |          |         |         |
|          | and branches to ensure their operations are consistent with the organization's exempt purposes?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 10b      | 37      |         |
|          | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 11a      | X       |         |
|          | Describe on Schedule O the process, if any, used by the organization to review this Form 990.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |          | 37      |         |
|          | Did the organization have a written conflict of interest policy? If "No," go to line 13                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 12a      | X       |         |
|          | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 12b      | X       |         |
| С        | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |          | 7.7     |         |
|          | on Schedule O how this was done                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 12c      | X       |         |
| 13       | Did the organization have a written whistleblower policy?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 13       | X       |         |
| 14       | Did the organization have a written document retention and destruction policy?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 14       | X       |         |
| 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?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |          |         |         |
|          | The organization's CEO, Executive Director, or top management official                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 15a      | X       |         |
| b        | Other officers or key employees of the organization                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 15b      | X       |         |
|          | If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |          |         |         |
| 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      |         | X       |
| 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |          |         |         |
| 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | only)    | availat | ole     |
|          | 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | l 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 the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

| X Check this box if neither the organization ne | or any related        | orga                                             | niza                  | tion          | con          | npen                         | sate   | ed any current officer, di | rector, or trustee.           |                       |
|-------------------------------------------------|-----------------------|--------------------------------------------------|-----------------------|---------------|--------------|------------------------------|--------|----------------------------|-------------------------------|-----------------------|
| (A)                                             | (B)                   |                                                  |                       | _ ((          | 2)           |                              |        | (D)                        | (E)                           | (F)                   |
| Name and title                                  | Average               | (do                                              | not cl                | Pos<br>neck i |              |                              | one    | Reportable                 | Reportable                    | Estimated             |
|                                                 | hours per             |                                                  | , unles<br>cer an     |               |              |                              |        | compensation               | compensation                  | amount of             |
|                                                 | week                  |                                                  |                       |               |              | 1                            | ,      | from<br>the                | from related<br>organizations | other<br>compensation |
|                                                 | l (list any hours for | direct                                           |                       |               |              | p                            |        | organization               | (W-2/1099-MISC/               | from the              |
|                                                 | related               | ee or                                            | stee                  |               |              | nsate                        |        | (W-2/1099-MISC/            | 1099-NEC)                     | organization          |
|                                                 | organizations         | trust                                            | nal tru               |               | oyee         | ompe                         |        | 1099 NEC)                  | ,                             | and related           |
|                                                 | below                 | Individual trustee or director                   | Institutional trustee | Officer       | Key employee | Highest compensated employee | Former |                            |                               | organizations         |
| (1)                                             | line)                 | Pul                                              | Sul                   | Offi          | Key          | Hig                          | For    |                            |                               |                       |
| (1) DANIELLE ZALAZNICK                          | 50.00                 | 1                                                |                       |               | х            |                              |        | 104 006                    | 0.                            | 24 025                |
| CHIEF DEVELOPMENT OFFICER (2) CHIHO FEINDLER    | 50.00                 |                                                  |                       |               | Λ            |                              |        | 184,096.                   | 0.                            | 34,025.               |
| CHIEF PROGRAM OFFICER                           | 30.00                 | 1                                                |                       |               |              | х                            |        | 110,670.                   | 0.                            | 16,507.               |
| (3) ARIEL USATIN                                | 50.00                 |                                                  | Н                     |               |              | Δ                            |        | 110,070.                   | 0.                            | 10,307.               |
| SENIOR DIRECTOR, PHILANTHR                      | 30.00                 | 1                                                |                       |               |              | x                            |        | 109,930.                   | 0.                            | 4,883.                |
| (4) ALLEN MURABAYASHI                           | 3.00                  |                                                  |                       |               |              | 25                           |        | 100,000                    | •                             | 4,003.                |
| CO-CHAIR PERSON                                 |                       | x                                                |                       | х             |              |                              |        | 0.                         | 0.                            | 0.                    |
| (5) BRIANNA CAYO COTTER                         | 1.00                  |                                                  |                       |               |              |                              |        | -                          | -                             | -                     |
| DIRECTOR                                        |                       | х                                                |                       |               |              |                              |        | 0.                         | 0.                            | 0.                    |
| (6) CHRIS MCCARTHY                              | 0.50                  |                                                  |                       |               |              |                              |        |                            |                               |                       |
| DIRECTOR                                        |                       | Х                                                |                       |               |              |                              |        | 0.                         | 0.                            | 0.                    |
| (7) ELENA DIAZ                                  | 3.00                  |                                                  |                       |               |              |                              |        |                            |                               |                       |
| CO-CHAIR PERSON                                 |                       | X                                                |                       | X             |              |                              |        | 0.                         | 0.                            | 0.                    |
| (8) ELIZABETH WINDRAM                           | 0.50                  |                                                  |                       |               |              |                              |        |                            |                               |                       |
| DIRECTOR (OUTGOING)                             |                       | Х                                                |                       |               |              |                              |        | 0.                         | 0.                            | 0.                    |
| (9) GORDON SINGER                               | 0.50                  |                                                  |                       |               |              |                              |        | _                          | _                             | _                     |
| DIRECTOR                                        |                       | X                                                |                       |               |              |                              |        | 0.                         | 0.                            | 0.                    |
| (10) HENRY DONAHUE                              | 60.00                 | <b> </b>                                         |                       |               |              |                              |        |                            | •                             | •                     |
| E.D; ASSISTANT SECRETARY                        | 0.00                  | Х                                                |                       | X             |              |                              |        | 0.                         | 0.                            | 0.                    |
| (11) JENNIFER GRADY                             | 2.00                  | ļ ,,                                             |                       | 37            |              |                              |        |                            | 0                             | 0                     |
| DIRECTOR; TREASURER                             | 1 00                  | X                                                |                       | X             |              |                              |        | 0.                         | 0.                            | 0.                    |
| (12) KATHERINE VON JAN                          | 1.00                  |                                                  |                       |               |              |                              |        | 0.                         | 0                             | 0                     |
| DIRECTOR (13) KEVIN NG                          | 1.00                  | X                                                |                       |               |              |                              |        | 0.                         | 0.                            | 0.                    |
| DIRECTOR                                        | 1.00                  | X                                                |                       |               |              |                              |        | 0.                         | 0.                            | 0.                    |
| (14) LAURIE SCHELL                              | 2.00                  | ^                                                |                       |               |              |                              |        | 0.                         | 0.                            | <u></u>               |
| DIRECTOR; SECRETARY                             | 2.00                  | x                                                |                       | Х             |              |                              |        | 0.                         | 0.                            | 0.                    |
| (15) LESLIE FRAM                                | 0.50                  | <del>                                     </del> |                       |               |              |                              |        | · ·                        | J.                            | -                     |
| DIRECTOR                                        |                       | x                                                |                       |               |              |                              |        | 0.                         | 0.                            | 0.                    |
| (16) MARK LEITER                                | 1.50                  |                                                  |                       |               |              |                              |        |                            |                               |                       |
| DIRECTOR                                        |                       | Х                                                |                       |               |              |                              |        | 0.                         | 0.                            | 0.                    |
| (17) MICHAEL LEVINE                             | 1.50                  |                                                  |                       |               |              |                              |        |                            |                               |                       |
| DIRECTOR                                        |                       | Х                                                |                       |               |              |                              |        | 0.                         | 0.                            | 0.                    |

| Form 990 (2021) SAVE THE MUSIC FOUNDATION 13-6089816 Page 8                                    |                   |                                |                       |                |              |                                 |        |                                       |                                          |                |         |                   |
|------------------------------------------------------------------------------------------------|-------------------|--------------------------------|-----------------------|----------------|--------------|---------------------------------|--------|---------------------------------------|------------------------------------------|----------------|---------|-------------------|
| Part VII   Section A. Officers, Directors, Trust                                               | ees, Key Emp      | oloy                           | ees,                  | and            | l Hiç        | ghes                            | st C   | compensated Employee                  | s (continued)                            |                |         |                   |
| (A)                                                                                            | (B)               |                                |                       | (C             |              |                                 |        | (D)                                   | (E)                                      |                |         | (F)               |
| Name and title                                                                                 | Average           | (do                            |                       | Posi<br>heck r |              |                                 | one    | Reportable                            | Reportable                               |                | Esti    | imated            |
|                                                                                                | hours per         | box                            | , unle                | ss per         | son i        | s both                          | n an   | compensation                          | compensation                             |                |         | ount of           |
|                                                                                                | week<br>(list any |                                | l ai                  | lu a ui        | 16010        | 1711 43                         | 100)   | from                                  | from related                             |                |         | other             |
|                                                                                                | hours for         | direct                         |                       |                |              | _                               |        | the organization                      | organizations<br>(W-2/1099-M <b>I</b> SC | .,             |         | ensation<br>m the |
|                                                                                                | related           | 9e Or (                        | stee                  |                |              | ısateo                          |        | (W-2/1099-MISC/                       | 1099-NEC)                                | ′              |         | nization          |
|                                                                                                | organizations     | trust                          | a tru                 |                | yee          | ompe                            |        | 1099-NEC)                             | ,                                        |                | •       | related           |
|                                                                                                | below             | Individual trustee or director | Institutional trustee | Ser            | Key employee | Highest compensated<br>employee | ner    |                                       |                                          |                | orgar   | nizations         |
|                                                                                                | line)             | ipu                            | Inst                  | Officer        | Key          | High                            | Former |                                       |                                          | $\dashv$       |         |                   |
| (18) MIREYA D'ANGELO                                                                           | 2.00              |                                |                       |                |              |                                 |        |                                       |                                          | ,              |         | •                 |
| DIRECTOR                                                                                       | 1 50              | Х                              |                       |                |              |                                 |        | 0.                                    |                                          | 0.             |         | 0.                |
| (19) NAT ZILKHA<br>DIRECTOR                                                                    | 1.50              | X                              |                       |                |              |                                 |        | 0.                                    |                                          | 0.             |         | 0.                |
| (20) NICOLE PORTWOOD                                                                           | 0.50              | _                              |                       |                |              |                                 |        | 0.                                    |                                          | <del>'</del> + |         | <u> </u>          |
| DIRECTOR                                                                                       | 0.50              | х                              |                       |                |              |                                 |        | 0.                                    |                                          | 0.             |         | 0.                |
| (21) NOAH KERNER                                                                               | 0.50              |                                |                       |                |              |                                 |        |                                       |                                          |                |         |                   |
| DIRECTOR                                                                                       |                   | х                              |                       |                |              |                                 |        | 0.                                    | (                                        | 0.             |         | 0.                |
| (22) SUZANNE HALL                                                                              | 0.50              |                                |                       |                |              |                                 |        |                                       |                                          |                |         |                   |
| DIRECTOR                                                                                       |                   | Х                              |                       |                |              |                                 |        | 0.                                    | (                                        | 0.             |         | 0.                |
| (23) SWAY CALLOWAY                                                                             | 0.50              | ,,                             |                       |                |              |                                 |        |                                       |                                          | ,              |         | 0                 |
| DIRECTOR (24) TOM CHAVEZ                                                                       | 0.50              | Х                              |                       |                |              |                                 |        | 0.                                    |                                          | 0.             |         | 0.                |
| DIRECTOR                                                                                       | 0.50              | х                              |                       |                |              |                                 |        | 0.                                    |                                          | 0.             |         | 0.                |
| (25) WANDA CORIANO                                                                             | 0.50              |                                |                       |                |              |                                 |        |                                       |                                          |                |         |                   |
| DIRECTOR                                                                                       |                   | Х                              |                       |                |              |                                 |        | 0.                                    | (                                        | 0.             |         | 0.                |
|                                                                                                |                   |                                |                       |                |              |                                 |        |                                       |                                          |                |         |                   |
|                                                                                                |                   |                                |                       |                |              |                                 | Ļ      | 101 606                               |                                          | 0.             | 5.5     | ,415.             |
| 1b Subtotal                                                                                    |                   |                                |                       |                |              |                                 |        | 404,696.                              |                                          | 0.1            | 22      | 0.                |
| c Total from continuation sheets to Part VII d Total (add lines 1b and 1c)                     |                   |                                |                       |                |              |                                 |        | 404,696.                              |                                          | 0.             | 5.5     | ,415.             |
| 2 Total number of individuals (including but no                                                | at limited to th  |                                |                       |                |              |                                 | o re   | · · · · · · · · · · · · · · · · · · · |                                          | <del></del>    |         | , 115.            |
| compensation from the organization                                                             | or invited to the | 000                            |                       | a ab           | ,,,,         | ,                               |        | occived more than \$100,              | ood of reportable                        |                |         | 3                 |
| <u> </u>                                                                                       |                   |                                |                       |                |              |                                 |        |                                       |                                          |                | •       | Yes No            |
| 3 Did the organization list any former officer,                                                | director, truste  | ee, k                          | кеу е                 | empl           | oye          | e, or                           | hig    | ghest compensated emp                 | loyee on                                 |                |         |                   |
| line 1a? If "Yes," complete Schedule J for so                                                  |                   |                                |                       |                |              |                                 |        |                                       |                                          |                | 3       | X_                |
| 4 For any individual listed on line 1a, is the su                                              |                   |                                |                       |                |              |                                 |        |                                       |                                          |                |         | v                 |
| and related organizations greater than \$150                                                   |                   |                                |                       |                |              |                                 |        |                                       |                                          |                | 4       | X                 |
| 5 Did any person listed on line 1a receive or a<br>rendered to the organization? If "Yes," com |                   |                                |                       |                |              |                                 |        |                                       |                                          |                | 5       | х                 |
| Section B. Independent Contractors                                                             | piete Scriedule   | <del>3 U 10</del>              | <u>or sc</u>          | <u>ICII Ç</u>  | Jers         | <u> </u>                        |        |                                       |                                          | ·· ·           |         |                   |
| Complete this table for your five highest cor                                                  | npensated ind     | lepe                           | nde                   | nt cc          | ontra        | actor                           | rs th  | hat received more than \$             | 100,000 of compe                         | nsati          | on fror | <br>n             |
| the organization. Report compensation for t                                                    | he calendar ye    | ear e                          | endir                 | ng w           | ith c        | or wi                           | thin   | the organization's tax y              | ear.                                     |                |         |                   |
| (A)                                                                                            |                   |                                |                       | _              |              |                                 |        | (B)                                   |                                          | 0.             | (C)     |                   |
| Name and business                                                                              | address           | N                              | INC                   | <u>:</u>       |              |                                 |        | Description of s                      | ervices                                  |                | ompen:  | sation            |
|                                                                                                |                   |                                |                       |                |              |                                 |        |                                       |                                          |                |         |                   |
|                                                                                                |                   |                                |                       |                |              |                                 |        |                                       |                                          |                |         |                   |
|                                                                                                |                   |                                |                       |                |              |                                 |        |                                       |                                          |                |         |                   |
|                                                                                                |                   |                                |                       |                |              |                                 |        |                                       |                                          |                |         |                   |
|                                                                                                |                   |                                |                       |                |              |                                 |        |                                       |                                          |                |         |                   |
|                                                                                                |                   |                                |                       |                |              |                                 |        |                                       |                                          |                |         |                   |
|                                                                                                |                   |                                |                       |                |              |                                 |        |                                       |                                          |                |         |                   |
| 2 Total number of independent contractors (in                                                  | ncluding but no   | ot lin                         | nited                 | d to t         | thos         | se lis                          | ted    | I<br>l above) who received mo         | ore than                                 |                |         |                   |
| \$100,000 of compensation from the organiz                                                     | ation 🕨           |                                |                       |                | C            | )                               |        |                                       |                                          |                |         |                   |

Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) (D) Related or exempt Unrelated Revenue excluded Total revenue from tax under function revenue business revenue sections 512 - 514 1 a Federated campaigns 1a **b** Membership dues 1b 392,008. c Fundraising events ..... 1c d Related organizations 1d 433,050. e Government grants (contributions) 1e f All other contributions, gifts, grants, and 7,376,663. similar amounts not included above 1f 1g \$2,061,385. g Noncash contributions included in lines 1a-1f **▶** 8,201,721. h Total. Add lines 1a-1f **Business Code** 2 a \_\_\_\_\_ Program Service f All other program service revenue ..... g Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 2,651. 2,651. Royalties ..... (i) Real (ii) Personal 6a 6 a Gross rents 6b **b** Less: rental expenses ... c Rental income or (loss) 6c d Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of assets other than inventory 7a **b** Less: cost or other basis Other Revenue and sales expenses 7b c Gain or (loss) 7c d Net gain or (loss) ........... 8 a Gross income from fundraising events (not including \$ \_\_\_\_\_ 392,008. of contributions reported on line 1c). See 95,559 Part IV, line 18 **b** Less: direct expenses ..... 1,673. 1,673. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 9a **b** Less: direct expenses 9b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances **b** Less: cost of goods sold c Net income or (loss) from sales of inventory ▶ **Business Code** iscellaneous 11 a d All other revenue e Total. Add lines 11a-11d 8,206,045. 4,324. Total revenue. See instructions 12

#### 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 3,388,283. 3,388,283. 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 218,121. 218,121. Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 741,652. 413,809. 11,517. 316,326. Other salaries and wages 7 Pension plan accruals and contributions (include 27,439. 16,154. 425. 10,860. section 401(k) and 403(b) employer contributions) 172,803. 88,535. 2,333. 81,935. Other employee benefits 9 Payroll taxes 10 Fees for services (nonemployees): a Management 18,785. 3,315. 8,585. 6,885. Legal 125,459. 125,459. Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees f Other. (If line 11g amount exceeds 10% of line 25, 54,224. 17,500. 3,038. 33,686. column (A), amount, list line 11g expenses on Sch O.) 14,515. 14,515. Advertising and promotion 12 Office expenses 13 41,715. 23,497. 18,218. Information technology 14 Royalties 15 16 Occupancy 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 5,417. 2,708. 2,709. 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.) 292,376. DELIVERY AND ADVOCACY 292,376. BAD DEBT EXPENSE 41,943. 41,943. 40,194. PRODUCTION COSTS 40,194. d MISCELLANEOUS 203. 203. All other expenses 5,183,129. 4,251,447. 743,652. 188,030. 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)

