** PUBLIC DISCLOSURE COPY **

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047

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. Inspection

| <u> </u> | or ui | e 2018 calendar year, or tax year beginning OCT 1, 2018 and | enaing E | EP 30, 2019 | | | | |
|---------------|----------------------|--|---------------|---------------------------------------|-------------------------------|--|--|--|
| В | Check if applicab | C Name of organization | | D Employer identifi | cation number | | | |
| | Addre | SAVE THE MUSIC FOUNDATION | | | | | | |
| | Name chang | THIS CAME THE MICE C ECHNICATI | ON | 13-6 | 089816 | | | |
| | Initial returr | Number and street (or P.O. box if mail is not delivered to street address) | Room/suite | E Telephone numbe | r | | | |
| | ☐Final return | 1515 BROADWAY, 20TH FLOOR | | 212- | 846-7882 | | | |
| | termii ated | City or town, state or province, country, and ZIP or foreign postal code | | G Gross receipts \$ 3,903,805. | | | | |
| | Amen return | NEW TORK, NT 10030 | | H(a) Is this a group re | | | | |
| | Application pendi | | | for subordinates | ?Yes X No | | | |
| | pendi | * SAME AS C ABOVE | | H(b) Are all subordinates in | ncluded? Yes No | | | |
| | | empt status: X 501(c)(3) 501(c) () | or 527 | If "No," attach a | list. (see instructions) | | | |
| | | te: > WWW.SAVETHEMUSIC.ORG | | H(c) Group exemption | | | | |
| | | f organization: X Corporation Trust Association Other ► | L Year | of formation: 1955 | M State of legal domicile; NY | | | |
| Pa | art I | Summary | | TIGEG BOIDING | TT 011 113 G | | | |
| ø | 1 | Briefly describe the organization's mission or most significant activities: SAVE | | | | | | |
| Governance | | PROVIDED MORE THAN \$58 MILLION WORTH OF N | | | | | | |
| ern | 2 | Check this box if the organization discontinued its operations or dispos | | 1 | | | | |
| ò | 3 | | | 3 | 19 19 | | | |
| જ | 4 | Number of independent voting members of the governing body (Part VI, line 1b) | | | 19 | | | |
| ijes | 5 | Total number of individuals employed in calendar year 2018 (Part V, line 2a) | | | 31 | | | |
| Activities & | 6 | Total number of volunteers (estimate if necessary) | | · · · · · · · · · · · · · · · · · · · | 0. | | | |
| Ä | | Total unrelated business revenue from Part VIII, column (C), line 12 Net unrelated business taxable income from Form 990-T, line 38 | | | 0. | | | |
| _ | B | THE UTILITIES TO THE STATE OF T | ····· | Prior Year | Current Year | | | |
| | 8 | Contributions and grants (Part VIII, line 1h) | | 4,006,981. | 3,901,249. | | | |
| E | 9 | Program service revenue (Part VIII, line 2g) | | 0. | 0. | | | |
| Revenue | 10 | Investment income (Part VIII, column (A), lines 3, 4, and 7d) | | 0. | 0. | | | |
| æ | 11 | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | | 54,189. | 2,556. | | | |
| | 12 | Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) | | 4,061,170. | 3,903,805. | | | |
| _ | 13 | Grants and similar amounts paid (Part IX, column (A), lines 1-3) | | 2,243,097. | 1,974,227. | | | |
| | 14 | Benefits paid to or for members (Part IX, column (A), line 4) | | 0. | 0. | | | |
| s | 15 | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) | | 918,205. | 1,005,914. | | | |
| Expenses | 16a | Professional fundraising fees (Part IX, column (A), line 11e) | | 0. | 0. | | | |
| ē | b | Total fundraising expenses (Part IX, column (D), line 25) 675,09 | 95. | | | | | |
| Û | 17 | Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) | | 841,924. | 690,971. | | | |
| | 18 | Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) | | 4,003,226. | 3,671,112. | | | |
| _ | 19 | Revenue less expenses. Subtract line 18 from line 12 | | 57,944. | 232,693. | | | |
| OF Soc | | | Ве | ginning of Current Year | End of Year | | | |
| Assets | 20 | Total assets (Part X, line 16) | | 1,755,182. | 1,814,380. | | | |
| A Po | 21 | Total liabilities (Part X, line 26) | | 1,002,145. | 828,650. | | | |
| Net | | Net assets or fund balances. Subtract line 21 from line 20 | | 753,037. | 985,730. | | | |
| $\overline{}$ | art II | Signature Block | | | | | | |
| | | alties of perjury, I declare that I have examined this return, including accompanying schedules | | | / knowleage and beliet, it is | | | |
| true | , corre | ${ m ct}$, and complete. Declaration of preparer (other than officer) is based on all information of wh | iicn preparer | nas any knowledge. | | | | |
| 0: | _ | Signature of officer | | I Date | | | | |
| Sig | | HENRY DONAHUE, EXEC DIR/VP | | | | | | |
| Her | е | Type or print name and title | | | | | | |
| | | Print/Type preparer's name Preparer's signature | | Date Check | PTIN | | | |
| Paid | i | | ERNIA | 3/12/20 if self-employ | | | | |
| | arer | Firm's name MARKS PANETH LLP | | Firm's EIN | 11-3518842 | | | |
| - | Only | Firm's address 685 THIRD AVENUE | | THIN O LIN | | | | |
| | | NEW YORK, NY 10017 | | Phone no. 21 | 2-503-8800 | | | |
| May | / the I | RS discuss this return with the preparer shown above? (see instructions) | | 1 | X Yes No | | | |