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year End of year 1,124,590. 4,358,041. 1 Cash - non-interest-bearing Savings and temporary cash investments 2 699,097. 723,170. Pledges and grants receivable, net 3 3 44,670. 32,296. Accounts receivable, net 4 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 Notes and loans receivable, net 7 9,394. 17,311. Inventories for sale or use 8 19,531. 25,844. 9 Prepaid expenses and deferred charges 9 **10a** Land, buildings, and equipment: cost or other 65,000. basis. Complete Part VI of Schedule D \_\_\_\_\_\_ 10a 65,000. 5,417. 0. b Less: accumulated depreciation 10b 10c 11 Investments - publicly traded securities 11 Investments - other securities. See Part IV, line 11 12 12 Investments - program-related. See Part IV, line 11 13 13 Intangible assets 14 14 Other assets. See Part IV, line 11 15 15 1,902,699. 5,156,662. 16 Total assets. Add lines 1 through 15 (must equal line 33) 16 156,941. 337,671. Accounts payable and accrued expenses 17 18 Grants payable 18 50,317. 19 19 Deferred revenue Tax-exempt bond liabilities 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 22 Loans and other 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 22 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 156,941. 387,988. 26 **Total liabilities.** Add lines 17 through 25 Organizations that follow FASB ASC 958, check here  $\blacktriangleright$  X Net Assets or Fund Balances and complete lines 27, 28, 32, and 33. 694,158. 3,805,038. 27 27 Net assets without donor restrictions Net assets with donor restrictions 1,051,600. 963,636. 28 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. Capital stock or trust principal, or current funds 29 30 30 Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds 31 Total net assets or fund balances 1,745,758. 32 4,768,674. 32 5,156,662. 1,902,699. Total liabilities and net assets/fund balances

| 0111       | 1000 (2021)                                                                                                         |            |       |     | 90          |
|------------|---------------------------------------------------------------------------------------------------------------------|------------|-------|-----|-------------|
| 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          | 8,206 |     |             |
| 2          | Total expenses (must equal Part IX, column (A), line 25)                                                            | 2          | 5,183 |     |             |
| 3          | Revenue less expenses. Subtract line 2 from line 1                                                                  | 3          | 3,022 |     |             |
| 4          | Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))                           | 4          | 1,745 | 5,7 | <u>58.</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         | 4,768 | 3,6 | 7 <b>4.</b> |
| Pa         | rt XII Financial Statements and Reporting                                                                           |            |       |     |             |
|            | Check if Schedule O contains a response or note to any line in this Part XII                                        |            |       |     | X           |
|            |                                                                                                                     |            |       | Yes | No          |
| 1          | Accounting method used to prepare the Form 990: Cash X Accrual Other                                                |            | _     |     |             |
|            | If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule      | e O.       |       |     |             |
| <b>2</b> a | Were the organization's financial statements compiled or reviewed by an independent accountant?                     |            | 2a    |     | X           |
|            | If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed     | l on a     |       |     |             |
|            | separate basis, consolidated basis, or both:                                                                        |            |       |     |             |
|            | Separate basis Consolidated basis Both consolidated and separate basis                                              |            |       |     |             |
| b          | Were the organization's financial statements audited by an independent accountant?                                  |            | 2b    | X   |             |
|            | If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat     | e basis,   |       |     |             |
|            | 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  | e audit,   |       |     |             |
|            | review, or compilation of its financial statements and selection of an independent accountant?                      |            | 2c    | X   |             |
|            | If the organization changed either its oversight process or selection process during the tax year, explain on Sch   | edule O.   |       |     |             |
| За         | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir | ngle Audit |       |     |             |
|            | Act and OMB Circular A-133?                                                                                         |            | 3a    |     | Х           |

**b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why on Schedule O and describe any steps taken to undergo such audits

Form **990** (2021)

3b

#### **SCHEDULE A**

(Form 990)

Total

Department of the Treasury Internal Revenue Service

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

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number

SAVE THE MUSIC FOUNDATION 13-6089816 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g, \_\_\_\_ Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (iii) Type of organization (i) Name of supported (v) Amount of monetary (vi) Amount of other (ii) EIN in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) above (see instructions))

| Pa   | rt II Support Schedule for                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                      |                     |                 |                       |                        |              |
|------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|---------------------|-----------------|-----------------------|------------------------|--------------|
|      | (Complete only if you checked                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                      |                     |                 | n failed to qualify ι | under Part III. If the | organization |
|      | fails to qualify under the tests                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | ilisted below, pleas | se complete Part II | II.)            |                       |                        |              |
| Se   | ction A. Public Support                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                      |                     |                 |                       |                        |              |
| Cale | ndar year (or fiscal year beginning in) 🕨                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | (a) 2017             | <b>(b)</b> 2018     | <b>(c)</b> 2019 | (d) 2020              | (e) 2021               | (f) Total    |
| 1    | Gifts, grants, contributions, and                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                      |                     |                 |                       |                        |              |
|      | membership fees received. (Do not                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                      |                     |                 |                       |                        |              |
|      | include any "unusual grants.")                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 4006981.             | 3901249.            | 485,887.        | 3748468.              | 8201721.               | 20344306.    |
| 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 4006981.             | 3901249.            | 485,887.        | 3748468.              | 9201721                | 20344306.    |
|      | Total. Add lines 1 through 3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 4000901.             | 3901249.            | 405,007.        | 3/40400.              | 0201/21.               | 20344300.    |
| 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)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                      |                     |                 |                       |                        | 2737977.     |
| 6    | Public support. Subtract line 5 from line 4.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                      |                     |                 |                       |                        | 17606329.    |
|      | ction B. Total Support                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | ,                    |                     |                 |                       |                        |              |
| Cale | ndar year (or fiscal year beginning in)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | (a) 2017             | <b>(b)</b> 2018     | (c) 2019        | (d) 2020              | (e) 2021               | (f) Total    |
|      | Amounts from line 4                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 4006981.             | 3901249.            | 485,887.        | 3748468.              | 8201721.               | 20344306.    |
| 8    | Gross income from interest,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                      |                     | -               |                       |                        |              |
|      | dividends, payments received on                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                      |                     |                 |                       |                        |              |
|      | securities loans, rents, royalties,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                      |                     |                 |                       |                        |              |
|      | and income from similar sources                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 5,157.               | 2,556.              | 31.             | 1,383.                | 2,651.                 | 11,778.      |
| 9    | Net income from unrelated business                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                      |                     |                 |                       |                        |              |
|      | activities, whether or not the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                      |                     |                 |                       |                        |              |
|      | business is regularly carried on                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                      |                     |                 |                       |                        |              |
| 10   | Other income. Do not include gain                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                      |                     |                 |                       |                        |              |
|      | or loss from the sale of capital                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                      |                     |                 |                       |                        |              |
|      | assets (Explain in Part VI.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 275,584.             |                     |                 | 12,320.               | 95,559.                | 383,463.     |
|      | Total support. Add lines 7 through 10                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                      |                     |                 |                       |                        | 20739547.    |
|      | Gross receipts from related activities,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | •                    |                     |                 |                       | 12                     |              |
| 13   | First 5 years. If the Form 990 is for the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | •                    |                     |                 |                       |                        |              |
| 50   | organization, check this box and stor                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                      |                     |                 |                       |                        | <b>&gt;</b>  |
|      | ction C. Computation of Publi                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                      |                     | -1 (0)          |                       |                        | 84.89 %      |
|      | Public support percentage for 2021 (I                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                      |                     |                 |                       | 15                     | 00 11        |
|      | Public support percentage from 2020 33 1/3% support test - 2021. If the control is the control is the control is the control in the control in the control in the control is the control in the control i |                      |                     |                 |                       |                        |              |
| 102  | stop here. The organization qualifies                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | -                    |                     |                 |                       |                        |              |
| L    | 33 1/3% support test - 2020. If the c                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                      |                     |                 |                       | or more shock th       |              |
| I.   | and stop here. The organization qual                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                      |                     |                 |                       |                        |              |
| 17-  | 10% -facts-and-circumstances test                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                      |                     |                 |                       |                        |              |
| 116  | and if the organization meets the fact                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                      |                     |                 |                       |                        |              |
|      | meets the facts-and-circumstances te                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                      |                     | -               | •                     | viriow the organiz     | <b>.</b> —   |
| r    | 10% -facts-and-circumstances test                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | -                    |                     |                 | -                     |                        |              |
| _    | more, and if the organization meets the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | _                    |                     |                 |                       |                        |              |

organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

# Schedule A (Form 990) 2021 SAVE THE MUSIC FOUNDATION | 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

| <u></u> | qualify under the tests listed be                                                         | elow, please com          | plete Part II.)       |                     |                     |                     |           |
|---------|-------------------------------------------------------------------------------------------|---------------------------|-----------------------|---------------------|---------------------|---------------------|-----------|
|         | ction A. Public Support                                                                   |                           | T                     | I                   |                     | T                   | <u> </u>  |
|         | ndar year (or fiscal year beginning in)                                                   | (a) 2017                  | <b>(b)</b> 2018       | (c) 2019            | (d) 2020            | (e) 2021            | (f) Total |
| 1       | Gifts, grants, contributions, and                                                         |                           |                       |                     |                     |                     |           |
|         | membership fees received. (Do not                                                         |                           |                       |                     |                     |                     |           |
|         | include any "unusual grants.")                                                            |                           |                       |                     |                     |                     |           |
| 2       | Gross receipts from admissions,                                                           |                           |                       |                     |                     |                     |           |
|         | merchandise sold or services per-<br>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                                                              |                           |                       |                     |                     |                     |           |
| 7a      | Amounts included on lines 1, 2, and                                                       |                           |                       |                     |                     |                     |           |
|         | 3 received from disqualified persons                                                      |                           |                       |                     |                     |                     |           |
| b       | Amounts included on lines 2 and 3 received                                                |                           |                       |                     |                     |                     |           |
|         | from other than disqualified persons that                                                 |                           |                       |                     |                     |                     |           |
|         | exceed the greater of \$5,000 or 1% of the amount on line 13 for the year                 |                           |                       |                     |                     |                     |           |
| c       | Add lines 7a and 7b                                                                       |                           |                       |                     |                     |                     |           |
|         | Public support. (Subtract line 7c from line 6.)                                           |                           |                       |                     |                     |                     |           |
|         | tion B. Total Support                                                                     |                           | •                     |                     | •                   | •                   |           |
| Cale    | ndar year (or fiscal year beginning in)                                                   | (a) 2017                  | <b>(b)</b> 2018       | (c) 2019            | (d) 2020            | (e) 2021            | (f) Total |
|         | Amounts from line 6                                                                       |                           |                       |                     |                     |                     |           |
|         | Gross income from interest,                                                               |                           |                       |                     |                     |                     |           |
|         | dividends, payments received on                                                           |                           |                       |                     |                     |                     |           |
|         | securities loans, rents, royalties, and income from similar sources                       |                           |                       |                     |                     |                     |           |
| b       | Unrelated business taxable income                                                         |                           |                       |                     |                     |                     |           |
| _       | (less section 511 taxes) from businesses                                                  |                           |                       |                     |                     |                     |           |
|         | acquired after June 30, 1975                                                              |                           |                       |                     |                     |                     |           |
| c       | Add lines 10a and 10b                                                                     |                           |                       |                     |                     |                     |           |
|         | Net income from unrelated business                                                        |                           |                       |                     |                     |                     |           |
|         | activities not included on line 10b,                                                      |                           |                       |                     |                     |                     |           |
|         | whether or not the business is regularly carried on                                       |                           |                       |                     |                     |                     |           |
| 12      | Other income. Do not include gain                                                         |                           |                       |                     |                     |                     |           |
|         | or loss from the sale of capital                                                          |                           |                       |                     |                     |                     |           |
| 12      | assets (Explain in Part VI.)                                                              |                           |                       |                     |                     |                     |           |
|         | Total support. (Add lines 9, 10c, 11, and 12.)   First 5 years. If the Form 990 is for th | o organization's f        | iret soond third      | fourth or fifth tax | Voor as a soction F | [01/o//3] organizat | ion       |
| 1-      | check this box and stop here                                                              | e organization s i        |                       | •                   | •                   | ( )( )              | <i>'</i>  |
| Sec     | etion C. Computation of Public                                                            | c Support Pe              |                       |                     |                     |                     |           |
|         | Public support percentage for 2021 (li                                                    |                           |                       | column (fl)         |                     | 15                  | %         |
|         | Public support percentage from 2020                                                       |                           | •                     |                     |                     | 16                  | %         |
|         | ction D. Computation of Inves                                                             |                           |                       |                     |                     | , ,                 |           |
| 17      | Investment income percentage for 20                                                       | <b>21</b> (line 10c, colu | mn (f), divided by li | ne 13, column (f))  |                     | 17                  | %         |
|         | Investment income percentage from 2                                                       |                           |                       |                     |                     | 18                  | %         |
|         | 33 1/3% support tests - 2021. If the                                                      |                           |                       |                     |                     | 33 1/3%, and line   |           |
|         | more than 33 1/3%, check this box ar                                                      |                           |                       |                     |                     |                     | <b>•</b>  |
| b       | 33 1/3% support tests - 2020. If the                                                      | · ·                       |                       |                     |                     |                     | and       |
|         | line 18 is not more than 33 1/3%, chec                                                    | •                         |                       |                     |                     |                     |           |
| 20      | Private foundation. If the organizatio                                                    |                           |                       | •                   |                     | •                   |           |

#### 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).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes." *provide detail in* **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

|             |          | Yes   | No    |
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| Pa         | rt IV Supporting Organizations (continued)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                 |     |     |
|------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|-----|-----|
|            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                 | Yes | No  |
| 11         | Has the organization accepted a gift or contribution from any of the following persons?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                 |     |     |
| а          | A person who directly or indirectly controls, either alone or together with persons described on lines 11b and                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |     |     |
|            | 11c below, the governing body of a supported organization?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 11a             |     |     |
| b          | A family member of a person described on line 11a above?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 11b             |     |     |
| С          | A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                 |     |     |
|            | detail in Part VI.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 11c             |     |     |
| <u>Sec</u> | ction B. Type I Supporting Organizations                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                 |     |     |
|            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                 | Yes | No  |
| 1          | Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one of more supported organizations have the power to regularly appoint or elect at least a majority of the organization's office                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                 |     |     |
|            | directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 15,             |     |     |
|            | effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | ed              |     |     |
|            | 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,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 2               |     |     |
| Sec        | supervised. or controlled the supporting organization.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 2               |     |     |
|            | - Type ii cupper and organizations                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                 | Yes | No  |
| 1          | Were a majority of the organization's directors or trustees during the tax year also a majority of the directors                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                 | 163 | INU |
| •          | or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                 |     |     |
|            | or management of the supporting organization was vested in the same persons that controlled or managed                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |     |     |
|            | the supported organization(s).                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 1               |     |     |
| Sec        | ction D. All Type III Supporting Organizations                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |     |     |
|            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                 | Yes | No  |
| 1          | Did the organization provide to each of its supported organizations, by the last day of the fifth month of the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |     |     |
|            | organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                 |     |     |
|            | year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |     |     |
|            | organization's governing documents in effect on the date of notification, to the extent not previously provided?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 1               |     |     |
| 2          | Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                 |     |     |
|            | organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                 |     |     |
|            | the organization maintained a close and continuous working relationship with the supported organization(s).                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 2               |     |     |
| 3          | By reason of the relationship described on line 2, above, did the organization's supported organizations have a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                 |     |     |
|            | significant voice in the organization's investment policies and in directing the use of the organization's                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                 |     |     |
|            | income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                 |     |     |
|            | supported organizations played in this regard.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 3               |     |     |
| <u>Sec</u> | ction E. Type III Functionally Integrated Supporting Organizations                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                 |     |     |
| 1          | Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruc                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | tions).         |     |     |
| а          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                 |     |     |
| b          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                 |     |     |
| С          | The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | see instruction | s). |     |
| 2          | Activities Test. Answer lines 2a and 2b below.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 | Yes | No  |
| _          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                 |     |     |
| а          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                 |     |     |
| а          | the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                 |     |     |
| a          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                 |     |     |
| а          | the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                 |     |     |
|            | 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              |     |     |
| a<br>b     | 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.  Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 2a              |     |     |
|            | 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.  Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in                                                                                                                                                                                                                                                                                                                                                      |                 |     |     |
|            | 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.  Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in                                                                                                                                                                                                                                         |                 |     |     |
| b          | 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.  Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.                                                                                                                                                                                | 2a<br>2b        |     |     |
| b<br>3     | 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.  Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.  Parent of Supported Organizations. Answer lines 3a and 3b below.                                                                                                              |                 |     |     |
| b          | 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.  Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.  Parent of Supported Organizations. Answer lines 3a and 3b below.  Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or | 2b              |     |     |
| b<br>3     | 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.  Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.  Parent of Supported Organizations. Answer lines 3a and 3b below.                                                                                                              |                 |     |     |

| Sche | dule A (Form 990) 2021 SAVE THE MUSIC FOUNDATI                                  |                |                                | 13-6089816 Page <b>6</b>       |
|------|---------------------------------------------------------------------------------|----------------|--------------------------------|--------------------------------|
| Pa   | t V Type III Non-Functionally Integrated 509(a)(3) Supporting                   | ng Organ       | izations                       |                                |
| 1    | Check here if the organization satisfied the Integral Part Test as a qualifying | ng trust on N  | Nov. 20, 1970 ( explain in     | Part VI). See instructions.    |
|      | All other Type III non-functionally integrated supporting organizations mus     |                | •                              | •                              |
| Sect | ion A - Adjusted Net Income                                                     | (A) Prior Year | (B) Current Year<br>(optional) |                                |
| 1    | Net short-term capital gain                                                     | 1              |                                |                                |
| 2    | Recoveries of prior-year distributions                                          | 2              |                                |                                |
| 3    | Other gross income (see instructions)                                           | 3              |                                |                                |
| 4    | Add lines 1 through 3.                                                          | 4              |                                |                                |
| 5    | Depreciation and depletion                                                      | 5              |                                |                                |
| 6    | Portion of operating expenses paid or incurred for production or                |                |                                |                                |
|      | collection of gross income or for management, conservation, or                  |                |                                |                                |
|      | maintenance of property held for production of income (see instructions)        | 6              |                                |                                |
| 7    | Other expenses (see instructions)                                               | 7              |                                |                                |
| 8    | Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)                    | 8              |                                |                                |
| Sect | ion B - Minimum Asset Amount                                                    |                | (A) Prior Year                 | (B) Current Year<br>(optional) |
| 1    | Aggregate fair market value of all non-exempt-use assets (see                   |                |                                |                                |
|      | instructions for short tax year or assets held for part of year):               |                |                                |                                |
| а    | Average monthly value of securities                                             | 1a             |                                |                                |
| b    | Average monthly cash balances                                                   | 1b             |                                |                                |
|      | Fair market value of other non-exempt-use assets                                | 1c             |                                |                                |
| d    | Total (add lines 1a, 1b, and 1c)                                                | 1d             |                                |                                |
| е    | Discount claimed for blockage or other factors                                  |                |                                |                                |
|      | (explain in detail in Part VI):                                                 |                |                                |                                |
| 2    | Acquisition indebtedness applicable to non-exempt-use assets                    | 2              |                                |                                |
| 3    | Subtract line 2 from line 1d.                                                   | 3              |                                |                                |
| 4    | Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,     |                |                                |                                |
|      | see instructions).                                                              | 4              |                                |                                |
| 5    | Net value of non-exempt-use assets (subtract line 4 from line 3)                | 5              |                                |                                |
| 6    | Multiply line 5 by 0.035.                                                       | 6              |                                |                                |
| 7    | Recoveries of prior-year distributions                                          | 7              |                                |                                |
| 8    | Minimum Asset Amount (add line 7 to line 6)                                     | 8              |                                |                                |
| Sect | ion C - Distributable Amount                                                    |                |                                | Current Year                   |
| 1    | Adjusted net income for prior year (from Section A, line 8, column A)           | 1              |                                |                                |
| 2    | Enter 0.85 of line 1.                                                           | 2              |                                |                                |
| 3    | Minimum asset amount for prior year (from Section B, line 8, column A)          | 3              |                                |                                |
| 4    | Enter greater of line 2 or line 3.                                              | 4              |                                |                                |
| 5    | Income tax imposed in prior year                                                | 5              |                                |                                |
| 6    | Distributable Amount. Subtract line 5 from line 4, unless subject to            |                |                                |                                |

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

Schedule A (Form 990) 2021

emergency temporary reduction (see instructions).

instructions).