| 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. THE FOUNDATION |
| | WAS CREATED TO ADDRESS THE INEQUITY IN AVAILABILITY OF MUSIC EDUCATION |
| | FOR STUDENTS IN MANY OF THE UNITED STATES' MOST CHALLENGED |
| 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 \$2, 781, 822. including grants of \$1, 974, 227.) (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 2,159 PUBLIC SCHOOLS IN 276 SCHOOL DISTRICTS AROUND THE |
| | COUNTRY, IMPROVING THE LIVES OF MORE THAN 2 MILLION CHILDREN ACROSS THE |
| | UNITED STATES. DURING THAT TIME, THE FOUNDATION HAS PROVIDED \$58 |
| | MILLION WORTH OF NEW INSTRUMENTS TO SCHOOL DISTRICTS ACROSS THE |
| 4b | (Code:) (Expenses \$ including grants of \$) (Revenue \$) |
| | , (Laborator), (Laborator) |
| | |
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| | |
| 4- | |
| 4c | (Code:) (Expenses \$ |
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| | |
| | |
| 4d | Other program services (Describe in Schedule O.) |
| | (Expenses \$\frac{\text{including grants of \$}}{\text{None of }}\) (Revenue \$\text{None of }} |
| 40 | Total program conjuga expanses > 2 781 822. |

Form 990 (2018) 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 | Х | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? | 2 | Х | |
| 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 | | Х |
| 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 | | Х |
| 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 Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III | 5 | | Х |
| 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 | | х |
| 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 | | х |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete | | | |
| Ü | , , | 8 | | х |
| 0 | Schedule D, Part III | ۰ | | |
| 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? | | | х |
| 40 | If "Yes," complete Schedule D, Part IV | 9 | | ┢≏ |
| 10 | Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent | | | 77 |
| _ | endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V | 10 | | Х |
| 11 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X | | | |
| | as applicable. | | | |
| а | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, | | | |
| | Part VI | 11a | Х | |
| b | Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total | | | |
| | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII | 11b | | Х |
| C | Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total | | | |
| | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII | 11c | | Х |
| d | Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in | | | |
| | Part X, line 16? If "Yes," complete Schedule D, Part IX | 11d | | Х |
| е | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | 11e | Х | |
| f | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses | | | |
| | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X | 11f | Х | |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete | | | |
| | Schedule D. Parts XI and XII | 12a | х | |
| b | Was the organization included in consolidated, independent audited financial statements for the tax year? | | | |
| - | If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional | 12b | | х |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | Х |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | | X |
| b | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, | | | T |
| | 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 | ,-I | | ├ |
| 13 | | 15 | | х |
| 16 | foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to | 13 | | ^`` |
| 10 | | 4.0 | | Х |
| | or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV | 16 | | |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, | | | v |
| | column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I | 17 | | X |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines | | | ,, |
| | 1c and 8a? If "Yes," complete Schedule G, Part II | 18 | | Х |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," | | | |
| | complete Schedule G, Part III | 19 | | X |
| 2 0a | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H | 20a | | Х |
| b | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | | |
| 21 | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or | | | |
| | domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II | 21 | Х | |

Form 990 (2018) 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 | | Х | |
| 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 | | Х | |
| 24 a | 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 | | х | |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | | |
| | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease | | | | |
| Ū | any tax-exempt bonds? | 24c | | | |
| d | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | | |
| | Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit | IU | | | |
| Lou | transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I | 25a | | х | |
| h | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and | 20a | | | |
| b | that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete | | | | |
| | , | 25b | | x | |
| 26 | Schedule L, Part I Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or | ZJIJ | | <u> </u> | |
| 26 | | | | | |
| | former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," | 00 | | х | |
| 07 | complete Schedule L, Part II | 26 | | | |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial | | | | |
| | contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member | | | x | |
| | of any of these persons? If "Yes," complete Schedule L, Part III | 27 | | _^ | |
| 28 | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV | | | | |
| | instructions for applicable filing thresholds, conditions, and exceptions): | | | 37 | |
| | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28a | | X | |
| | A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28b | | X | |
| С | c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, | | | | |
| | director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV | | | | |
| 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 | | X | |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? | | | | |
| | If "Yes," complete Schedule N, Part I | 31 | | X | |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete | | | | |
| | Schedule N, Part II | 32 | | X | |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations | | | | |
| | sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I | 33 | | X | |
| 34 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and | | | 1 | |
| | Part V, line 1 | 34 | | Х | |
| 35 a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | | Х | |
| b | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity | | | 1 | |
| | within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 | 35b | | <u> </u> | |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? | | | 1 | |
| | If "Yes," complete Schedule R, Part V, line 2 | 36 | | Х | |
| 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 | | Х | |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? | | | | |
| _ | Note. All Form 990 filers are required to complete Schedule O | 38 | Х | | |
| Par | t V Statements Regarding Other IRS Filings and Tax Compliance | | | | |
| | Check if Schedule O contains a response or note to any line in this Part V | | | | |
| | | | Yes | No | |
| 1a | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable | | | | |
| b | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable | | | 1 | |
| С | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming | | | 1 | |
| | (gambling) winnings to prize winners? | 1c | Х | | |
| | | | | | |

Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V 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 Х b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? Х За **b** If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a Х financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a **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? **b** Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit Х any contributions that were not tax deductible as charitable contributions? 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). Х a 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 b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required Х to file Form 8282? Х e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 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: a Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: 11 a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O. **b** Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand X **14a** Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or Х excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N. Х

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

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

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

| | · | | | | | X | | | | |
|--|---|---------|--------------|--------|-----|----------|--|--|--|--|
| Sec | tion A. Governing Body and Management | | | | | | | | | |
| | | ı | | | Yes | No | | | | |
| 1a | Enter the number of voting members of the governing body at the end of the tax year | 1a | 19 | | | | | | | |
| | If there are material differences in voting rights among members of the governing body, or if the governing | | | | | | | | | |
| | body delegated broad authority to an executive committee or similar committee, explain in Schedule O. | | | | | | | | | |
| b | Enter the number of voting members included in line 1a, above, who are independent | 1b | 19 | | | | | | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship | with | anv other | | | | | | | |
| | officer, director, trustee, or key employee? | | | 2 | Х | | | | | |
| 3 | Did the organization delegate control over management duties customarily performed by or under the | | | _ | | | | | | |
| 3 | of officers, directors, or trustees, or key employees to a management company or other person? | | • | 3 | | x | | | | |
| | | | | | | X | | | | |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 9 | | | 4 | | X | | | | |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's ass | ets'? | | 5 6 | | X | | | | |
| 6 | | | | | | | | | | |
| 7a | 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or | | | | | | | | | |
| | more members of the governing body? | | | 7a | | X | | | | |
| b | b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or | | | | | | | | | |
| | persons other than the governing body? | | | | | | | | | |
| 8 | 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | | | | | | | | |
| а | a The governing body? | | | | | | | | | |
| b | | | | | | | | | | |
| 9 | | | | | | | | | | |
| organization's mailing address? If "Yes," provide the names and addresses in Schedule O | | | | | | | | | | |
| Sec | tion B. Policies (This Section B requests information about policies not required by the Internal Re | | | | | | | | | |
| | (1) | | | | Yes | No | | | | |
| 10a | Did the organization have local chapters, branches, or affiliates? | | | 10a | | Х | | | | |
| | If "Yes," did the organization have written policies and procedures governing the activities of such ch | | | | | | | | | |
| - | and branches to ensure their operations are consistent with the organization's exempt purposes? | | | | | | | | | |
| 11a | | | | | | | | | | |
| _ | | | | | | | | | | |
| | b Describe in Schedule O the process, if any, used by the organization to review this Form 990. | | | | | | | | | |
| _ | Did the organization have a written conflict of interest policy? If "No," go to line 13 | | | | | | | | | |
| b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise | | | 12b | Х | | | | | |
| С | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y | , | | | v | | | | | |
| | in 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 | Х | | | | | |
| 15 | Did the process for determining compensation of the following persons include a review and approva | I by in | dependent | | | | | | | |
| | persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | | | | | | | | |
| а | The organization's CEO, Executive Director, or top management official | | | 15a | Х | <u> </u> | | | | |
| b | Other officers or key employees of the organization | | | 15b | | X | | | | |
| | If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). | | | | | | | | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement | nent w | rith a | | | l _ | | | | |
| | taxable entity during the year? | | | 16a | | Х | | | | |
| b | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate | e its p | articipation | | | | | | | |
| | in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ | izatior | า'ร | | | | | | | |
| | exempt status with respect to such arrangements? | <u></u> | | 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, C | T,D | C,FL,GA,HI, | ,IL, | KS | , KY | | | | |
| 18 | | | | | | | | | | |
| | for public inspection. Indicate how you made these available. Check all that apply. | | | | | | | | | |
| | Own website Another's website X Upon request Other (explain | in Sc | hedule O) | | | | | | | |
| 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and finan | | | | | | | | | | |
| | 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 boo | ks an | d records | | | | | | | |
| | LYNN ALBALA - 212-846-7599 | arr | | | | | | | | |
| | 1515 BROADWAY, NEW YORK, NY 10036 | | | | | | | | | |
| | | | | | | | | | | |

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

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

X

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

| (A) | (B) | I | (C) | | | | out | (D) | (E) | (F) |
|--------------------------------|------------------------|--------------------------------|-----------------------|---------|--------------|---------------------------------|----------|---------------------|----------------------------------|--------------------------|
| Name and Title | Average | (do | | Posi | ition | than o | nne | Reportable | Reportable | Estimated |
| | hours per | box, | unles | ss per | son is | s both | an | compensation | compensation | amount of |
| | week | \vdash | er an | aaa | recto | r/trus | lee) | from | from related | other |
| | (list any hours for | Individual trustee or director | | | | | | the organization | organizations (W-2/1099-MISC) | compensation from the |
| | related | e or d | tee | | | sated | | (W-2/1099-MISC) | (44-27 1099-141130) | organization |
| | organizations | ruste | ıl trus | | уее | шреп | | (** 2/ 1000 1/1100) | | and related |
| | below | idual 1 | Institutional trustee | 25 | Key employee | Highest compensated employee | 18 | | | organizations |
| | line) | Indiv | Instit | Officer | Кеуе | Highe empl | Former | | | |
| (1) ALLEN MURABAYASHI | 0.50 | | | | | | | | | |
| DIRECTOR | | Х | | | | | | 0. | 0. | 0. |
| (2) AMY DOYLE | 4.00 | | | | | | | | | |
| CO-CHAIRPERSON | | Х | | Х | | | | 0. | 0. | 0. |
| (3) AMY WIGLER | 0.50 | | | | | | | | | |
| DIRECTOR | | Х | | | | | | 0. | 0. | 0. |
| (4) CHRIS MCCARTHY | 2.00 | | | | | | | | | |
| CO-CHAIRPERSON | | Х | | Х | | | | 0. | 0. | 0. |
| (5) ELIZABETH WINDRAM | 0.50 | | | | | | | | | |
| DIRECTOR | | Х | | | | | | 0. | 0. | 0. |
| (6) GILLIAN RYAN | 1.00 | | | | | | | _ | _ | _ |
| DIRECTOR | | Х | | | | | | 0. | 0. | 0. |
| (7) GORDON SINGER | 0.50 | | | | | | | | | |
| DIRECTOR | | Х | | | | | | 0. | 0. | 0. |
| (8) JAMIE PERRY | 0.50 | | | | | | | | • | • |
| DIRECTOR (OUTGOING) | | Х | | | | | | 0. | 0. | 0. |
| (9) KATHERINE VON JAN | 0.50 | l | | | | | | | • | |
| DIRECTOR | | Х | | | | | | 0. | 0. | 0. |
| (10) KEVIN NG | 0.50 | | | | | | | | • | |
| DIRECTOR | 1 00 | Х | | | | \vdash | | 0. | 0. | 0. |
| (11) LAURIE SCHELL | 1.00 | ,, | | | | | | | 0 | 0 |
| DIRECTOR | 1 00 | Х | | | | | | 0. | 0. | 0. |
| (12) MARK LEITER | 1.00 | ,, | | | | | | | 0 | 0 |
| Contraction (13) MATT SPIELMAN | 1 00 | Х | | | | \vdash | | 0. | 0. | 0. |
| | 1.00 | Ψ, | | | | | | | 0 | ^ |
| DIRECTOR (OUTGOING) | 1 00 | Х | | | | | | 0. | 0. | 0. |
| (14) MICHAEL LEVINE DIRECTOR | 1.00 | | | | | | | 0. | 0. | _ |
| (15) MIREYA D'ANGELO | 1.00 | Х | | | | | _ | 0. | 0. | 0. |
| DIRECTOR | 1.00 | х | | | | | | 0. | 0. | 0 |
| (16) MORRIS L. REID | 0.50 | ^ | | | | \vdash | | 0. | 0. | 0. |
| DIRECTOR | 0.50 | х | | | | | | 0. | 0. | 0. |
| (17) NOAH KERNER | 0.50 | 127 | \vdash | | | \vdash | \vdash | · · | · · | <u></u> |
| DIRECTOR | 0.50 | х | | | | | | 0. | 0. | 0. |
| DIRECTOR | | 77 | | | | | | 1 0. | 0. | <u> </u> |

Form **990** (2018)

| tees, Key Emp | oloy | ees, | and | l Hig | ghes | st C | compensated Employee | s (continued) | | | | |
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| | | | | | | | | | | | Yes | No |
| director, or tru | uste | e, ke | y en | nplo | уее, | or | highest compensated er | nployee on | | | | l |
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| = | ot lin | nited | to t | | _ | ted | above) who received mo | ore than | | | | |
| zation 🟲 | | | | | , | | | | | _ | 000 - | 0010 |
| | (B) Average hours per week (list any hours for related organizations below line) 0.50 1.00 0.50 0.50 0.50 0.50 4. Section A ot limited to the director, or truch individual and of reportable 0,000? If "Yes, accrue comperciplete Schedule address | (B) Average hours per week (list any hours for related organizations below line) 0.50 X 1.00 X 0.50 X 0. | (B) Average hours per week (list any hours for related organizations below line) 0.50 X 1.00 X 0.50 X 0. | (B) Average hours per week (list any hours for related organizations below line) 0.50 X 1.00 X 0.50 X 0. | (B) Average hours per week (list any hours for related organizations below line) 0.50 X 1.00 X 0.50 0.50 X 0.50 | Average hours per week (list any hours for related organizations below line) 1.00 X 1.00 X 0.50 X 0.50 | Average hours per week (list any hours for related organizations below line) 0.50 X 1.00 X 0.50 X 0.50 | Average hours per week (list any hours for related organizations below line) No. 50 X 1.00 X 0.50 X 0.50 X 0.50 X 0.50 X 0.60.00 X 0.50 X 0.60.00 0.70 | Average hours per week (list any hours for related organizations below line) 0.50 X 0.50 | (B) Average hours per week (list any) hours for related organizations below line) 0.50 X 0.50 X 0.050 X 0.050 | (B) Average hours per week (list any) hours for related organizations below line) 0.50 X 0 | (B) Average hours per week (list any hours for related organizations below line) 1 |