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| Pai      | rt V Type III Non-Functionally Integrated 509                   | (a)(3) Supporting Orga        | nizations (continu                    | ıed) |                                           |
|----------|-----------------------------------------------------------------|-------------------------------|---------------------------------------|------|-------------------------------------------|
| Sect     | ion D - Distributions                                           |                               |                                       |      | Current Year                              |
| 1        | Amounts paid to supported organizations to accomplish exe       |                               | 1                                     |      |                                           |
| 2        | Amounts paid to perform activity that directly furthers exemp   | ot purposes of supported      |                                       |      |                                           |
|          | organizations, in excess of income from activity                |                               |                                       | 2    |                                           |
| 3        | Administrative expenses paid to accomplish exempt purpose       | es of supported organizations | 3                                     | 3    |                                           |
| 4        | Amounts paid to acquire exempt-use assets                       |                               | 4                                     |      |                                           |
| 5        | Qualified set-aside amounts (prior IRS approval required - pr   |                               | 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 | he organization is responsive |                                       |      |                                           |
|          | (provide details in Part VI). See instructions.                 |                               | 8                                     |      |                                           |
| 9        | Distributable amount for 2021 from Section C, line 6            |                               | 9                                     |      |                                           |
| 10       | Line 8 amount divided by line 9 amount                          |                               |                                       | 10   |                                           |
| Sect     | ion E - Distribution Allocations (see instructions)             | (i)<br>Excess Distributions   | (ii)<br>Underdistribution<br>Pre-2021 | าร   | (iii)<br>Distributable<br>Amount for 2021 |
| _1_      | Distributable amount for 2021 from Section C, line 6            |                               |                                       |      |                                           |
| 2        | Underdistributions, if any, for years prior to 2021 (reason-    |                               |                                       |      |                                           |
|          | able cause required - explain in Part VI). See instructions.    |                               |                                       |      |                                           |
| 3        | Excess distributions carryover, if any, to 2021                 |                               |                                       |      |                                           |
| <u>a</u> | From 2016                                                       |                               |                                       |      |                                           |
| <u>b</u> | From 2017                                                       |                               |                                       |      |                                           |
| С        | From 2018                                                       |                               |                                       |      |                                           |
| d        | From 2019                                                       |                               |                                       |      |                                           |
| е        | From 2020                                                       |                               |                                       |      |                                           |
| f        | Total of lines 3a through 3e                                    |                               |                                       |      |                                           |
| g        | Applied to underdistributions of prior years                    |                               |                                       |      |                                           |
| h        | Applied to 2021 distributable amount                            |                               |                                       |      |                                           |
| i        | Carryover from 2016 not applied (see instructions)              |                               |                                       |      |                                           |
| j        | Remainder. Subtract lines 3g, 3h, and 3i from line 3f.          |                               |                                       |      |                                           |
| 4        | Distributions for 2021 from Section D,                          |                               |                                       |      |                                           |
|          | line 7: \$                                                      |                               |                                       |      |                                           |
| а        | Applied to underdistributions of prior years                    |                               |                                       |      |                                           |
| b        | Applied to 2021 distributable amount                            |                               |                                       |      |                                           |
| С        | Remainder. Subtract lines 4a and 4b from line 4.                |                               |                                       |      |                                           |
| 5        | Remaining underdistributions for years prior to 2021, 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 2021. Subtract lines 3h        |                               |                                       |      |                                           |
|          | and 4b from line 1. For result greater than zero, explain in    |                               |                                       |      |                                           |
|          | Part VI. See instructions.                                      |                               |                                       |      |                                           |
| 7        | Excess distributions carryover to 2022. Add lines 3j and 4c.    |                               |                                       |      |                                           |
| 8        | Breakdown of line 7:                                            |                               |                                       |      |                                           |
|          | Excess from 2017                                                |                               |                                       |      |                                           |
|          | Excess from 2018                                                |                               |                                       |      |                                           |
|          | Excess from 2019                                                |                               |                                       |      |                                           |
|          | Excess from 2020                                                |                               |                                       |      |                                           |
|          | Excess from 2021                                                |                               |                                       |      |                                           |
|          |                                                                 |                               |                                       |      |                                           |

Schedule A (Form 990) 2021

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| 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.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| 2021 AMOUNT: \$ 95,559.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
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|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |

## Schedule B

#### Schedule of Contributors

OMB No. 1545-0047

22

Department of the Treasury Internal Revenue Service

(Form 990)

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

Name of the organization Employer identification number

SAVE THE MUSIC FOUNDATION 13-6089816 Organization type (check one): 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), 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

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), 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 certify that it doesn't meet the filing requirements of Schedule B (Form 990).

religious, charitable, etc., contributions totaling \$5,000 or more during the year

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

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

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

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

"N/A" in column (b) instead of the contributor name and address), II, and III.

Schedule B (Form 990) (2021)

Name of organization Employer identification number

## SAVE THE MUSIC FOUNDATION

| Part I     | Contributors (see instructions). Use duplicate copies of Part I if additi | onal space is needed.   |                                                                        |
|------------|---------------------------------------------------------------------------|-------------------------|------------------------------------------------------------------------|
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                         | (c) Total contributions | (d) Type of contribution                                               |
| 1          |                                                                           | \$250,000.              | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                         | (c) Total contributions | (d)<br>Type of contribution                                            |
| 2          |                                                                           | \$\$                    | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a)<br>No  | (b)<br>Name, address, and ZIP + 4                                         | (c) Total contributions | (d) Type of contribution                                               |
| 3          |                                                                           | \$\$\$                  | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a)        | (b)<br>Name, address, and ZIP + 4                                         | (c) Total contributions | (d) Type of contribution                                               |
| 4          |                                                                           | \$500,000.              | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                         | (c) Total contributions | (d)<br>Type of contribution                                            |
| 5          |                                                                           | \$2,000,000.            | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                         | (c) Total contributions | (d) Type of contribution                                               |
| <u>6</u>   |                                                                           |                         | Person X Payroll Noncash (Complete Part II for noncash contributions.) |

Name of organization Employer identification number

## SAVE THE MUSIC FOUNDATION

| Part I     | art I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. |                            |                                                                        |  |  |  |  |  |
|------------|------------------------------------------------------------------------------------------------------|----------------------------|------------------------------------------------------------------------|--|--|--|--|--|
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                                                    | (c) Total contributions    | (d)<br>Type of contribution                                            |  |  |  |  |  |
| 7          |                                                                                                      | \$\$                       | Person X Payroll Noncash (Complete Part II for noncash contributions.) |  |  |  |  |  |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                                                    | (c)<br>Total contributions | (d) Type of contribution                                               |  |  |  |  |  |
| 8          |                                                                                                      | \$\$                       | Person X Payroll Noncash (Complete Part II for noncash contributions.) |  |  |  |  |  |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                                                    | (c)<br>Total contributions | (d)<br>Type of contribution                                            |  |  |  |  |  |
| 9          |                                                                                                      | \$ 240,000.                | Person X Payroll Noncash (Complete Part II for noncash contributions.) |  |  |  |  |  |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                                                    | (c) Total contributions    | (d) Type of contribution                                               |  |  |  |  |  |
|            |                                                                                                      | \$                         | Person Payroll Noncash (Complete Part II for noncash contributions.)   |  |  |  |  |  |
| (a)<br>No. | (b)<br>Name, address, and <b>ZI</b> P + 4                                                            | (c) Total contributions    | (d) Type of contribution                                               |  |  |  |  |  |
|            |                                                                                                      | \$                         | Person Payroll Noncash (Complete Part II for noncash contributions.)   |  |  |  |  |  |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                                                    | (c) Total contributions    | (d)<br>Type of contribution                                            |  |  |  |  |  |
|            |                                                                                                      | \$                         | Person Payroll Noncash (Complete Part II for noncash contributions.)   |  |  |  |  |  |

Name of organization Employer identification number

## SAVE THE MUSIC FOUNDATION

| Part II                      | Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. |                                           |                      |  |  |  |
|------------------------------|-----------------------------------------------------------------------------------------------------|-------------------------------------------|----------------------|--|--|--|
| (a)<br>No.<br>from<br>Part I | (b)<br>Description of noncash property given                                                        | (c) FMV (or estimate) (See instructions.) | (d)<br>Date received |  |  |  |
|                              |                                                                                                     | -<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>- |                      |  |  |  |
| (a)<br>No.<br>from<br>Part I | (b)  Description of noncash property given                                                          | (c) FMV (or estimate) (See instructions.) | (d)<br>Date received |  |  |  |
|                              |                                                                                                     | -<br>-<br>-<br>-<br>- \$                  |                      |  |  |  |
| (a)<br>No.<br>from<br>Part I | (b)  Description of noncash property given                                                          | (c) FMV (or estimate) (See instructions.) | (d)<br>Date received |  |  |  |
|                              |                                                                                                     | -<br>-<br>-<br>-<br>- \$                  |                      |  |  |  |
| (a)<br>No.<br>from<br>Part I | (b)  Description of noncash property given                                                          | (c) FMV (or estimate) (See instructions.) | (d)<br>Date received |  |  |  |
|                              |                                                                                                     | -<br>-<br>-<br>- \$                       |                      |  |  |  |
| (a)<br>No.<br>from<br>Part I | (b)  Description of noncash property given                                                          | (c) FMV (or estimate) (See instructions.) | (d)<br>Date received |  |  |  |
|                              |                                                                                                     | -<br>-<br>-<br>-<br>- \$                  |                      |  |  |  |
| (a)<br>No.<br>from<br>Part I | (b)  Description of noncash property given                                                          | (c) FMV (or estimate) (See instructions.) | (d)<br>Date received |  |  |  |
|                              |                                                                                                     | -<br>-<br>-<br>-<br>- \$                  |                      |  |  |  |

| Name of or                | rganization                                                                                                                                                                                                             | Employer identification number                                                                   |                                                                          |
|---------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|
| SAVE T                    | THE MUSIC FOUNDATION                                                                                                                                                                                                    |                                                                                                  | 13-6089816                                                               |
| Part III                  | Exclusively religious, charitable, etc., contribution from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, of Use duplicate copies of Part III if additional s | through <b>(e) and</b> the following line en naritable, etc., contributions of <b>\$1,000 or</b> | ection 501(c)(7), (8), or (10) that total more than \$1,000 for the year |
| (a) No.<br>from<br>Part I | (b) Purpose of gift                                                                                                                                                                                                     | (c) Use of gift                                                                                  | (d) Description of how gift is held                                      |
|                           |                                                                                                                                                                                                                         |                                                                                                  |                                                                          |
|                           | 1                                                                                                                                                                                                                       | (e) Transfer of gif                                                                              | t '                                                                      |
| -                         | Transferee's name, address, and                                                                                                                                                                                         | d ZIP + 4                                                                                        | Relationship of transferor to transferee                                 |
| (a) No.<br>from<br>Part I | (b) Purpose of gift                                                                                                                                                                                                     | (c) Use of gift                                                                                  | (d) Description of how gift is held                                      |
|                           |                                                                                                                                                                                                                         |                                                                                                  |                                                                          |
| -                         |                                                                                                                                                                                                                         | (e) Transfer of gif                                                                              | t                                                                        |
| -                         | Transferee's name, address, and                                                                                                                                                                                         | d ZIP + 4                                                                                        | Relationship of transferor to transferee                                 |
| (a) No.<br>from<br>Part I | (b) Purpose of gift                                                                                                                                                                                                     | (c) Use of gift                                                                                  | (d) Description of how gift is held                                      |
| -                         |                                                                                                                                                                                                                         | (e) Transfer of gif                                                                              | t                                                                        |
| -                         | Transferee's name, address, and                                                                                                                                                                                         | d ZIP + 4                                                                                        | Relationship of transferor to transferee                                 |
| (a) No.<br>from<br>Part I | (b) Purpose of gift                                                                                                                                                                                                     | (c) Use of gift                                                                                  | (d) Description of how gift is held                                      |
|                           |                                                                                                                                                                                                                         |                                                                                                  |                                                                          |
|                           |                                                                                                                                                                                                                         | (e) Transfer of gif                                                                              | t                                                                        |
| -                         | Transferee's name, address, and                                                                                                                                                                                         | d ZIP + 4                                                                                        | Relationship 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.

Inspection

Name of the organization

SAVE THE MUSIC FOUNDATION

**Employer identification number** 13-6089816

|     | organization answered "Yes" on Form 990, Part N                                                       |                                                   | 1                                                                        |
|-----|-------------------------------------------------------------------------------------------------------|---------------------------------------------------|--------------------------------------------------------------------------|
|     |                                                                                                       | (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                                             | •                                                 |                                                                          |
|     | are the organization's property, subject to the organization                                          |                                                   |                                                                          |
| 6   | Did the organization inform all grantees, donors, and don                                             |                                                   |                                                                          |
|     | for charitable purposes and not for the benefit of the don                                            |                                                   |                                                                          |
| Do  |                                                                                                       |                                                   |                                                                          |
| Pai |                                                                                                       |                                                   | J, Part IV, line 7.                                                      |
| 1   | Purpose(s) of conservation easements held by the organi                                               |                                                   |                                                                          |
|     | Preservation of land for public use (for example, re-                                                 | ·                                                 | of a historically important land area                                    |
|     | Protection of natural habitat                                                                         | Preservation                                      | of a certified historic structure                                        |
|     | Preservation of open space                                                                            |                                                   |                                                                          |
| 2   | Complete lines 2a through 2d if the organization held a q                                             | qualified conservation contribution in the forr   | m of a conservation easement on the last  Held at the End of the Tax Yea |
|     | day of the tax year.                                                                                  |                                                   | _                                                                        |
| a   |                                                                                                       |                                                   |                                                                          |
| b   |                                                                                                       |                                                   |                                                                          |
| С   | Number of conservation easements on a certified historic                                              |                                                   |                                                                          |
| d   | Number of conservation easements included in (c) acquir                                               | ,                                                 | 1 I                                                                      |
| _   | listed in the National Register                                                                       |                                                   |                                                                          |
| 3   | Number of conservation easements modified, transferred                                                | d, released, extinguished, or terminated by the   | he organization during the tax                                           |
|     | year -                                                                                                |                                                   |                                                                          |
| 4   | Number of states where property subject to conservation                                               |                                                   | <del>_</del>                                                             |
| 5   | Does the organization have a written policy regarding the                                             |                                                   |                                                                          |
| _   | violations, and enforcement of the conservation easemer                                               |                                                   |                                                                          |
| 6   | Staff and volunteer hours devoted to monitoring, inspect                                              | ling, nandling of violations, and enforcing co    | onservation easements during the year                                    |
| _   | Amount of supersoning used in months in a position in                                                 |                                                   |                                                                          |
| 7   | Amount of expenses incurred in monitoring, inspecting, h \$\bigs\$                                    | nandling of violations, and emorcing conserv      | vation easements during the year                                         |
| 0   | Does each conservation easement reported on line 2(d) a                                               | shove esticts the requirements of section 17      | 70/h)/4)/P)(i)                                                           |
| 8   |                                                                                                       | above satisfy the requirements of section 17      |                                                                          |
| 9   | and section 170(h)(4)(B)(ii)?  In Part XIII, describe how the organization reports conser             |                                                   |                                                                          |
| 9   |                                                                                                       | •                                                 |                                                                          |
|     | balance sheet, and include, if applicable, the text of the f                                          | oothote to the organization's illiancial state.   | ments that describes the                                                 |
| Pai | organization's accounting for conservation easements.  rt III   Organizations Maintaining Collections | s of Art. Historical Treasures. or C              | Other Similar Assets.                                                    |
|     | Complete if the organization answered "Yes" on F                                                      |                                                   |                                                                          |
| 1a  | If the organization elected, as permitted under FASB ASC                                              |                                                   | t and balance sheet works                                                |
|     | of art, historical treasures, or other similar assets held for                                        | •                                                 |                                                                          |
|     | service, provide in Part XIII the text of the footnote to its                                         |                                                   | ·                                                                        |
| b   | If the organization elected, as permitted under FASB ASC                                              |                                                   |                                                                          |
|     | art, historical treasures, or other similar assets held for pu                                        |                                                   |                                                                          |
|     | provide the following amounts relating to these items:                                                | abile oxilibition, education, or recognism in tal | rational to or passic solvies,                                           |
|     | (i) Revenue included on Form 990, Part VIII, line 1                                                   |                                                   | <b>&gt;</b> \$                                                           |
|     |                                                                                                       |                                                   | <b>.</b> .                                                               |
| 2   | If the organization received or held works of art, historica                                          | al treasures or other similar assets for finance  |                                                                          |
| ~   | the following amounts required to be reported under FAS                                               |                                                   | Jai gairi, provide                                                       |
|     | B 1 1 1 1 5 000 B 11/11 11 1                                                                          | · ·                                               | <b>.</b>                                                                 |
| а   |                                                                                                       |                                                   | <b>▶</b> %                                                               |