13-6089816

| | | — Check if Schedule ∩ cont | ains a response or note to any | line in this Part VIII | | | |
|--|-----------------------|--|---|------------------------|--|---|--|
| | | Officer if Schedule O cont | ains a response or note to any | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512 - 514 |
| Program Service Contributions, Giffs, Grants Revenue and Other Similar Amounts | b c d e f | Membership dues Fundraising events Related organizations Government grants (contribut All other contributions, gifts, gran similar amounts not included abo Noncash contributions included in lines Total. Add lines 1a-1f | 1c 1d 1e 1s, and 1f 3 , 861 , 111 1a-1f: \$ 1 , 224 , 011 Business Co | 3,901,249. | revenue | Teveride | 512 - 514 |
| Pro | | All other program service reve | | | | | |
| | 3 | Investment income (including other similar amounts) | dividends, interest, and x-exempt bond proceeds | 2 556 | | | 2 556 |
| | 5 6 a b | Less: rental expenses | (i) Real (ii) Persona | 2,556. | | | 2,556. |
| | 7 a b | Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses | (i) Securities (ii) Other | | | | |
| Other Revenue | b | Gross income from fundraising including \$ contributions reported on line Part IV, line 18 Less: direct expenses | g events (not of 1c). See a b | | | | |
| Ð | 9 a b | Net income or (loss) from func Gross income from gaming ac Part IV, line 19 Less: direct expenses Net income or (loss) from gam | ctivities. See a b | <u> </u> | | | |
| | 10 a b | Gross sales of inventory, less and allowances Less: cost of goods sold Net income or (loss) from sale | returns a b | • | | | |
| | 11 a b | | | de | | | |
| | d | | | → 3.903.805. | 0. | 0. | 2 556. |

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 (C) Management and general expenses (A) Total expenses (B) **(D)** Fundraising Do not include amounts reported on lines 6b, Program service expenses 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations 1,974,227. 1,974,227. 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 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 810,972. 382,563. 25,060. 403,349. Other salaries and wages Pension plan accruals and contributions (include 21,283. 10,498. 621 10,164. section 401(k) and 403(b) employer contributions) 50,813.103,017. Other employee benefits 3,006. 49,198. 9 70,642. 34,844. 2,061. 33,737. Payroll taxes 10 Fees for services (non-employees): 11 Management 6,998. 50,544. 11,536. 32,010. Legal 150,098. 150,098. Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 5,625. 21,000. column (A) amount, list line 11g expenses on Sch O.) 86,645. 60,020. 19,523. 19,523. Advertising and promotion 12 29,419. 6,157. 387. 22,875. Office expenses 13 48,842. 15,812. 9. 33,021 Information technology 14 15 Royalties 16 Occupancy 974. 192. 417. 365. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials ... Conferences, conventions, and meetings 19 20 Interest 21 Payments to affiliates 21,667. 10,834. 10,833. Depreciation, depletion, and amortization 22 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 283,259. 283,259. WORKSHOPS/ADVOCACY C All other expenses 3,671,112. 2,781,822. 214,195. 675,095. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