| Par      | t III  | Organizations Maintaining C                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ollections of Ar       | t, Histo               | orical Tre       | asures, or          | Other      | Similar              | Assets             | (continu  | ıed)    |      |
|----------|--------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|------------------------|------------------|---------------------|------------|----------------------|--------------------|-----------|---------|------|
| 3        | Usin   | g the organization's acquisition, accession                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | on, and other records  | s, check               | any of the f     | ollowing that       | make sigi  | nificant u           | se of its          |           |         |      |
|          |        | ction items (check all that apply):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                        |                        | •                | · ·                 |            |                      |                    |           |         |      |
| а        |        | Public exhibition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | d                      |                        | Loan or exc      | hange progra        | ım         |                      |                    |           |         |      |
| b        |        | Scholarly research                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | е                      |                        |                  | 0 1 0               |            |                      |                    |           |         |      |
| С        |        | Preservation for future generations                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                        |                        |                  |                     |            |                      |                    |           |         |      |
| 4        | Prov   | ide a description of the organization's co                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | llections and explair  | n how th               | ev further th    | e organizatio       | n's exem   | ot purpos            | e in Part          | XIII.     |         |      |
| 5        |        | ng the year, did the organization solicit o                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | •                      |                        | -                | -                   |            |                      |                    |           |         |      |
| -        |        | sold to raise funds rather than to be ma                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                        |                        |                  |                     |            |                      |                    | Yes       |         | No   |
| Par      | t IV   | Escrow and Custodial Arrang                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                        |                        |                  |                     |            |                      |                    |           |         |      |
|          |        | reported an amount on Form 990, Par                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                        |                        | <b>J</b>         |                     |            |                      | ,                  | , .       |         |      |
| 1a       | Is the | e organization an agent, trustee, custodia                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | an or other intermed   | iary for c             | ontributions     | s or other ass      | ets not in | cluded               |                    |           |         |      |
|          |        | orm 990, Part X?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                        |                        |                  |                     |            |                      |                    | Yes       |         | No   |
| b        |        | es," explain the arrangement in Part XIII a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                        |                        |                  |                     |            |                      |                    | _         |         |      |
|          |        | ,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                        | 3                      |                  |                     |            |                      |                    | Amount    |         | -    |
| С        | Beai   | nning balance                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                        |                        |                  |                     |            | 1c                   |                    |           |         |      |
| d        | _      | tions during the year                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                        |                        |                  |                     |            | 1d                   |                    |           |         |      |
| e        |        | ibutions during the year                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                        |                        |                  |                     |            | 1e                   |                    |           |         |      |
| f        |        | ng balance                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                        |                        |                  |                     |            | 1f                   |                    |           |         |      |
| 2a       |        | he organization include an amount on Fo                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                        |                        |                  |                     |            |                      |                    | Yes       |         | No   |
|          |        | es," explain the arrangement in Part XIII.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                        |                        |                  |                     | •          | •                    |                    | 00        |         |      |
| Par      |        | Endowment Funds. Complete it                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                        |                        |                  |                     |            | <u> </u>             |                    |           |         |      |
|          |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | (a) Current year       |                        | rior year        | (c) Two year        |            |                      | ears back          | (e) Four  | vears l | oack |
| 1a       | Regi   | nning of year balance                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | , ,                    | ,                      | •                | ,,,,                | ,          | , ,                  |                    |           |         |      |
| h.       |        | ributions                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                        |                        |                  |                     |            |                      |                    |           |         |      |
|          |        | nvestment earnings, gains, and losses                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                        |                        |                  |                     |            |                      |                    |           |         |      |
| 4        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |                        |                  |                     |            |                      |                    |           |         |      |
| u        |        | ts or scholarships<br>r expenditures for facilities                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                        |                        |                  |                     |            |                      |                    |           |         |      |
| C        |        | ·                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                        |                        |                  |                     |            |                      |                    |           |         |      |
|          |        | orograms<br>inistrative expenses                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                        |                        |                  |                     |            |                      |                    |           |         |      |
|          |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |                        |                  |                     |            |                      |                    |           |         |      |
| g<br>2   |        | of year balance [ide the estimated percentage of the curr                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | ont year and balance   | lino 1o                | . oolumn (a)     | ) hold oo:          |            |                      |                    |           |         |      |
|          |        | d designated or quasi-endowment                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | =                      | %<br>%                 | i, coluitiit (a) | ij Helu as.         |            |                      |                    |           |         |      |
| a        |        | nanent endowment                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                        | <b>—</b> <sup>70</sup> |                  |                     |            |                      |                    |           |         |      |
| b        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <sup>70</sup>          |                        |                  |                     |            |                      |                    |           |         |      |
| C        |        | endowment   general endowm | · -                    |                        |                  |                     |            |                      |                    |           |         |      |
| 20       |        | here endowment funds not in the posses                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | •                      | tion that              | t are held on    | nd administar       | ad for tha | organiza             | tion               |           |         |      |
| Sa       |        | nere endownient lands not in the posses                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | ssion of the organiza  | נווטוז נוומ            | are nelu ai      | iu auriiriisteri    | ed for the | organiza             | lion               | Γ.        | Yes     | No   |
|          | by:    | Involuted examinations                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                        |                        |                  |                     |            |                      |                    |           |         | -110 |
|          |        | Inrelated organizations                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                        |                        |                  |                     |            |                      |                    | 3a(i)     | _       |      |
| <b>h</b> | (II) T | Related organizationses" on line 3a(ii), are the related organiza                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | tiona listad on requir | od on S                | shadula D2       |                     |            |                      |                    | 3a(ii)    | -+      |      |
| D        |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                        |                        |                  |                     |            |                      |                    | 3b        |         |      |
| Par      |        | ribe in Part XIII the intended uses of the Land, Buildings, and Equipm                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                        | wment ii               | unus.            |                     |            |                      |                    |           |         |      |
| · u      | • • •  | Complete if the organization answered                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                        | Part IV                | lina 11a S       | ee Form 990         | Part Y lir | ne 10                |                    |           |         |      |
|          |        | Description of property                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | (a) Cost or o          |                        |                  | or other            |            | cumulate             | <del>d</del>       | (d) Daali | vol     |      |
|          |        | респрион огргорету                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | (a) Cost or o          |                        | . ,              | or otner<br>(other) | ٠,         | cumulate<br>eciation | u                  | (d) Book  | value   | ;    |
|          | 1      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <u> </u>               | iioiii)                | Dasis            | (Other)             | чері       | COIALIOIT            |                    |           |         |      |
|          |        | B                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                        |                        |                  |                     |            |                      |                    |           |         |      |
|          |        | lings                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                        |                        |                  |                     |            |                      | <del>-  -</del>    |           |         |      |
|          |        | ehold improvements                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                        |                        |                  |                     |            |                      | <del>-  </del> -   |           |         |      |
|          |        | oment                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                        |                        | <i>-</i>         | 5 000               |            | 65 00                | <del>\ \ \ \</del> |           |         |      |
|          |        | lines 1a through 1e. (Column (d) must o                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                        | v ,                    |                  | <u>5,000. </u>      |            | 65,00                |                    |           |         | 0.   |
|          |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | aual Form DOO Dord     |                        | n IUI line 1     | 10.1                |            |                      | _                  |           |         | 11.  |

|                                                                                       | SIC FOUNDATIO              | N 13                                      | Page                   |
|---------------------------------------------------------------------------------------|----------------------------|-------------------------------------------|------------------------|
| Part VII Investments - Other Securities.  Complete if the organization answered "Yes" | on Form 990 Part IV line   | 11h See Form 990 Part V line 12           |                        |
| (a) Description of security or category (including name of security)                  | (b) Book value             | (c) Method of valuation: Cost or en       | d-of-vear market value |
| (A) F2 (11.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1                                        | (b) Book value             | (o) Wellied of Valdation. Cool of oil     | a or your market value |
| (1) Financial derivatives (2) Closely held equity interests                           |                            |                                           |                        |
| (3) Other                                                                             |                            |                                           |                        |
| (A)                                                                                   |                            |                                           |                        |
| (B)                                                                                   |                            |                                           |                        |
| (C)                                                                                   |                            |                                           |                        |
| (D)                                                                                   |                            |                                           |                        |
| (E)                                                                                   |                            |                                           |                        |
| (F)                                                                                   |                            |                                           |                        |
| (G)                                                                                   |                            |                                           |                        |
| (H)                                                                                   |                            |                                           |                        |
| Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)                      |                            |                                           |                        |
| Part VIII Investments - Program Related.                                              |                            |                                           |                        |
| Complete if the organization answered "Yes"                                           | on Form 990, Part IV, line | 11c. See Form 990. Part X. line 13.       |                        |
| (a) Description of investment                                                         | (b) Book value             | (c) Method of valuation: Cost or en       | d-of-year market value |
| (1)                                                                                   |                            |                                           | ,                      |
| (2)                                                                                   |                            |                                           |                        |
| (3)                                                                                   |                            |                                           |                        |
| (4)                                                                                   |                            |                                           |                        |
| (5)                                                                                   |                            |                                           |                        |
| (6)                                                                                   |                            |                                           |                        |
| (7)                                                                                   |                            |                                           |                        |
| (8)                                                                                   |                            |                                           |                        |
| (9)                                                                                   |                            |                                           |                        |
| Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)                      |                            |                                           |                        |
| Part IX Other Assets.                                                                 | l                          |                                           |                        |
| Complete if the organization answered "Yes"                                           | on Form 990, Part IV, line | 11d. See Form 990, Part X, line 15.       |                        |
| (a)                                                                                   | 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                         | e 15.)                     | <b>&gt;</b>                               |                        |
| Part X Other Liabilities.                                                             |                            |                                           | •                      |
| Complete if the organization answered "Yes"                                           | on Form 990, Part IV, line | 11e or 11f. See Form 990, Part X, line 25 | 5.                     |
| 1. (a) Description of liability                                                       |                            |                                           | (b) Book value         |
| (1) Federal income taxes                                                              |                            |                                           |                        |
| (2)                                                                                   |                            |                                           |                        |
| (3)                                                                                   |                            |                                           |                        |
| (4)                                                                                   |                            |                                           |                        |
| (5)                                                                                   |                            |                                           |                        |
| (6)                                                                                   |                            |                                           |                        |
| (7)                                                                                   |                            |                                           |                        |
| (8)                                                                                   |                            |                                           |                        |
| (9)                                                                                   |                            |                                           |                        |

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Total. (Column (b) must equal Form 990. Part X. col. (B) line 25.)

13-6089816 Page 4

| Par        | ·                                                                                                                                                | ts With I  | Revenue per Re        | turn.       |                                         |
|------------|--------------------------------------------------------------------------------------------------------------------------------------------------|------------|-----------------------|-------------|-----------------------------------------|
|            | Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.                                                                      |            |                       |             | 0 004 076                               |
| 1          |                                                                                                                                                  |            |                       | 1           | 8,884,876.                              |
| 2          | Amounts included on line 1 but not on Form 990, Part VIII, line 12:                                                                              | 1.1        |                       |             |                                         |
| a          | Net unrealized gains (losses) on investments                                                                                                     | 2a         | 627 400               |             |                                         |
| b          | Donated services and use of facilities                                                                                                           | 2b         | 627,488.              |             |                                         |
| C          | Recoveries of prior year grants                                                                                                                  | 2c         |                       |             |                                         |
| d          | Other (Describe in Part XIII.)                                                                                                                   | 2d         |                       | _           | 627 400                                 |
| е          | Add lines 2a through 2d                                                                                                                          |            |                       | 2e          | 627,488.<br>8,257,388.                  |
| 3          | Subtract line 2e from line 1                                                                                                                     |            |                       | 3           | 0,237,300.                              |
| 4          | Amounts included on Form 990, Part VIII, line 12, but not on line 1:                                                                             | 1.1        |                       |             |                                         |
| a          | Investment expenses not included on Form 990, Part VIII, line 7b                                                                                 | 4a<br>4b   | -51,343.              |             |                                         |
| b          | Other (Describe in Part XIII.)                                                                                                                   |            | •                     |             | E1 2/2                                  |
| C          | Add lines 4a and 4b                                                                                                                              |            |                       | 4c          | -51,343.<br>8,206,045.                  |
| Dai        | Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I, line 12.)  t XII Reconciliation of Expenses per Audited Financial Statemer | nte With   | Evnenses ner E        | 5<br>Setur  |                                         |
| ı aı       | Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.                                                                      | ito with   | Expenses per i        | icturi      | •                                       |
| 1          |                                                                                                                                                  |            |                       | 1           | 5,861,960.                              |
| 2          | Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25:                    |            |                       |             | 3,001,000                               |
| a          | Donated services and use of facilities                                                                                                           | 2a         | 627,488.              |             |                                         |
| a<br>b     |                                                                                                                                                  | 2b         | 027,1001              |             |                                         |
| D          | Prior year adjustments Other losses                                                                                                              | 2c         |                       |             |                                         |
| d          | Other losses Other (Describe in Part XIII.)                                                                                                      | 2d         | 51,343.               |             |                                         |
| e          |                                                                                                                                                  |            | •                     | 2e          | 678,831.                                |
| 3          | Add lines <b>2a</b> through <b>2d</b> Subtract line <b>2e</b> from line <b>1</b>                                                                 |            |                       | 3           | 5,183,129.                              |
| 4          | Amounts included on Form 990, Part IX, line 25, but not on line 1:                                                                               |            |                       | H           | 3/103/1230                              |
| 7          | Investment expenses not included on Form 990, Part VIII, line 7b                                                                                 | 42         |                       |             |                                         |
| a<br>b     |                                                                                                                                                  | 4a 4b      |                       |             |                                         |
|            | Other (Describe in Part XIII.) Add lines <b>4a</b> and <b>4b</b>                                                                                 |            |                       | 4c          | 0.                                      |
| 5          | Add lines <b>4a</b> and <b>4b</b> Total expenses. Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 18.)                 |            |                       | 5           | 5,183,129.                              |
|            | t XIII Supplemental Information.                                                                                                                 |            |                       |             | 3/103/123                               |
|            | de 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 )    | ( line 2: Part XI                       |
|            | 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additi                                                          |            |                       | , , , , , , | ,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
|            |                                                                                                                                                  |            |                       |             |                                         |
|            |                                                                                                                                                  |            |                       |             |                                         |
| PAF        | T X, LINE 2:                                                                                                                                     |            |                       |             |                                         |
| THE        | FOUNDATION BELIEVES IT HAS NO UNCERTAIN TA                                                                                                       | AX POS     | SITIONS AS            | OF I        | DECEMBER                                |
|            |                                                                                                                                                  |            |                       |             |                                         |
| <u>31,</u> | 2021 AND 2020 IN ACCORDANCE WITH ACCOUNTIN                                                                                                       | NG STA     | ANDARDS COD           | IFI         | CATION                                  |
| <u>("</u>  | SC") TOPIC 740, WHICH PROVIDES STANDARDS FO                                                                                                      | OR EST     | TABLISHING            | AND         |                                         |
| CLP        | SSIFYING ANY TAX PROVISIONS FOR UNCERTAIN                                                                                                        | rax Po     | SITIONS.              |             |                                         |
|            |                                                                                                                                                  |            |                       |             |                                         |
|            |                                                                                                                                                  |            |                       |             |                                         |
| PAF        | T XI, LINE 4B - OTHER ADJUSTMENTS:                                                                                                               |            |                       |             |                                         |
| DIF        | ECT FUNDRAISING EXPENSES                                                                                                                         |            |                       |             | -51,343.                                |
|            |                                                                                                                                                  |            |                       |             |                                         |
| P Z F      | T XII, LINE 2D - OTHER ADJUSTMENTS:                                                                                                              |            |                       |             |                                         |
|            |                                                                                                                                                  |            |                       |             |                                         |
| DIF        | ECT FUNDRAISING EXPENSES                                                                                                                         |            |                       |             | 51,343.                                 |

| Schedule D | (Form 990) 2021 SAVE THE MUSIC FOUNDATION                          | 13-0089810 | Page <b>5</b> |
|------------|--------------------------------------------------------------------|------------|---------------|
| Part XIII  | Save the Mosic Foundation   Supplemental Information   (continued) |            |               |
|            |                                                                    |            |               |
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#### **SCHEDULE G** (Form 990)

Department of the Treasury Internal Revenue Service

#### **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.

32 OMB No. 1545-0047

Open to Public Inspection

Name of the organization

**Employer identification number** 

| SAVE TH                                                                                                                                                                                                                                                                                                                                                                                | E MUSIC FOUNDATION                                                                                                                                        |                                               |                                                |                                                                                               | 13-6089                                                                    | 816                                                     |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|------------------------------------------------|-----------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|---------------------------------------------------------|
|                                                                                                                                                                                                                                                                                                                                                                                        | Complete if the organization answe                                                                                                                        | red "Y                                        | es" or                                         | n Form 990, Part IV, I                                                                        |                                                                            |                                                         |
| <ul> <li>1 Indicate whether the organization rais</li> <li>a Mail solicitations</li> <li>b Internet and email solicitations</li> <li>c Phone solicitations</li> <li>d In-person solicitations</li> <li>2 a Did the organization have a written of key employees listed in Form 990, Poly Bit "Yes," list the 10 highest paid individual compensated at least \$5,000 by the</li> </ul> | 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<br>tion of<br>fundra<br>(includant)   | non-g<br>gover<br>aising<br>ding of<br>onal fu | overnment grants<br>nment grants<br>events<br>ficers, directors, trus<br>undraising services? | Yes                                                                        | <del></del>                                             |
| (i) Name and address of individual or entity (fundraiser)                                                                                                                                                                                                                                                                                                                              | (ii) Activity                                                                                                                                             | (iii)<br>fundi<br>have c<br>or cor<br>contrib | Did<br>raiser<br>ustody<br>ntrol of<br>utions? | (iv) Gross receipts from activity                                                             | (v) Amount paid<br>to (or retained by)<br>fundraiser<br>listed in col. (i) | (vi) Amount paid<br>to (or retained by)<br>organization |
|                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                           | Yes                                           | No                                             |                                                                                               |                                                                            |                                                         |
|                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                           |                                               |                                                |                                                                                               |                                                                            |                                                         |
|                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                           |                                               |                                                |                                                                                               |                                                                            |                                                         |
|                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                           |                                               |                                                |                                                                                               |                                                                            |                                                         |
|                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                           |                                               |                                                |                                                                                               |                                                                            |                                                         |
|                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                           |                                               |                                                |                                                                                               |                                                                            |                                                         |
|                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                           |                                               |                                                |                                                                                               |                                                                            |                                                         |
|                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                           |                                               |                                                |                                                                                               |                                                                            |                                                         |
|                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                           |                                               |                                                |                                                                                               |                                                                            |                                                         |
|                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                           |                                               |                                                |                                                                                               |                                                                            |                                                         |
| <u>Total</u>                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                           |                                               | <b>•</b>                                       |                                                                                               |                                                                            |                                                         |
| 3 List all states in which the organizatio or licensing.                                                                                                                                                                                                                                                                                                                               | n is registered or licensed to solicit o                                                                                                                  | ontrib                                        | utions                                         | or has been notified                                                                          | it is exempt from re                                                       | gistration                                              |
|                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                           |                                               |                                                |                                                                                               |                                                                            |                                                         |
|                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                           |                                               |                                                |                                                                                               |                                                                            |                                                         |
|                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                           |                                               |                                                |                                                                                               |                                                                            |                                                         |
|                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                           |                                               |                                                |                                                                                               |                                                                            |                                                         |
|                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                           |                                               |                                                |                                                                                               |                                                                            |                                                         |
|                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                           |                                               |                                                |                                                                                               |                                                                            |                                                         |
|                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                           |                                               |                                                |                                                                                               |                                                                            |                                                         |
|                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                           |                                               |                                                |                                                                                               |                                                                            |                                                         |
|                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                           |                                               |                                                |                                                                                               |                                                                            |                                                         |
|                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                           |                                               |                                                |                                                                                               |                                                                            |                                                         |

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| Pa              | rt I   | <u> </u>                                         | •                       |                                               |                    |                                                  |
|-----------------|--------|--------------------------------------------------|-------------------------|-----------------------------------------------|--------------------|--------------------------------------------------|
|                 |        | of fundraising event contributions and gro       |                         |                                               |                    | ts greater than \$5,000.                         |
|                 |        |                                                  | (a) Event #1            | (b) Event #2                                  | (c) Other events   | (d) Total events                                 |
|                 |        |                                                  |                         | SAVE MUSIC                                    | NONE               | (add col. (a) through                            |
|                 |        |                                                  |                         | LOS ANGELES                                   | (1.1.1.1.)         | col. <b>(c)</b> )                                |
| <u>e</u>        |        |                                                  | (event type)            | (event type)                                  | (total number)     |                                                  |
| Revenue         | 1      | Gross receipts                                   | 131,071.                | 356,496.                                      |                    | 487,567.                                         |
|                 | 2      | Less: Contributions                              | 106,416.                | 285,592.                                      |                    | 392,008.                                         |
| _               | 3      | Gross income (line 1 minus line 2)               | 24,655.                 | 70,904.                                       |                    | 95,559.                                          |
|                 | 4      | Cash prizes                                      |                         |                                               |                    |                                                  |
| "               | 5      | Noncash prizes                                   | 24,655.                 | 29,237.                                       |                    | 53,892.                                          |
| bense           | 6      | Rent/facility costs                              |                         | 39,994.                                       |                    | 39,994.                                          |
| Direct Expenses | 7      | Food and beverages                               |                         |                                               |                    |                                                  |
| ⊡               |        | Entartainment                                    |                         |                                               |                    |                                                  |
|                 | 8<br>9 | Entertainment Other direct expenses              |                         |                                               |                    |                                                  |
|                 | 10     | Direct expense summary. Add lines 4 through      | 0 1 1 ( 1)              |                                               | <b>•</b>           | 93,886.                                          |
|                 | 11     | , ,                                              |                         |                                               |                    | 1,673.                                           |
| Pa              | rt I   | <b>II Gaming.</b> Complete if the organization   | answered "Yes" on Form  | 990, Part <b>I</b> V, line 19, or             | reported more than |                                                  |
|                 |        | \$15,000 on Form 990-EZ, line 6a.                | T                       | T                                             | T                  | T                                                |
| e               |        |                                                  | (a) Bingo               | (b) Pull tabs/instant bingo/progressive bingo | (c) Other gaming   | (d) Total gaming (add col. (a) through col. (c)) |
| Revenue         |        |                                                  |                         | singer progressive singe                      |                    | con (a) unoagn con (o))                          |
|                 | 1      | Gross revenue                                    |                         |                                               |                    |                                                  |
|                 |        |                                                  |                         |                                               |                    |                                                  |
| nses            | 2      | Cash prizes                                      |                         |                                               |                    |                                                  |
| Direct Expenses | 3      | Noncash prizes                                   |                         |                                               |                    |                                                  |
| Direc           | 4      | Rent/facility costs                              |                         |                                               |                    |                                                  |
|                 | 5      | Other direct expenses                            |                         |                                               |                    |                                                  |
|                 | 6      | Volunteer labor                                  | Yes % No                | Yes % No                                      | Yes % No           |                                                  |
|                 | 7      | Direct expense summary. Add lines 2 through      | n 5 in column (d)       |                                               | <b>&gt;</b>        |                                                  |
|                 | 8      | Net gaming income summary. Subtract line 7       | from line 1, column (d) |                                               | <b>&gt;</b>        |                                                  |
| 9               | Ent    | ter the state(s) in which the organization condu | icte gaming activities: |                                               |                    |                                                  |
|                 |        | the organization licensed to conduct gaming ac   | _                       |                                               |                    | Yes No                                           |
|                 |        | No," explain:                                    |                         |                                               |                    |                                                  |
|                 | _      |                                                  |                         |                                               |                    |                                                  |
|                 |        |                                                  |                         |                                               |                    |                                                  |
|                 |        | ere any of the organization's gaming licenses re |                         |                                               | year?              | Yes No                                           |
| C               | 11     | Yes," explain:                                   |                         |                                               |                    |                                                  |
|                 |        |                                                  |                         |                                               |                    |                                                  |

| SCII | edule G (1 0111 990) 2021 SAVE THE MOSIC FOODDATION 15                                                                     | 0002         | ОТО      | raye 3   |
|------|----------------------------------------------------------------------------------------------------------------------------|--------------|----------|----------|
| 11   | Does the organization conduct gaming activities with nonmembers?                                                           |              | Yes      | ☐ No     |
| 12   | 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:                                                                   |              |          |          |
| а    | The organization's facility                                                                                                | 13a          |          | %        |
|      | An outside facility                                                                                                        | 13b          |          | 9/       |
| 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 > \$ and the amount                              |              |          |          |
|      | of gaming revenue retained by the third party  \$\bigs\\$                                                                  |              |          |          |
| С    | If "Yes," enter name and address of the third party:                                                                       |              |          |          |
|      | Name                                                                                                                       |              |          |          |
|      | Address ▶                                                                                                                  |              |          |          |
| 16   | Gaming manager information:                                                                                                |              |          |          |
|      | Name                                                                                                                       |              |          |          |
|      | Gaming 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                  |              |          |          |
| а    | ratain the state gaming license?                                                                                           |              | Yes      | □ No     |
| h    | 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   | rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III  | art III. lir | 168 9 (  | 9h 10h   |
|      | 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.                           | <i></i> ,    | 100 0, 1 | )b, 10b, |
|      | Tob, 100, 10, and 115, as applicable 1100 provide any additional monations coefficients                                    |              |          |          |
|      |                                                                                                                            |              |          |          |
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|      |                                                                                                                            |              |          |          |

| Schedule G (Form 990) SAVE THE MUSIC FOUNDATION | 13-6089816 | Page 4 |
|-------------------------------------------------|------------|--------|
| Part IV   Supplemental Information (continued)  |            |        |
|                                                 |            |        |
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SCHEDULE

(Form 990)

Department of the Treasury

Internal Revenue Service

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

Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

OMB No. 1545-0047

36

► Attach to Form 990.

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

Open to Public Inspection

**8** 45. **Employer identification number** 13-6089816 (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) FMV104 109 FMV FMVFMVFMV8,346, FMV 60,522. 45,062. 54,538 49,811, (e) Amount of assistance 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 (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 04-6001380 95-6000119 58-6000134 86-6000500 52-2064235 55-6000295 General Information on Grants and Assistance (p) EIN criteria used to award the grants or assistance? ANAHEIM ELEMENTARY SCHOOL DISTRICT 1 (a) Name and address of organization DISTRICT - 295 WEST WESTERN AVE BALTIMORE CITY PUBLIC SCHOOLS AVONDALE ELEMENTARY SCHOOL or government ATLANTA PUBLIC SCHOOLS BARBOUR COUNTY SCHOOLS BOSTON PUBLIC SCHOOLS BALTIMORE, MD 21202 Name of the organization 130 TRINITY AVE SW AVONDALE, AZ 85323 200 EAST NORTH AVE PHILIPPI, WV 26416 2300 WASHINGTON ST ANAHEIM, CA 92805 ATLANTA, GA 30303 BOSTON, MA 02119 1001 S EAST ST 45 SCHOOL ST Part I Part II Q

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

Schedule I (Form 990) 2021

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| AT                |
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| SAVE              |
| lule I (Form 990) |

| Schedule I (Form 990) SAVE THE MUSIC FOUNDATION    Part II   Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments | THE MUSIC FOU | FOUNDATION to Domestic Organizations | and Domestic Go          |           | (Schedule I (Form 990), Part II.)                     |                                        | 13-6089816 Page 1                  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|--------------------------------------|--------------------------|-----------|-------------------------------------------------------|----------------------------------------|------------------------------------|
|                                                                                                                                                             | (b) EIN       | (c) IRC section<br>if applicable     | (d) Amount of cash grant | 1 - 5 0 1 | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| CHICAGO PUBLIC SCHOOLS 42 WEST MADISON ST CHICAGO, IL 60602                                                                                                 | 55-6000306    | 115                                  | 0.                       | 13,019.   | FMV                                                   | MUSIC<br>INSTRUMENTS                   | MUSIC EDUCATION                    |
| CLEVELAND METROPOLITAN SCHOOL<br>DISTRICT - 1111 SUPERIOR AVE E,<br>STE 1800 - CLEVELAND, OH 44114                                                          | 34-6000662    | 115                                  | .0                       | 34,703.   | FMV                                                   | MUSIC<br>INSTRUMENTS                   | MUSIC EDUCATION                    |
| COLUMBIA HEIGHTS PUBLIC SCHOOLS<br>1440 49TH AVE NE<br>COLUMBIA HEIGHTS, MN 55421                                                                           | 41-6000080    | 115                                  | 0                        | 17,351.   | FMV                                                   | MUSIC<br>INSTRUMENTS                   | MUSIC EDUCATION                    |
| DANBURY PUBLIC SCHOOLS 63 BEAVER BROOK RD DANBURY, CT 06810                                                                                                 | 32-1015313    | 115                                  | .0                       | 9,990.    | FMV                                                   | MUSIC<br>INSTRUMENTS                   | MUSIC EDUCATION                    |
| DAYTON PUBLIC SCHOOLS<br>115 S. LUDLOW ST<br>DAYTON, OH 45402                                                                                               | 31-6000784    | 115                                  | .0                       | 184,536.  | FMV                                                   | MUSIC<br>INSTRUMENTS                   | MUSIC EDUCATION                    |
| DENVER PUBLIC SCHOOLS 1860 LINCOLN ST DENVER, CO 80203                                                                                                      | 84-6001099    | 115                                  | .0                       | 9,445.    | FMV                                                   | MUSIC<br>INSTRUMENTS                   | MUSIC EDUCATION                    |
| ELIZABETH PUBLIC SCHOOLS<br>500 NORTH BROAD ST<br>ELIZABETH, NJ 07208                                                                                       | 39-1320110    | 115                                  | 0.                       | 34,603.   | FMV                                                   | MUSIC<br>INSTRUMENTS                   | MUSIC EDUCATION                    |
| FLINT COMMUNITY SCHOOLS 923 E KEARSLEY ST FLINT, MI 48503                                                                                                   | 38-6001185    | 115                                  | 0                        | 49,334.   | FMV                                                   | MUSIC<br>INSTRUMENTS                   | MUSIC EDUCATION                    |
| HOLLY SPRINGS SCHOOL DISTRICT 840 HWY 178 EAST HOLLY SPRINGS, MS 38635                                                                                      | 64-0745163    | 115                                  | .0                       | 62,414.   | FMV                                                   | MUSIC<br>INSTRUMENTS                   | MUSIC EDUCATION                    |
|                                                                                                                                                             |               |                                      |                          |           |                                                       |                                        | Schedule I (Form 990)              |

| Schedule I (Form 990) SAVE THE 1                                                                       | THE MUSIC FOU     | FOUNDATION                       |                             |                                        |                                                                | 1                                         | 3-6089816 Page 1                   |
|--------------------------------------------------------------------------------------------------------|-------------------|----------------------------------|-----------------------------|----------------------------------------|----------------------------------------------------------------|-------------------------------------------|------------------------------------|
| Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments | Assistance to Dor | mestic Organizations             | and Domestic Go             |                                        | (Schedule I (Form 990), Part II.)                              | rt II.)                                   |                                    |
| (a) Name and address of organization or government                                                     | (b) EIN           | (c) IRC section<br>if applicable | (d) Amount of<br>cash grant | (e) Amount of<br>noncash<br>assistance | (f) Method of<br>valuation<br>(book, FMV,<br>appraisal, other) | (g) Description of<br>non-cash assistance | (h) Purpose of grant or assistance |
| HOLMES COUNTY CONSOLIDATED SCHOOL<br>DISTRICT - 1313 OLIVE ST -<br>LEXINGTON, MS 39095                 | 82-4402219        | 115                              | .0                          | 34,603.                                | FMV                                                            | MUSIC<br>INSTRUMENTS                      | MUSIC EDUCATION                    |
| HOUSTON INDEPENDENT SCHOOL<br>DISTRICT - 4400 WEST 18TH ST -<br>HOUSTON, TX 77092                      | 10-1912072        | 115                              | 0.                          | 27,137.                                | FMV                                                            | MUSIC<br>INSTRUMENTS                      | MUSIC EDUCATION                    |
| ISD #13 COLUMBIA HEIGHTS PUBLIC<br>SCHOOLS - 1440 49TH NE - COLUMBIA<br>HEIGHTS, MN 55421              | 41-6000090        | 115                              | .0                          | 17,351,                                | FMV                                                            | MUSIC<br>INSTRUMENTS                      | MUSIC EDUCATION                    |
| JAIL GUITAR DOOR<br>842 N FAIRFAX AVE<br>LOS ANGELES, CA 90046                                         | 27-0998581        | 501(C)(3)                        | 0.                          | 9,082.                                 | FMV                                                            | MUSIC<br>INSTRUMENTS                      | MUSIC EDUCATION                    |
| JERSEY CITY PUBLIC SCHOOLS 346 CLAREMONT AVE JERSEY CITY, NJ 07305                                     | 22-6002012        | 115                              | 0.                          | 17,351.                                | FMV                                                            | MUSIC<br>INSTRUMENTS                      | MUSIC EDUCATION                    |
| KANAWHA COUNTY SCHOOLS 200 ELIZABETH ST CHARLESTON, WV 24311                                           | 55-6000337        | 115                              | .0                          | 49,811.                                | FMV                                                            | MUSIC<br>INSTRUMENTS                      | MUSIC EDUCATION                    |
| LELAND SCHOOL DISTRICT<br>408 EAST 4TH ST<br>LELAND, MS 38756                                          | 64-0797427        | 115                              | .0                          | 62,414.                                | FMV                                                            | MUSIC<br>INSTRUMENTS                      | MUSIC EDUCATION                    |
| LOS ANGELES UNIFIED SCHOOL<br>DISTRICT - 333 S BEAUDRY AVE - LOS<br>ANGELES, CA 90017                  | 95-6001908        | 115                              | .0                          | 279,016,                               | FMV                                                            | MUSIC<br>INSTRUMENTS                      | MUSIC EDUCATION                    |
| METROPOLITAN NASHVILLE PUBLIC<br>SCHOOLS - 2601 BRANSFORD AVE -<br>NASHVILLE, TN 37204                 | 62-0717138        | 115                              | 0                           | 107,769.                               | FMV                                                            | MUSIC<br>INSTRUMENTS                      | MUSIC EDUCATION                    |
|                                                                                                        |                   |                                  |                             |                                        |                                                                |                                           | Schedule I (Form 990)              |