Form 990 (2018)
Part X Balance Sheet

| Pai | <u>π χ</u> | Balance Sheet | | | | | |
|-----------------------------|------------|--|---------|-----------------------|---------------------------------|-----------------|---------------------------|
| | | Check if Schedule O contains a response or not | e to an | y line in this Part X | | | |
| | | | | | (A) Beginning of year | | (B) End of year |
| | 1 | Cash - non-interest-bearing | | | 1,014,948. | 1 | 900,368. |
| | 2 | Savings and temporary cash investments | | | | 2 | |
| | 3 | Pledges and grants receivable, net | | | 643,143. | 3 | 839,628. |
| | 4 | Accounts receivable, net | | | 560. | 4 | 50. |
| | 5 | Loans and other receivables from current and fo | | | | | |
| | | trustees, key employees, and highest compensa | ated em | ployees. Complete | | | |
| | | Part II of Schedule L | | 5 | | | |
| | 6 | Loans and other receivables from other disquali | | | | | |
| | | section 4958(f)(1)), persons described in section | | | | | |
| | | employers and sponsoring organizations of sect | ion 501 | (c)(9) voluntary | | | |
| ß | | employees' beneficiary organizations (see instr). | Compl | ete Part II of Sch L | | 6 | |
| Assets | 7 | Notes and loans receivable, net | | | 7 | | |
| Ä | 8 | Inventories for sale or use | | | 30,651. | 8 | 20,521. 21,313. |
| | 9 | Prepaid expenses and deferred charges | 11,713. | 9 | 21,313. | | |
| | 10a | Land, buildings, and equipment: cost or other | | | | | |
| | | basis. Complete Part VI of Schedule D Less: accumulated depreciation | 10a | 65,000. | | | |
| | b | Less: accumulated depreciation | 10b | 32,500. | 54,167. | 10c | 32,500. |
| | 11 | Investments - publicly traded securities | | 11 | | | |
| | 12 | Investments - other securities. See Part IV, line 1 | | 12 | | | |
| | 13 | Investments - program-related. See Part IV, line | | 13 | | | |
| | 14 | Intangible assets | | | 14 | | |
| | 15 | Other assets. See Part IV, line 11 | | | 15 | | |
| | 16 | Total assets. Add lines 1 through 15 (must equ | | | 1,755,182. | 16 | 1,814,380. |
| | 17 | Accounts payable and accrued expenses | | | 613,696. | 17 | 534,221. |
| | 18 | Grants payable | | | 18 | | |
| | 19 | Deferred revenue | | | 75,000. | 19 | |
| | 20 | Tax-exempt bond liabilities | | | | 20 | |
| | 21 | Escrow or custodial account liability. Complete | | | | 21 | |
| es | 22 | Loans and other payables to current and former | | | | | |
| ≝ | | key employees, highest compensated employee | , | | | | |
| Liabilities | | Complete Part II of Schedule L | | | | 22 | |
| _ | 23 | Secured mortgages and notes payable to unrela | | - | | 23 | |
| | 24 | Unsecured notes and loans payable to unrelated | | | | 24 | |
| | 25 | Other liabilities (including federal income tax, pa | • | | | | |
| | | parties, and other liabilities not included on lines | | | 212 440 | | 204 420 |
| | | Schedule D | | | 313,449. 1,002,145. | 25 | 294,429. 828,650. |
| | 26 | Total liabilities. Add lines 17 through 25 | | | 1,002,143. | 26 | 020,030. |
| | | Organizations that follow SFAS 117 (ASC 958 | | k nere 🚩 🔼 and | | | |
| Ses | 07 | complete lines 27 through 29, and lines 33 an Unrestricted net assets | | | 244,909. | 07 | 62 430 |
| anc | 27 | | | | 508,128. | 27 28 | 62,430. 923,300. |
| Bal | 28 | | | | 500,120. | <u>20</u> 29 | 723,3000 |
| 힏 | 29 | Organizations that do not follow SFAS 117 (A | |) shock have | | 29 | |
| 乓 | | and complete lines 30 through 34. | 3C 930 | j, check here | | | |
| S O | 20 | - | | | | 30 | |
| set | 30 31 | Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or ed | | | | 30 31 | |
| Net Assets or Fund Balances | 32 | Retained earnings, endowment, accumulated in | | | | 32 | |
| Net | 33 | Total net assets or fund balances | | | 753,037. | 33 | 985,730. |
| _ | 34 | Total liabilities and net assets/fund balances | | | 1,755,182. | 34 | 1,814,380. |
| | U4 | TOTAL HADIILIES AND HEL 455615/10110 DAIANCES . | | | 1,755,1020 | υ ή | 1,011,000 |

Form **990** (2018)

| Pa | rt XI Reconciliation of Net Assets | | | | | | |
|--|---|-----------|------|--------------|------------|--|--|
| | Check if Schedule O contains a response or note to any line in this Part XI | | | | | | |
| | | | | | | | |
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | 3,90 | | | | |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 3,67 | 1,1 | <u>12.</u> | | |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | | 2,6 | | | |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | 75 | 3,0 | 37. | | |
| 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 in Schedule O) | 9 | 0. | | | | |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, | | | | | | |
| | column (B)) | 10 | 98 | 5,7 3 | <u>30.</u> | | |
| Pa | rt XII Financial Statements and Reporting | | | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XII | | | | X | | |
| | | | | 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 in Schedule | O. | | | | | |
| 2a | 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 | 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 | Х | | | |
| | If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate | 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 | audit, | | | | | |
| | review, or compilation of its financial statements and selection of an independent accountant? | | 2c | Х | | | |
| | If the organization changed either its oversight process or selection process during the tax year, explain in Sche | dule O. | | | | | |
| За | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin | gle Audit | | | | | |
| | Act and OMB Circular A-133? | | 3a | | X | | |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required | ed audit | | | | | |
| or audits, explain why in Schedule O and describe any steps taken to undergo such audits | | | | | | | |

Form **990** (2018)

SCHEDULE A

Department of the Treasury

Internal Revenue Service

Total

(Form 990 or 990-EZ)

Public Charity Status and Public Support
Complete if the organization is a section 501(c)(3) organization or a section

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2018

Open to Public Inspection

Name of the organization

SAVE THE MUSIC FOUNDATION

Employer identification number 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). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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.) 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). 11 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 in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