| Schedule I (Form 990) SAVE THE MUSIC FOUNDATION  Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments | THE MUSIC FOU. | FOUNDATION to Domestic Organizations | and Domestic Go          |          | (Schedule I (Form 990). Part II.)                     | 1                                      | 3-6089816 Page 1                      |
|---------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|--------------------------------------|--------------------------|----------|-------------------------------------------------------|----------------------------------------|---------------------------------------|
| (a) Name and address of organization or government                                                                                                      | (b) EIN        | (c) IRC section<br>if applicable     | (d) Amount of cash grant | 1 0      | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant<br>or assistance |
| MIAMI-DADE COUNTY PUBLIC SCHOOLS<br>1450 NE SECOND AVE SUITE 912<br>MIAMI, FL 33132                                                                     | 59-6000572     | 115                                  | .0                       | 214,977. | FMV                                                   | MUSIC<br>INSTRUMENTS                   | MUSIC EDUCATION                       |
| MISSISSIPPI ACHIEVEMENT SCHOOL<br>DISTRICT - 1133 CALHOUN AVE -<br>YAZOO CITY, MS 39194                                                                 | 64-6000478     | 115                                  | .0                       | 45,062.  | FMV                                                   | MUSIC<br>INSTRUMENTS                   | MUSIC EDUCATION                       |
| MORTON SCHOOL DISTRICT<br>152 WESTLAKE AVE<br>MORTON, WA 98356                                                                                          | 91-0998621     | 115                                  | 0.                       | 58,245.  | FMV                                                   | MUSIC<br>INSTRUMENTS                   | MUSIC EDUCATION                       |
| NEW YORK CITY DEPARTMENT OF<br>EDUCATION - 52 CHAMBER ST - NEW<br>YORK, NY 10007                                                                        | 12-6400434     | 115                                  | .0                       | 64,488.  | FMV                                                   | MUSIC<br>INSTRUMENTS                   | MUSIC EDUCATION                       |
| NEWARK BOARD OF EDUCATION<br>15 STATE ST<br>NEWARK, NJ 07104                                                                                            | 22-6002140     | 115                                  | 0.                       | 539,921. | FMV                                                   | MUSIC<br>INSTRUMENTS                   | MUSIC EDUCATION                       |
| NICHOLAS COUNTY SCHOOLS<br>400 OLD MAIN DR<br>SUMMERSVILLE, WV 26651                                                                                    | 55-6000372     | 115                                  | .0                       | 49,811.  | FMV                                                   | MUSIC<br>INSTRUMENTS                   | MUSIC EDUCATION                       |
| ORLEANS PARISH PUBLIC SCHOOLS<br>3510 GENERAL DEGAULLE<br>NEW ORLEANS, LA 70114                                                                         | 72-1409800     | 115                                  | 0.                       | 182,899. | FMV                                                   | MUSIC<br>INSTRUMENTS                   | MUSIC EDUCATION                       |
| PAJARO VALLEY UNIFIED SCHOOL<br>DISTRICT - 294 GREEN VALLEY RD -<br>WATSONVILLE, CA 95076                                                               | 77-0375541     | 115                                  | 0.                       | 34,603.  | FMV                                                   | MUSIC<br>INSTRUMENTS                   | MUSIC EDUCATION                       |
| PASSAIC PUBLIC SCHOOLS<br>663 MAIN AVE<br>PASSAIC, NJ 07055                                                                                             | 22-6002193     | 115                                  | 0.                       | 34,603.  | FMV                                                   | MUSIC<br>INSTRUMENTS                   | MUSIC EDUCATION                       |
|                                                                                                                                                         |                |                                      |                          |          |                                                       |                                        | Schedule I (Form 990)                 |

| Schedule | orm 990) SAVE THE MUSIC FOUNDATION        | FOUNDATION                                                                           | 13-6089816 | Page 1 |
|----------|-------------------------------------------|--------------------------------------------------------------------------------------|------------|--------|
| Part II  | ntinuation of Grants and Other Assistance | to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) |            |        |

| (a) Name and address of corganization or government or government (b) EIN (c) IRC section or ganization or government (f) Method of if applicable cash grant assistance (book, FMV, appraisal, other) | (b) EIN    | (c) IRC section<br>if applicable | (d) Amount of cash grant | (e) Amount of noncash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|----------------------------------|--------------------------|----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| PATERSON PUBLIC SCHOOLS<br>90 DELAWARE AVE<br>PATERSON, NJ 07503                                                                                                                                      | 22-6002199 | 115                              | .0                       | 17,351.                          | FMV                                                   | MUSIC<br>INSTRUMENTS                   | MUSIC EDUCATION                    |
| PRESTON COUNTY SCHOOLS 731 PRESTON DR KINGWOOD, WV 02637                                                                                                                                              | 55-6000385 | 115                              | 0.                       | 49,811.                          | FMV                                                   | MUSIC<br>INSTRUMENTS                   | MUSIC EDUCATION                    |
| PUTNAM COUNTY SCHOOLS 77 COURTHOUSE DR WINFIELD, WV 25213                                                                                                                                             | 55-6000387 | 115                              | 0.                       | 49,811.F                         | FMV                                                   | MUSIC<br>INSTRUMENTS                   | MUSIC EDUCATION                    |
| SAN FRANCISCO UNIFIED SCHOOL<br>DISTRICT - 55 FRANKLIN ST - SAN<br>FRANCISCO, CA 94102                                                                                                                | 94-6000416 | 115                              | 0.                       | 104,643.                         | FMV                                                   | MUSIC<br>INSTRUMENTS                   | MUSIC EDUCATION                    |
| SAN MARCOS UNIFIED SCHOOL DISTRICT<br>256 PICO AVE, SUITE 250<br>SAN MARCOS, CA 92069                                                                                                                 | 95-2939365 | 115                              | 0.                       | 121,110.                         | FMV                                                   | MUSIC<br>INSTRUMENTS                   | MUSIC EDUCATION                    |
| SHELBY COUNTY SCHOOLS 2485 UNION AVE MEMPHIS, TN 38112                                                                                                                                                | 62-6000834 | 115                              | .0                       | 14,008.                          | FMV                                                   | MUSIC<br>INSTRUMENTS                   | MUSIC EDUCATION                    |
| SUCCESSFUL INCORPORATED<br>9653 WOODLAN MANOR CV<br>CORDOVA, TN 38018                                                                                                                                 | 83-2609179 | 115                              | 0.                       | 46,689.                          | FMV                                                   | MUSIC<br>INSTRUMENTS                   | MUSIC EDUCATION                    |
| WAKE COUNTY PUBLIC SCHOOLS<br>5625 DILLARD DR<br>CARY, NC 27518                                                                                                                                       | 56-1137759 | 115                              | .0                       | 58,074.                          | FMV                                                   | MUSIC<br>INSTRUMENTS                   | MUSIC EDUCATION                    |
| WAYNE COUNTY SCHOOLS<br>212 N COURT ST<br>WAYNE, WV 25570                                                                                                                                             | 55-6000409 | 115                              | .0                       | 49,811.FMV                       | MV                                                    | MUSIC<br>INSTRUMENTS                   | MUSIC EDUCATION                    |
|                                                                                                                                                                                                       |            |                                  |                          |                                  |                                                       |                                        | Schedule I (Form 990)              |

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| Schedule I (Form 990) SAVE THE MUSIC FOUNDATION  Part II   Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) | THE MUSIC FOU | FOUNDATION to Domestic Organizations | and Domestic Go             | vernments (Sche                  | dule I (Form 990), Par                                         |                                           | 13-6089816 Page 1                              |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|--------------------------------------|-----------------------------|----------------------------------|----------------------------------------------------------------|-------------------------------------------|------------------------------------------------|
| (a) Name and address of organization or government                                                                                                                                          | (b) EIN       | (c) IRC section<br>if applicable     | (d) Amount of<br>cash grant | (e) Amount of noncash assistance | (f) Method of<br>valuation<br>(book, FMV,<br>appraisal, other) | (g) Description of<br>non-cash assistance | ( <b>h</b> ) Purpose of grant<br>or assistance |
| WETZEL COUNTY SCHOOL DISTRICT<br>333 FOUNDRY ST<br>NEW MARTINVILLE, WV 26155                                                                                                                | 55-6000413    | 115                                  | .0                          | 49,811.                          | FMV                                                            | MUSIC<br>INSTRUMENTS                      | MUSIC EDUCATION                                |
| WOOD COUNTY SCHOOL DISTRICT<br>1210 THIRTEENTH ST<br>PARKERSBURG, WV 26101                                                                                                                  | 55-6000418    | 115                                  | .0                          | 149,434.                         | FMV                                                            | MUSIC<br>INSTRUMENTS                      | MUSIC EDUCATION                                |
| WYOMING COUNTY SCHOOLS<br>155 PARK ST<br>PINEVILLE, WV 24874                                                                                                                                | 55-6000422    | 115                                  | .0                          | 99,623.                          | FMV                                                            | MUSIC<br>INSTRUMENTS                      | MUSIC EDUCATION                                |
|                                                                                                                                                                                             |               |                                      |                             |                                  |                                                                |                                           |                                                |
|                                                                                                                                                                                             |               |                                      |                             |                                  |                                                                |                                           |                                                |
|                                                                                                                                                                                             |               |                                      |                             |                                  |                                                                |                                           |                                                |
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|                                                                                                                                                                                             |               |                                      |                             |                                  |                                                                |                                           |                                                |
|                                                                                                                                                                                             |               |                                      |                             |                                  |                                                                |                                           |                                                |
|                                                                                                                                                                                             |               |                                      |                             |                                  |                                                                |                                           | Schedule I (Form 990)                          |

Page 2

13-6089816

SAVE THE MUSIC FOUNDATION

Schedule I (Form 990) 2021

Part III

**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.

(f) Description of noncash assistance (e) Method of valuation (book, FMV, appraisal, other) CURRENT THE FOUNDATION DISTRICT ART SUPERVISOR AND GRANTEES CERTIFIED INSTRUMENTAL MUSIC TEACHERS Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. AND INFORMATION AND ADVICE ARE PROVIDED TO SCHOOL TO ANSWER QUESTIONS, PROVIDE ASSISTANCE WITH PROMOTING, MAINTAINING, AND TELEPHONE, THE MUSIC FOUNDATION SURVEYS (d) Amount of non-cash assistance AS MAKES SITE VISITS. ELECTRONIC MAIL, (c) Amount of cash grant (b) Number of recipients REGULAR MAIL, SAVE AS WELL THE MUSIC FOUNDATION DBA VH1 SUSTAINING PROGRAMS PUT IN PLACE. AND FORMER GRANT RECIPIENTS, ΒY IN PERSON DURING THE YEAR. (a) Type of grant or assistance AND GRANTEES COMMUNICATE LINE Ι, Part IV SAVE PART

## **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

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Open to Public Inspection

Internal Revenue Service Name of the organization

Part I Questions Regarding Compensation

Department of the Treasury

SAVE THE MUSIC FOUNDATION

Employer identification number 13-6089816

|    |                                                                                                                        |    | Yes | No |
|----|------------------------------------------------------------------------------------------------------------------------|----|-----|----|
| 1a | 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 |     | х  |
|    | Participate in or receive payment from a supplemental nonqualified retirement plan?                                    | 4b |     | Х  |
|    | Participate in or receive payment from an equity-based compensation arrangement?                                       | 4c |     | Х  |
|    | 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:                                                                                         | _  |     | v  |
|    | 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:                                                                                     |    |     | v  |
|    | 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       |    |     | 37 |
| _  | 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)2                                                                                      | a  |     | ı  |

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

Schedule J (Form 990) 2021

SAVE THE MUSIC FOUNDATION

Schedule J (Form 990) 2021

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 W-2 and/or 1099-MISC and/or 1099-NEC compensation | -2 and/or 1099-MISC compensation    | and/or 1099-NEC                     | (C) Retirement and other deferred | ( <b>D</b> ) Nontaxable benefits | (E) Total of columns (B)(i)-(D) | (F) Compensation in column (B)            |
|---------------------------|----------|--------------------------------------------------------------------|-------------------------------------|-------------------------------------|-----------------------------------|----------------------------------|---------------------------------|-------------------------------------------|
| (A) Name and Title        |          | (i) Base<br>compensation                                           | (ii) Bonus & incentive compensation | (iii) Other reportable compensation | compensation                      |                                  |                                 | reported as deferred<br>on prior Form 990 |
| (1) DANIELLE ZALAZNICK    | Ξ        | 183,826.                                                           | 0                                   | 270.                                | 8,708.                            | 25,317.                          | 218,121.                        | 0                                         |
| CHIEF DEVELOPMENT OFFICER | Ξ        | 0.                                                                 | • 0                                 | 0.                                  | 0                                 | 0.                               | 0.                              | 0.                                        |
|                           | (i)      |                                                                    |                                     |                                     |                                   |                                  |                                 |                                           |
|                           | (ii)     |                                                                    |                                     |                                     |                                   |                                  |                                 |                                           |
|                           | Ξ        |                                                                    |                                     |                                     |                                   |                                  |                                 |                                           |
|                           | Ξ        |                                                                    |                                     |                                     |                                   |                                  |                                 |                                           |
|                           | Ξ        |                                                                    |                                     |                                     |                                   |                                  |                                 |                                           |
|                           | €        |                                                                    |                                     |                                     |                                   |                                  |                                 |                                           |
|                           | Ξ        |                                                                    |                                     |                                     |                                   |                                  |                                 |                                           |
|                           | €        |                                                                    |                                     |                                     |                                   |                                  |                                 |                                           |
|                           | Ξ        |                                                                    |                                     |                                     |                                   |                                  |                                 |                                           |
|                           | (ii)     |                                                                    |                                     |                                     |                                   |                                  |                                 |                                           |
|                           | ≘        |                                                                    |                                     |                                     |                                   |                                  |                                 |                                           |
|                           | ▣        |                                                                    |                                     |                                     |                                   |                                  |                                 |                                           |
|                           | Ξ        |                                                                    |                                     |                                     |                                   |                                  |                                 |                                           |
|                           | ▣        |                                                                    |                                     |                                     |                                   |                                  |                                 |                                           |
|                           | Θ        |                                                                    |                                     |                                     |                                   |                                  |                                 |                                           |
|                           | ≘        |                                                                    |                                     |                                     |                                   |                                  |                                 |                                           |
|                           | (i)      |                                                                    |                                     |                                     |                                   |                                  |                                 |                                           |
|                           | ▣        |                                                                    |                                     |                                     |                                   |                                  |                                 |                                           |
|                           | Ξ        |                                                                    |                                     |                                     |                                   |                                  |                                 |                                           |
|                           | ▣        |                                                                    |                                     |                                     |                                   |                                  |                                 |                                           |
|                           | Ξ        |                                                                    |                                     |                                     |                                   |                                  |                                 |                                           |
|                           | ▣        |                                                                    |                                     |                                     |                                   |                                  |                                 |                                           |
|                           | Ξ        |                                                                    |                                     |                                     |                                   |                                  |                                 |                                           |
|                           | <u> </u> |                                                                    |                                     |                                     |                                   |                                  |                                 |                                           |
|                           | Ξ        |                                                                    |                                     |                                     |                                   |                                  |                                 |                                           |
|                           | Ξ        |                                                                    |                                     |                                     |                                   |                                  |                                 |                                           |
|                           | Ξ        |                                                                    |                                     |                                     |                                   |                                  |                                 |                                           |
|                           | ≘        |                                                                    |                                     |                                     |                                   |                                  |                                 |                                           |
|                           | Ξ        |                                                                    |                                     |                                     |                                   |                                  |                                 |                                           |
|                           | Ξ        |                                                                    |                                     |                                     |                                   |                                  |                                 |                                           |

Schedule J (Form 990) 2021

Page 3

13-6089816

Schedule J (Form 990) 2021 Schedule J (Form 990) 2021

| complete this part for any additional information. |
|----------------------------------------------------|
| II. Also c                                         |
| d for Part                                         |
| and 8, and                                         |
| , 6b, 7,                                           |
| 5a, 5b, 6a                                         |
| ı, 4b, 4c,                                         |
| , 1b, 3, 4a                                        |
| , lines 1a,                                        |
| for Part                                           |
| required                                           |
| scriptions                                         |
| ion, or des                                        |
| , explanati                                        |
| ormation,                                          |
| ne inf                                             |
| Provide th                                         |

|  |  |  |  |  |  |  |  |  |  | Schedule J (Form 990) 202 |
|--|--|--|--|--|--|--|--|--|--|---------------------------|
|  |  |  |  |  |  |  |  |  |  |                           |

# SCHEDULE M (Form 990)

**Noncash Contributions** 

**46** OMB No. 1545-0047

2021

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.

SAVE THE MUSIC FOUNDATION

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

Name of the organization

Employer identification number 13-6089816

| Pai | rt I Types of Property                           |                               |                                                   |                                                                           | •                                       |     |     |                 |
|-----|--------------------------------------------------|-------------------------------|---------------------------------------------------|---------------------------------------------------------------------------|-----------------------------------------|-----|-----|-----------------|
|     | ·                                                | (a)<br>Check if<br>applicable | (b) Number of contributions or litems contributed | (c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g | (d)<br>Method of de<br>noncash contribu |     | _   | s               |
| 1   | Art - Works of art                               |                               | items contributed                                 | r orm 550, r art vin, into 1g                                             |                                         |     |     |                 |
| 2   |                                                  |                               |                                                   |                                                                           |                                         |     |     |                 |
| 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                            | Х                             | 109                                               | 34,423.                                                                   | EM77                                    |     |     |                 |
| 9   | Securities - Publicly traded                     |                               | 109                                               | 34,443.                                                                   | L M A                                   |     |     |                 |
| 10  | Securities - Closely held stock                  |                               |                                                   |                                                                           |                                         |     |     |                 |
| 11  | Securities - Partnership, LLC, or                |                               |                                                   |                                                                           |                                         |     |     |                 |
| 40  | 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                                     | X                             | 443                                               | 61,699.                                                                   | EM7                                     |     |     |                 |
| 19  | Food inventory                                   |                               | 443                                               | 01,099.                                                                   | r m v                                   |     |     |                 |
| 20  | Drugs and medical supplies                       |                               |                                                   |                                                                           |                                         |     |     |                 |
| 21  | Taxidermy                                        |                               |                                                   |                                                                           |                                         |     |     |                 |
| 22  | Historical artifacts                             |                               |                                                   |                                                                           |                                         |     |     |                 |
| 23  | Scientific specimens                             |                               |                                                   |                                                                           |                                         |     |     |                 |
| 24  | Archeological artifacts  (MICTO INCIDITM)        | X                             | 2,673                                             | 1,965,263.                                                                | E-MT7                                   |     |     |                 |
| 25  | Other (MUSIC INSTRUM)                            |                               | 2,073                                             | 1,900,200.                                                                | L M A                                   |     |     |                 |
| 26  | Other ()                                         |                               |                                                   |                                                                           |                                         |     |     |                 |
| 27  | Other ()                                         |                               |                                                   |                                                                           |                                         |     |     |                 |
| 28  | Other ( )                                        |                               |                                                   |                                                                           |                                         |     |     |                 |
| 29  | Number of Forms 8283 received by the organic     | -                             | •                                                 |                                                                           |                                         |     |     |                 |
|     | for which the organization completed Form 82     | 83, Part V, L                 | onee Acknowleag                                   | ement <b>29</b>                                                           |                                         |     | V   |                 |
| 00- |                                                  |                               |                                                   | autod in Dout I lines 4 thus.co                                           | L 00 45-4-14                            |     | Yes | No              |
| 30a | During the year, did the organization receive by |                               |                                                   |                                                                           |                                         |     |     |                 |
|     | must hold for at least three years from the date |                               | •                                                 | •                                                                         |                                         | 00- |     | v               |
|     | exempt purposes for the entire holding period'   | ſ                             |                                                   |                                                                           |                                         | 30a |     | X               |
|     | If "Yes," describe the arrangement in Part II.   | :                             |                                                   |                                                                           | :0                                      | 0.4 | v   |                 |
| 31  | Does the organization have a gift acceptance     |                               |                                                   |                                                                           | ions?                                   | 31  | Х   | $\vdash \vdash$ |
| 32a | Does the organization hire or use third parties  |                               | _                                                 | •                                                                         |                                         |     |     | v               |
|     | contributions?                                   |                               |                                                   |                                                                           |                                         | 32a |     | X               |
|     | If "Yes," describe in Part II.                   | .1                            |                                                   |                                                                           |                                         |     |     |                 |
| 33  | If the organization didn't report an amount in c | olumn (c) foi                 | a type of property                                | tor which column (a) is ched                                              | cked,                                   |     |     |                 |
|     | describe in Part II.                             |                               |                                                   |                                                                           |                                         |     |     |                 |

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

Schedule M (Form 990) 2021

| Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information. |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| SCHEDULE M, PART I, COLUMN (B):                                                                                                                                                                                                                                                                             |
| THE NUMBER IN COLUMN (B) REPRESENTS THE NUMBER OF ITEMS CONTRIBUTED.                                                                                                                                                                                                                                        |
|                                                                                                                                                                                                                                                                                                             |
|                                                                                                                                                                                                                                                                                                             |
|                                                                                                                                                                                                                                                                                                             |
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|                                                                                                                                                                                                                                                                                                             |
|                                                                                                                                                                                                                                                                                                             |

# **SCHEDULE 0** (Form 990)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for the latest information.

48 OMB No. 1545-0047 Open to Public Inspection

Internal Revenue Service Name of the organization

SAVE THE MUSIC FOUNDATION

**Employer** identification number 13-6089816

| FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:          |
|-------------------------------------------------------------------------|
| FULL POTENTIAL THROUGH THE POWER OF MAKING MUSIC.                       |
|                                                                         |
| FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:           |
| ACROSS THE COUNTRY.                                                     |
|                                                                         |
| 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.       |
|                                                                         |
| 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            |
| POLICYMAKERS AND ADVOCATES TO HELP ENSURE 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 EXPANDS ITS REACH IN SERVING  |
| ALL PUBLIC SCHOOL STUDENTS PRE-KINDERGARTEN THROUGH 12TH GRADE.         |
|                                                                         |
| 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, TECHNOLOGY, METHOD BOOKS, PROFESSIONAL  |
|                                                                         |

DEVELOPMENT, AND PROGRAM SUPPORT TO PUBLIC ELEMENTARY,

AND HIGH

MIDDLE,

**Employer** identification number

Schedule O (Form 990) 2021 Page **2** 

SAVE THE MUSIC FOUNDATION

13-6089816

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.

## GRANT OFFERINGS AND SCHOOLS SERVED:

Name of the organization

THE FOUNDATION OFFERS FOUR DIFFERENT TYPES OF GRANT PACKAGES TO PUBLIC

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

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

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

STAFF. A SCHOOL MUST MAKE THE COMMITMENT TO CONDUCT THEIR INSTRUMENTAL

MUSIC PROGRAM AS PART OF THE REGULAR SCHOOL DAY, PROVIDE A DESIGNATED

SPACE FOR MUSIC INSTRUCTION AND INSTRUMENT STORAGE, 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.

IN THE 2021 FISCAL YEAR, THE FOUNDATION DELIVERED GRANT PACKAGES (CORE,
INTRO TO MUSIC, J DILLA MUSIC TECH, J DILLA JR. MUSIC TECH, SAVE THE

MUSIC + SONGFARM MUSIC TECH, AND KEYS + KIDS) TO 97 SCHOOLS, TOTALING

OVER 15,500 MUSICAL INSTRUMENTS AND PIECES OF MUSICAL EQUIPMENT, IN 36

SCHOOL DISTRICTS (LISTED BELOW) ACROSS 16 STATES. THESE GRANTS IMPACTED

OVER 51,000 STUDENTS AND MUSIC EDUCATORS BY INCREASING THEIR ACCESS TO

QUALITY MUSICAL INSTRUMENTS, INSTRUCTIONAL BOOKS, EQUIPMENT,

TECHNOLOGY, AND RESOURCES. MORE INFORMATION ABOUT EACH GRANT PACKAGE TO

Name of the organization **Employer** identification number 13-6089816 SAVE THE MUSIC FOUNDATION SCHOOL DISTRICTS THAT RECEIVED GRANT PACKAGES IN FISCAL YEAR 2021: ANAHEIM ELEMENTARY SCHOOL DISTRICT, CALIFORNIA ATLANTA PUBLIC SCHOOLS, GEORGIA AVONDALE ELEMENTARY SCHOOL DISTRICT, ARIZONA BALTIMORE CITY PUBLIC SCHOOLS, MARYLAND BARBOUR COUNTY SCHOOLS, WEST VIRGINIA CLEVELAND METROPOLITAN SCHOOL DISTRICT, OHIO COLUMBIA HEIGHTS PUBLIC SCHOOLS, MINNESOTA DAYTON PUBLIC SCHOOLS, OHIO ELIZABETH PUBLIC SCHOOLS, NEW JERSEY FLINT COMMUNITY SCHOOLS, MICHIGAN HOLLY SPRINGS SCHOOL DISTRICT, MISSISSIPPI HOLMES COUNTY CONSOLIDATED SCHOOL DISTRICT, MISSISSIPPI JERSEY CITY PUBLIC SCHOOLS, NEW JERSEY KANAWHA COUNTY SCHOOLS, WEST VIRGINIA LELAND SCHOOL DISTRICT, MISSISSIPPI LOS ANGELES UNIFIED SCHOOL DISTRICT, CALIFORNIA METROPOLITAN NASHVILLE PUBLIC SCHOOLS, TENNESSEE MIAMI-DADE COUNTY SCHOOL DISTRICT, FLORIDA MISSISSIPPI ACHIEVEMENT SCHOOL DISTRICT, MISSISSIPPI MORTON SCHOOL DISTRICT, WASHINGTON NEWARK BOARD OF EDUCATION, NEW JERSEY NEW YORK CITY DEPARTMENT OF EDUCATION, NEW YORK NICHOLAS COUNTY SCHOOLS, WEST VIRGINIA ORLEANS PARISH SCHOOL BOARD, LOUISIANA PAJARO VALLEY UNIFIED SCHOOL DISTRICT, CALIFORNIA PASSAIC PUBLIC SCHOOLS, NEW JERSEY

Name of the organization **Employer** identification number 13-6089816 SAVE THE MUSIC FOUNDATION PATERSON PUBLIC SCHOOLS, NEW JERSEY PRESTON COUNTY SCHOOLS, WEST VIRGINIA PUTNAM COUNTY SCHOOLS, WEST VIRGINIA SAN FRANCISCO UNIFIED SCHOOL DISTRICT, CALIFORNIA SAN MARCOS UNIFIED SCHOOL DISTRICT, CALIFORNIA WAKE COUNTY PUBLIC SCHOOLS, NORTH CAROLINA WAYNE COUNTY SCHOOLS, WEST VIRGINIA WETZEL COUNTY SCHOOLS, WEST VIRGINIA WOOD COUNTY SCHOOLS, WEST VIRGINIA WYOMING COUNTY SCHOOLS, WEST VIRGINIA CORE GRANT: THE CORE GRANT IN THE FORM OF BAND, STRING OR MARIACHI HAS BEEN THE CORNERSTONE GRANT THAT THE FOUNDATION PROVIDES TO SCHOOL GRANT RECIPIENTS ACROSS THE COUNTRY. EACH CORE GRANT IS VALUED AT APPROXIMATELY \$62,000 AND JUMP-STARTS A NEW INSTRUMENTAL MUSIC PROGRAM AT A SCHOOL. THE CORE BAND GRANT INCLUDES 36 MUSICAL INSTRUMENTS -WOODWIND, BRASS, AND PERCUSSION. THE STRING GRANT INCLUDES UP TO 36 STRING INSTRUMENTS - VIOLINS, VIOLAS, CELLOS, AND BASSES. THE MARIACHI GRANT INCLUDES 52 MUSICAL INSTRUMENTS BRASS AND STRING INSTRUMENTS. ALL CORE GRANTS INCLUDE MUSIC STANDS, INSTRUCTIONAL METHOD BOOKS, AT LEAST ONE PROFESSIONAL DEVELOPMENT SESSION, AND FOUNDATION PROGRAM SUPPORT FOR 10 YEARS. IN FISCAL YEAR 2021, THE FOUNDATION DELIVERED 35 CORE BAND GRANT PACKAGES AND FOUR CORE MARIACHI GRANT PACKAGES, IMPACTING OVER 18,500 STUDENTS AND MUSIC EDUCATORS.

INTRO TO MUSIC GRANT:

Name of the organization SAVE THE MUSIC FOUNDATION

Employer identification number 13-6089816

A MUSIC TEACHER NEEDS TO PROVIDE ELEMENTARY STUDENTS PREKINDERGARTEN

THROUGH GRADE 5 WITH SEQUENTIAL, STANDARDS-BASED GENERAL MUSIC

INSTRUCTION, FOCUSED ON ACTIVE MUSIC-MAKING AND ENGAGEMENT. THE GRANT

IS VALUED AT APPROXIMATELY \$25,000, 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,

INSTRUCTIONAL METHOD BOOKS, AND FOUNDATION PROGRAM SUPPORT FOR 10

YEARS. IN FISCAL YEAR 2021, THE FOUNDATION DELIVERED 44 INTRO TO MUSIC

GRANT PACKAGES, IMPACTING OVER 19,000 STUDENTS AND MUSIC EDUCATORS.

## 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 \$73,000, 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 FOUNDATION PROGRAM SUPPORT FOR 10 YEARS. IN FISCAL

YEAR 2021, THE FOUNDATION DELIVERED EIGHT J DILLA MUSIC TECH GRANT

PACKAGES, IMPACTING OVER 8,800 STUDENTS AND MUSIC EDUCATORS.

Name of the organization **Employer** identification number 13-6089816 SAVE THE MUSIC FOUNDATION IN ADDITION TO THE J DILLA MUSIC TECH GRANT FOR HIGH SCHOOL STUDENTS, THE FOUNDATION HAS CREATED A MUSIC TECHNOLOGY GRANT PACKAGE FOR MIDDLE SCHOOL STUDENTS, GRADES 4 THROUGH 8, WITH SIMILAR GOALS. THE J DILLA JR. MUSIC TECH GRANT IS VALUED AT APPROXIMATELY \$28,000 AND INCLUDES MUSIC CREATION SOFTWARE, TECHNOLOGY, AND EQUIPMENT, ALONG WITH A ONE-ONE-ONE MENTORSHIP WITH AN ARIZONA STATE UNIVERSITY PROFESSOR OF MUSIC EDUCATION, AND FOUNDATION PROGRAM SUPPORT FOR 10 YEARS. IN FISCAL YEAR 2021, THE FOUNDATION DELIVERED THREE J DILLA JR. MUSIC TECH GRANTS, IMPACTING NEARLY 1,000 STUDENTS AND MUSIC EDUCATORS. SAVE THE MUSIC + SONGFARM MUSIC TECH GRANT: IN 2020, THE FOUNDATION LAUNCHED A PARTNERSHIP WITH SONGFARM, A NONPROFIT ORGANIZATION WORKING TO BUILD RECORDING STUDIOS IN UNDERSERVED HIGH SCHOOLS, SO KIDS HAVE EQUAL ACCESS TO CREATIVE OPPORTUNITIES. THE SONGFARM MUSIC TECH GRANT PACKAGE IS SIMILAR TO THE J DILLA MUSIC TECH GRANT WITH THE SAME MISSION. FORM 990, PART III, LINE 4A: IN FISCAL YEAR 2021, THE FOUNDATION AND SONGFARM DELIVERED THREE MUSIC TECH GRANT PACKAGES, IMPACTING OVER 3,800 STUDENTS WITH ACCESS TO QUALITY MUSICAL INSTRUMENTS, EQUIPMENT, TECHNOLOGY, AND CONTEMPORARY AUDIO PRODUCTION SOFTWARE. KEYS + KIDS GRANT THE KEYS + KIDS GRANT SUPPORTS ANY TYPE OF MUSIC EDUCATION PROGRAM, INCLUDING VOCAL/CHORAL, GENERAL MUSIC, MUSICAL THEATER, OR INSTRUMENTAL. THE GRANT IS VALUED AT APPROXIMATELY \$22,000 AND INCLUDES

A CONTEMPORARY DIGITAL HYBRID PIANO, KEYBOARDS, INSTRUCTIONAL METHOD

SAVE THE MUSIC FOUNDATION Employer identification number 13-6089816

BOOKS, AND FOUNDATION PROGRAM SUPPORT FOR 10 YEARS. IN FISCAL YEAR

2021, THE FOUNDATION DID NOT DELIVER ANY KEYS + KIDS GRANT PACKAGES AS

SCHOOL DISTRICTS HAD NEEDS FOR OTHER TYPES OF GRANT PACKAGES. IN FISCAL

YEAR 2022, THE FOUNDATION LOOKS FORWARD ONCE AGAIN TO DELIVERING KEYS +

KIDS GRANTS TO SCHOOLS WHO NEED ACCESS TO A QUALITY CLASSROOM PIANO FOR

THEIR MUSIC PROGRAM AND KEYBOARDS FOR STUDENT EVERYDAY PRACTICE AND

PERFORMANCE.

## ADDITIONAL DONATIONS

IN ADDITION TO THE AFOREMENTIONED GRANT PACKAGES, THE FOUNDATION ALSO

DONATED PERSONAL PROTECTIVE EQUIPMENT (PPE) AS WELL AS SUPPLEMENTAL

INSTRUMENTS AND EQUIPMENT TO SELECTED SCHOOLS.

IN RESPONSE TO COVID-19 AND SCHOOL SAFETY PROTOCOLS, IT WAS SAFEST TO

RETURN TO PLAYING INSTRUMENTS IN THE MUSIC CLASSROOM WITH PPE FOR THEIR

BRASS AND WOODWIND INSTRUMENTS (INSTRUMENT BELL COVERS). THE FOUNDATION

PARTNERED WITH SONY MUSIC GROUP TO DELIVER 6,822 PIECES OF PPE TO 11

DISTRICTS (LISTED BELOW) ACROSS THE COUNTRY IMPACTING STUDENTS IN OVER

130 SCHOOLS IN FISCAL YEAR 2021.

SCHOOL DISTRICTS THAT RECEIVED PPE DONATIONS IN FISCAL YEAR 2021:

ATLANTA PUBLIC SCHOOLS, GEORGIA

BALTIMORE CITY PUBLIC SCHOOLS, MARYLAND

BOSTON PUBLIC SCHOOLS, MASSACHUSETTS

CHICAGO PUBLIC SCHOOLS, ILLINOIS

DANBURY PUBLIC SCHOOLS, CONNECTICUT

DENVER PUBLIC SCHOOLS, COLORADO

MIAMI DADE COUNTY PUBLIC SCHOOL DISTRICT, FLORIDA

Name of the organization **Employer** identification number 13-6089816 SAVE THE MUSIC FOUNDATION HOUSTON INDEPENDENT SCHOOL DISTRICT, TEXAS SHELBY COUNTY SCHOOLS, TENNESSEE ORLEANS PARISH PUBLIC SCHOOLS, LOUISIANA ZION ELEMENTARY SCHOOL DISTRICT 6, ILLINOIS THE FOUNDATION DONATED SUPPLEMENTAL INSTRUMENTS AND EOUIPMENT IN THE FORM OF 90 ANALOG SYNTHESIZERS AND 90 PAIRS OF HEADPHONES DONATED BY AUDIO EQUIPMENT COMPANY BEHRINGER IN FISCAL YEAR 2021. THE FOUNDATION DISTRIBUTED UNITS CONSISTING OF ONE SYNTHESIZER AND ONE PAIR OF HEADPHONES TO 24 SCHOOLS THAT HAVE RECEIVED A MUSIC TECH GRANT. SCHOOLS WERE LOCATED ACROSS 14 SCHOOL DISTRICTS (LISTED BELOW) THAT COLLECTIVELY REPRESENT OVER 24,000 STUDENTS. THE FOUNDATION ALSO PROVIDED UNITS TO TWO MUSIC EDUCATION PROGRAMMING PARTNERS: JAIL GUITAR DOORS (LOS ANGELES, CA) AND YOUNG MUSICIANS UNITE (MIAMI, FL). SCHOOL DISTRICTS THAT RECEIVED SUPPLEMENTAL DONATIONS IN FISCAL YEAR 2021: ATLANTA PUBLIC SCHOOLS, GEORGIA DETROIT PUBLIC SCHOOLS COMMUNITY DISTRICT, MICHIGAN LOS ANGELES UNIFIED SCHOOL DISTRICT, CALIFORNIA METROPOLITAN NASHVILLE PUBLIC SCHOOLS, TENNESSEE MIAMI-DADE COUNTY PUBLIC SCHOOLS, FLORIDA MORTON SCHOOL DISTRICT, WASHINGTON NEWARK BOARD OF EDUCATION, NEW JERSEY NEW YORK CITY DEPARTMENT OF EDUCATION, NEW YORK ORLEANS PARISH PUBLIC SCHOOLS, LOUISIANA ROANOKE PUBLIC SCHOOLS, VIRGINIA SAN FRANCISCO UNIFIED SCHOOL DISTRICT, CALIFORNIA

56 Schedule O (Form 990) 2021 Page 2 Name of the organization **Employer** identification number 13-6089816 SAVE THE MUSIC FOUNDATION STERLING UNIFIED SCHOOL DISTRICT 376, KANSAS THE SCHOOL DISTRICT OF PHILADELPHIA, PENNSYLVANIA WAKE COUNTY PUBLIC SCHOOLS, NORTH CAROLINA PROGRAM SUPPORT A GRANT OF INSTRUMENTS, EQUIPMENT, AND RESOURCES PROVIDES THE IMPETUS FOR MUSIC PROGRAMS TO BE RESTORED, BUT THIS IS ONLY THE BEGINNING OF THE FOUNDATION'S PARTNERSHIPS WITH SCHOOL DISTRICTS NATIONWIDE. 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 FOUNDATION'S GUIDE TO BUILDING AN INSTRUMENTAL MUSIC PROGRAM. THE GUIDE PROVIDES INFORMATION TO PRINCIPALS ON GETTING STARTED, NEXT STEPS ON HOW TO GROW THE SCHOOL'S MUSIC PROGRAM, NATIONAL MUSIC EDUCATION STANDARDS, RESEARCH ATTRIBUTING MUSIC EDUCATION FOR POSITIVE CHILDHOOD DEVELOPMENT, AND OTHER RESOURCES OF ADDITIONAL INFORMATION. EVERY NEW PRINCIPAL IN THE FOUNDATION'S NETWORK IS PROVIDED AN ELECTRONIC COPY OF THE GUIDE ONCE THEY ARE CONFIRMED AS A GRANT RECIPIENT. THERE HAVE BEEN CASES OF SAVE THE MUSIC FOUNDATION GRANT RECIPIENT COMMUNITIES WHERE SCHOOL PROGRAMS THAT HAD BEEN JUMP-STARTED 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 MAINTAINING THE PROGRAM MADE BY THE SCHOOL DISTRICT AND MEETINGS WERE SET UP TO FOLLOW

Name of the organization Employer identification number SAVE THE MUSIC FOUNDATION 13-6089816

UP WITH SENIOR LEADERSHIP IN THE SCHOOL DISTRICTS. IN MOST CASES, 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, THE FOUNDATION EMPLOYS SEVERAL

STRATEGIES ON A NATIONAL SCALE TO LAY THE GROUNDWORK FOR SUCCESSFUL

LOCAL ADVOCACY.

IN FISCAL YEAR 2021, THE FOUNDATION PROGRAM AND POLICY STAFF OFFERED

NEW GRANT RECIPIENTS THE OPPORTUNITY TO LEARN MORE ABOUT THEIR GRANT

AND HOW TO SUCCESSFULLY START THEIR MUSIC PROGRAMS IN THE NEW SCHOOL

YEAR BEGINNING AUGUST 2021. 65 MUSIC TEACHERS AND SCHOOL LEADERS TOOK

PART IN THESE VIRTUAL INFORMATIONAL SESSIONS.

#### 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.

Name of the organization SAVE THE MUSIC FOUNDATION Employer identification number 13-6089816

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. IN THE 2021 FISCAL YEAR, THIS AWARD WAS PRESENTED

TO ROGER LEN, THE SUPERINTENDENT OF NEWARK BOARD OF EDUCATION SCHOOLS

IN NEWARK, NEW JERSEY. THE FOUNDATION HAS PROVIDED 46 GRANTS TO THE

DISTRICT SINCE A MAJOR PARTNERSHIP BEGAN WITH THE SCHOOL DISTRICT IN

2017. IN TOTAL, THE FOUNDATION HAS DELIVERED A TOTAL OF 61 GRANTS TO

THE SCHOOL DISTRICT SINCE 1999. MUSIC EDUCATION CONTINUES TO BE A

PRIORITY FOR THE DISTRICT.

## 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. WORKSHOPS AND CONFERENCES IN 2021 TOOK PLACE

VIRTUALLY.

## PROFESSIONAL DEVELOPMENT

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.

THE FOUNDATION AND THEIR MANUFACTURING PARTNERS PRESENT PROFESSIONAL

DEVELOPMENT WORKSHOPS FOR THE MUSIC TEACHERS IN ALL ACTIVE GRANTEE

SCHOOL DISTRICTS AS BUDGET ALLOWS. THE CLINICS ARE PLANNED AND TAILORED

TO EACH SCHOOL DISTRICT'S INDIVIDUAL NEEDS. EXPERT CLINICIANS PRESENT

TOPICS SUCH AS MUSIC EDUCATION PEDAGOGY, EDUCATION FUNDING AND POLICY,

SAVE THE MUSIC FOUNDATION

SAVE THE MUSIC FOUNDATION

AND SOCIAL EMOTIONAL LEARNING (SEL). IN FISCAL YEAR 2021, SAVE THE

MUSIC PARTNERED WITH MUSIC SUPPLY COMPANY WEST MUSIC AND NONPROFIT

EDUCATION ORGANIZATION ARTS ED NEWARK TO PRESENT 20 PROFESSIONAL

DEVELOPMENT WORKSHOPS FOR SEVEN SCHOOL DISTRICTS IMPACTING NEARLY 130

EDUCATORS.

AS TEACHERS AND STUDENTS RETURNED TO MUSIC CLASSROOMS NATIONWIDE IN

FALL 2021, THE FOUNDATION LAUNCHED A FREE, PUBLIC, PROFESSIONAL

LEARNING PROGRAM FOR MUSIC TEACHERS GEARED TOWARD RECOGNIZING THE

SOCIAL AND EMOTIONAL IMPACTS OF THE COVID-19 PANDEMIC ON STUDENTS AND

ACTIVELY BUILDING STUDENT RESILIENCE VIA MUSIC EDUCATION. THE

FOUNDATION PARTNERED WITH THE CENTER FOR ARTS EDUCATION AND SOCIAL

EMOTIONAL LEARNING TO OFFER MONTHLY WEBINARS IN A SERIES NAMED "STUDENT

EMPOWERMENT THROUGH SOCIAL EMOTIONAL LEARNING IN MUSIC EDUCATION"

FEATURING EXPERTS IN THE FIELD AND MUSIC EDUCATORS CURRENTLY USING

STRATEGIES AND TOOLS TO EMBED SOCIAL EMOTIONAL LEARNING INTO THE MUSIC

CLASSROOM.

FORM 990, PART III, LINE 4A (CONTINUATION):

THE WEBINARS ARE OFFERED FOR FREE AND TAILORED TO MUSIC EDUCATORS BUT

ARE ALSO RELEVANT FOR STUDENT MUSICIANS, PARENTS AND FAMILIES, AS WELL

AS MUSIC EDUCATION ADVOCATES. IN FISCAL 2021, THE FOUNDATION DELIVERED

FOUR PUBLIC WEBINARS IMPACTING NEARLY 300 EDUCATORS, SCHOOL

ADMINISTRATORS, NONPROFIT LEADERS, AND EDUCATION ADVOCATES. THE WEBINAR

SERIES CONTINUES INTO FISCAL YEAR 2022.

VIRTUAL GATHERINGS

Name of the organization
SAVE THE MUSIC FOUNDATION

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CONDUCTED 34 VIDEO CONFERENCE CALLS IN ADDITION TO THE VIRTUAL

PROFESSIONAL DEVELOPMENT WITH SCHOOL DISTRICT ARTS LEADERS, MUSIC

EDUCATORS, AND STUDENTS, ALL WHO HAD RECEIVED, OR WILL RECEIVE, A SAVE

THE MUSIC GRANT. ADMINISTRATORS AND TEACHERS WHO WERE INVITED TO

PARTICIPATE TO SHARE CHALLENGES, SUCCESSES, CURRICULUM IDEAS FOR REMOTE

LEARNING, 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 FOUNDATION HOSTED PUBLIC SESSIONS FOR MUSIC EDUCATORS APPROXIMATELY

ONCE PER MONTH IN EARLY FISCAL YEAR 2021. EACH SESSION, CALLED A MUSIC

TEACHERS MASTERCLASS, FEATURED EXPERTS SPEAKING ABOUT A TOPIC IN MUSIC

EDUCATION OR FELLOW MUSIC TEACHERS PRESENTING A PEER-TO-PEER LEARNING

SESSION. IN FISCAL YEAR 2021, THE FOUNDATION DELIVERED FIVE SESSIONS

IMPACTING NEARLY 100 MUSIC EDUCATORS. IN FALL OF 2021, THE MUSIC

TEACHERS MASTERCLASS WAS REPLACED BY THE AFOREMENTIONED PUBLIC WEBINAR

SERIES FOCUSED ON SOCIAL EMOTIONAL LEARNING IN MUSIC EDUCATION.

THE FOUNDATION HOSTED ROUNDTABLES FOR DISTRICT ARTS LEADERS

APPROXIMATELY ONCE PER MONTH DURING THE SCHOOL YEAR (AUGUST THROUGH

JUNE) TO GATHER SCHOOL DISTRICT-LEVEL MUSIC AND CURRICULUM COORDINATORS

AND SUPERVISORS NATIONWIDE WHO HAVE RECEIVED, OR WILL RECEIVE, A SAVE

THE MUSIC GRANT. ATTENDEES EXCHANGED IDEAS AND ADVICE WITH EACH OTHER

AND HEARD FROM EXPERTS ABOUT NATIONAL EDUCATION POLICY AND MUSIC

EDUCATION ADVOCACY. IN FISCAL YEAR 2021, THE FOUNDATION DELIVERED EIGHT

SESSIONS IMPACTING NEARLY 50 DISTRICT LEADERS.

Name of the organization **Employer** identification number SAVE THE MUSIC FOUNDATION 13-6089816 THE FOUNDATION HOSTED ROUNDTABLES FOR MUSIC TEACHERS WHO HAVE RECEIVED A J DILLA MUSIC TECH GRANT, J DILLA JR. MUSIC TECH GRANT, OR SAVE THE MUSIC + SONGFARM MUSIC TECH GRANT APPROXIMATELY ONCE PER MONTH DURING THE SCHOOL YEAR. SESSIONS WERE LED AND CURATED BY THE ARIZONA STATE UNIVERSITY PROFESSOR OF MUSIC EDUCATION MENTOR. ATTENDEES SHARED SUCCESS AND CHALLENGES FROM THE CLASSROOM AS WELL AS IDEAS FOR CURRICULUM AND LESSONS. IN FISCAL YEAR 2021, THE FOUNDATION DELIVERED NINE SESSIONS IMPACTING NEARLY 25 MUSIC TEACHERS. THE FOUNDATION HOSTED SESSIONS FOR STUDENTS, MUSIC TEACHERS, AND SCHOOL ADMINISTRATORS WHO RECEIVED A J DILLA MUSIC TECH GRANT, J DILLA JR. MUSIC TECH GRANT, OR SAVE THE MUSIC + SONGFARM MUSIC TECH GRANT APPROXIMATELY ONCE PER MONTH DURING THE SCHOOL YEAR. EACH SESSION, CALLED A MUSIC INDUSTRY MASTERCLASS, FEATURED MUSIC INDUSTRY PROFESSIONALS AND RECORDING ARTISTS SPEAKING ABOUT THEIR SCHOOL BACKGROUNDS, CAREERS, AND CURRENT JOB ROLES. THE GOAL IS TO ILLUMINATE CAREER PATHWAYS AND JOBS IN THE MUSIC INDUSTRY. IN FISCAL YEAR 2021, THE FOUNDATION DELIVERED EIGHT SESSIONS IMPACTING NEARLY 250 MUSIC TEACHERS AND MUSIC STUDENTS. THE FOUNDATION HOSTED SESSIONS FOR STUDENTS AND MUSIC TEACHERS WHO

RECEIVED A SAVE THE MUSIC + SONGFARM MUSIC TECH GRANT TO CONNECT RECORDING ARTISTS WITH STUDENTS INTERESTED IN THE MUSIC INDUSTRY. STUDENTS LEARNED ABOUT THE CAREER OF A SINGER/SONGWRITER AND ENGAGED IN MASTER CLASSES ABOUT COMPOSING THEIR OWN SONGS AND REMIXES. IN FISCAL YEAR 2021, THE FOUNDATION DELIVERED FOUR SESSIONS TO THREE SCHOOLS IMPACTING NEARLY 40 STUDENTS AND TEACHERS.

Name of the organization Employer identification number SAVE THE MUSIC FOUNDATION 13-6089816

## 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

COMMUNITY. IN 2021, CONVENINGS WERE NOT SCHEDULED DUE TO COVID-19

PRECAUTIONS, BUT THE PLANNING CONTINUES FOR CONVENINGS IN NEW ORLEANS

AND THE MISSISSIPPI DELTA IN FISCAL YEAR 2022.

#### SOCIAL COMMUNICATIONS

THE FOUNDATION SHARES GRANT RECIPIENT UPDATES AND STORIES OF IMPACT ON

ITS 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

SCHOOL 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.

HUNDREDS OF POSTS ARE MADE EACH YEAR TO THOUSANDS OF USERS AND

Name of the organization Employer identification number SAVE THE MUSIC FOUNDATION 13-6089816

## FOLLOWERS.

ONLINE TEACHING & LEARNING RESOURCES

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. IN FISCAL

YEAR 2020, THE FOUNDATION'S MUSIC EDUCATION RESOURCES PAGE ON ITS

WEBSITE SIGNIFICANTLY EXPANDED BY LISTING OVER 100 RESOURCES INCLUDING

ADVOCACY ORGANIZATIONS, DIGITAL CURRICULUM AND LESSONS, FREE MUSIC

CLASSROOM APPS AND SOFTWARE, AND VIRTUAL CONCERTS AND TOURS OFFERED BY

WORLD-RENOWNED CULTURAL INSTITUTIONS. IN AUGUST 2020, THE MUSIC

EDUCATION RESOURCES PAGE WAS RELAUNCHED WITH A NEW, USER-FRIENDLY

DESIGN. EMAIL COMMUNICATIONS AND SOCIAL MEDIA HAVE BEEN USED TO PROMOTE

IN 2021, IT FEATURED LINKS TO NEARLY 200 ONLINE PLATFORMS, APPS, TOOLS,

THIS PAGE. THE MUSIC EDUCATION RESOURCES PAGE CONTINUES TO EVOLVE AND

WEBSITES, AND ARTICLES FOR EDUCATORS, STUDENTS, AND FAMILIES.

#### HONORS

CHIHO FEINDLER, THE FOUNDATION'S CHIEF PROGRAM OFFICER, RECEIVED THE

HONORARY WEST VIRGINIAN AWARD ON JUNE 29, 2021, PRESENTED BY THE

STATE'S GOVERNOR, FOR OUTSTANDING ACHIEVEMENT AND MERITORIOUS SERVICE.

THE FOUNDATION HAS DELIVERED GRANTS TO SCHOOLS IN ALL 55 COUNTY SCHOOL

DISTRICTS IN WEST VIRGINIA, A TOTAL OF 112 GRANTS SINCE 2009. WEST

VIRGINIA CONTINUES TO BE A PRIORITY, STATE-WIDE PARTNERSHIP FOR THE

FOUNDATION.

Name of the organization SAVE THE MUSIC FOUNDATION Employer identification number 13-6089816

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

CHRIS MCCARTHY, DIRECTOR, SWAY CALLOWAY, DIRECTOR, BRIANNA CAYO COTTER,

DIRECTOR, WANDA CARIANO, DIRECTOR, ELENA DIAZ CO-CHAIRPERSON, LESLIE FRAM,

DIRECTOR, AND HENRY DONAHUE, EXECUTIVE DIRECTOR/ASST SECRETARY 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, 2021.

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

Schedule O (Form 990) 2021 Page 2 Name of the organization **Employer** identification number 13-6089816 SAVE THE MUSIC FOUNDATION IS RESPONSIBLE FOR GOVERNANCE AND OVERSIGHT OF THE COMPENSATION AND BENEFITS PROGRAMS FOR EXECUTIVE LEVEL STAFF (INCLUDING THE CHIEF DEVELOPMENT OFFICER, CHIEF PROGRAM OFFICERS, AND SENIOR DIRECTOR POSITIONS) 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. THE COMMITTEE INCLUDES AT LEAST THREE INDEPENDENT BOARD MEMBERS THAT 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 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 AS PART OF A SERVICES AGREEMENT BETWEEN SAVE THE MUSIC AND MTVN, AND

COMPENSATION AND BENEFITS ARE SET AT THE VICE PRESIDENT LEVEL FOR MTVN

EMPLOYEES.

<u>Schedule O (Form 990) 2021</u> Page **2** 

| Name of the organization  SAVE THE MUSIC FOUNDATION                           | Employer identification number 13-6089816 |
|-------------------------------------------------------------------------------|-------------------------------------------|
|                                                                               | , == ==================================   |
| 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 E                    | 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.                              |                                           |
|                                                                               |                                           |
|                                                                               |                                           |
|                                                                               |                                           |
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