Part II | Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

| Section A. Public Support | | | | | | | | | | |
|---------------------------|--|---------------------|----------------------|------------------------|---------------------|---------------------|-------------------|--|--|--|
| Cale | ndar year (or fiscal year beginning in) 🕨 | (a) 2014 | (b) 2015 | (c) 2016 | (d) 2017 | (e) 2018 | (f) Total | | | |
| 1 | Gifts, grants, contributions, and | | | | | | | | | |
| | membership fees received. (Do not | | | | | | | | | |
| | include any "unusual grants.") | 2487711. | 3241741. | 4034772. | 4006981. | 3901249. | <u> 17672454.</u> | | | |
| 2 | Tax revenues levied for the organ- | | | | | | | | | |
| | ization's benefit and either paid to | | | | | | | | | |
| | or expended on its behalf | | | | | | | | | |
| 3 | The value of services or facilities | | | | | | | | | |
| | furnished by a governmental unit to | | | | | | | | | |
| | the organization without charge | | | | | | | | | |
| 4 | Total. Add lines 1 through 3 | 2487711. | 3241741. | 4034772. | 4006981. | 3901249. | 17672454. | | | |
| 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) | | | | | | 1679212. | | | |
| 6 | Public support. Subtract line 5 from line 4. | | | | | | 15993242. | | | |
| Sec | ction B. Total Support | | | | | | | | | |
| Cale | ndar year (or fiscal year beginning in) 🕨 | (a) 2014 | (b) 2015 | (c) 2016 | (d) 2017 | (e) 2018 | (f) Total | | | |
| 7 | Amounts from line 4 | 2487711. | 3241741. | 4034772. | 4006981. | 3901249. | 17672454. | | | |
| 8 | Gross income from interest, | | | | | | | | | |
| | dividends, payments received on | | | | | | | | | |
| | securities loans, rents, royalties, | | | | | | | | | |
| | and income from similar sources | 699. | 802. | 715. | 5,157. | 2,556. | 9,929. | | | |
| 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.) | 203,684. | 351,911. | | 275,584. | | 831,179. | | | |
| 11 | Total support. Add lines 7 through 10 | | | | | | <u> 18513562.</u> | | | |
| 12 | Gross receipts from related activities, | | | | | 12 | | | | |
| 13 | First five years. If the Form 990 is for | the organization's | first, second, third | d, fourth, or fifth ta | x year as a sectior | 1 501(c)(3) | | | | |
| ~ | organization, check this box and stor | | | | | | | | | |
| | etion C. Computation of Publi | | - | | | | 06.20 | | | |
| 14 | Public support percentage for 2018 (I | | | | | 14 | 86.39 % | | | |
| 15 | Public support percentage from 2017 | | | | | 15 | 88.90 % | | | |
| 16a | 33 1/3% support test - 2018. If the o | = | | | | | | | | |
| | stop here. The organization qualifies | | - | | | | | | | |
| b | 33 1/3% support test - 2017. If the c | | | | line 15 is 33 1/3% | or more, check thi | is box | | | |
| | and stop here. The organization qual | | | | | | | | | |
| 17a | 10% -facts-and-circumstances test | ŭ | | | | | * | | | |
| | and if the organization meets the "fac | | | • | · | t VI how the orgar | nization | | | |
| | meets the "facts-and-circumstances" | - | | | • | | | | | |
| b | 10% -facts-and-circumstances test | • | | | | | | | | |
| | more, and if the organization meets the | | | | | | | | | |
| _ | organization meets the "facts-and-circ | | | • | | | > | | | |
| 18 | Private foundation. If the organization | n did not check a l | box on line 13, 16a | a, 16b, 17a, or 17b | , check this box ar | nd see instructions | 3 | | | |

Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

| | Public Support | now, piedoc com | note i uit ii.j | | | | |
|----------------------|---|--------------------|---------------------|----------------------|--------------------|----------------------|-------------|
| Calendar year (c | r fiscal year beginning in) | (a) 2014 | (b) 2015 | (c) 2016 | (d) 2017 | (e) 2018 | (f) Total |
| 1 Gifts, grar | its, contributions, and | | | | | | |
| membersl | nip fees received. (Do not | | | | | | |
| include ar | y "unusual grants.") | | | | | | |
| 2 Gross rec | eipts from admissions, | | | | | | |
| merchand | ise sold or services per- | | | | | | |
| | facilities furnished in | | | | | | |
| | y that is related to the on's tax-exempt purpose | | | | | | |
| - | eipts from activities that | | | | | | |
| | unrelated trade or bus- | | | | | | |
| | er section 513 | | | | | | |
| | ues levied for the organ- | | | | | | |
| | ŭ | | | | | | |
| | enefit and either paid to | | | | | | |
| • | ed on its behalf | | | | | | |
| | of services or facilities | | | | | | |
| | by a governmental unit to | | | | | | |
| · · | zation without charge | | | | | | |
| | l lines 1 through 5 | | | | | | |
| | ncluded on lines 1, 2, and | | | | | | |
| | from disqualified persons | | | | | | |
| | uded on lines 2 and 3 received in disqualified persons that | | | | | | |
| | eater of \$5,000 or 1% of the | | | | | | |
| amount on lin | e 13 for the year | | | | | | |
| c Add lines | 7a and 7b | | | | | | |
| | oport. (Subtract line 7c from line 6.) | | | | | | |
| Section B. | Total Support | | | | | | |
| • | r fiscal year beginning in) 🕨 | (a) 2014 | (b) 2015 | (c) 2016 | (d) 2017 | (e) 2018 | (f) Total |
| 9 Amounts | rom line 6 | | | | | | |
| | ome from interest, | | | | | | |
| | payments received on loans, rents, royalties, | | | | | | |
| and incom | ne from similar sources | | | | | | |
| b Unrelated b | usiness taxable income | | | | | | |
| (less section | n 511 taxes) from businesses | | | | | | |
| acquired af | ter June 30, 1975 | | | | | | |
| c Add lines | 10a and 10b | | | | | | _ |
| 11 Net incom | e from unrelated business | | | | | | |
| | not included in line 10b, | | | | | | |
| regularly o | r not the business is arried on | | | | | | |
| | ome. Do not include gain | | | | | | |
| | m the sale of capital | | | | | | |
| | plain in Part VI.) Prt. (Add lines 9, 10c, 11, and 12.) | | | | | | |
| | vears. If the Form 990 is for | the organization's | s first second thin | t fourth or fifth ta | y vear as a sectio | n 501(c)(3) organiza | etion |
| | . | ů. | | * | • | | · |
| | Computation of Public | | | | | | |
| | port percentage for 2018 (li | | | column (f)) | | 15 | % |
| | pport percentage from 2017 | , ,,, | • | | | 16 | |
| | Computation of Inves | | | | | 1 101 | |
| | t income percentage for 20 | | | ne 13. column (fl) | | 17 | % |
| | t income percentage from 2 | | | (// | | 18 | % |
| | upport tests - 2018. If the | | | | | | |
| | 33 1/3%, check this box an | | | | | ntin m | |
| | upport tests - 2017. If the | - | | | | | |
| | not more than 33 1/3%, chec | - | | | | | . — |
| | undation. If the organization | | | • | | - | |

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

- 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 (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 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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| 0- | | |
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| | | |
| 10a | | |
| 10b | | |
| | 10-E7 | 20.18 |

| Pai | τιν Supporting Organizations _(continued) | | | |
|----------|---|------------|------------|----------|
| | | | Yes | No |
| 11 | Has the organization accepted a gift or contribution from any of the following persons? | | | |
| а | A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) | | | |
| | below, the governing body of a supported organization? | 11a | | |
| b | A family member of a person described in (a) above? | 11b | | |
| <u>c</u> | A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI. | 11c | | |
| Sec | tion B. Type I Supporting Organizations | | | |
| | | | Yes | No |
| 1 | Did the directors, trustees, or membership of one or more supported organizations have the power to | | | |
| | regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the | | | |
| | tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or | | | |
| | controlled the organization's activities. If the organization had more than one supported organization, | | | |
| | describe how the powers to appoint and/or remove 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. tion C. Type II Supporting Organizations | | | |
| 000 | tion of Type in Supporting Organizations | | Yes | No |
| 1 | Were a majority of the organization's directors or trustees during the tax year also a majority of the directors | | 162 | INU |
| • | or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control | | | |
| | · | | | |
| | or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). | 1 | | |
| Sec | tion D. All Type III Supporting Organizations | | | |
| | | | Yes | No |
| 1 | Did the organization provide to each of its supported organizations, by the last day of the fifth month of the | | 100 | |
| • | organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax | | | |
| | year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the | | | |
| | organization's governing documents in effect on the date of notification, to the extent not previously provided? | 1 | | |
| 2 | Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported | | | |
| | organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how | | | |
| | the organization maintained a close and continuous working relationship with the supported organization(s). | 2 | | |
| 3 | By reason of the relationship described in (2), did the organization's supported organizations have a | | | |
| | significant voice in the organization's investment policies and in directing the use of the organization's | | | |
| | income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's | | | |
| | supported organizations played in this regard. | 3 | | |
| Sec | tion E. Type III Functionally Integrated Supporting Organizations | | | |
| 1 | Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions) |). | | |
| а | The organization satisfied the Activities Test. Complete line 2 below. | | | |
| b | The organization is the parent of each of its supported organizations. Complete line 3 below. | | | |
| С | The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst | tructions, |) <u> </u> | |
| 2 | Activities Test. Answer (a) and (b) below. | | Yes | No |
| а | Did substantially all of the organization's activities during the tax year directly further the exempt purposes of | | | |
| | the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify | | | |
| | those supported organizations and explain how these activities directly furthered their exempt purposes, | | | |
| | how the organization was responsive to those supported organizations, and how the organization determined | | | |
| | that these activities constituted substantially all of its activities. | 2a | | <u> </u> |
| b | Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more | | | |
| | of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the | | | l |
| | reasons for the organization's position that its supported organization(s) would have engaged in these | | | l |
| _ | activities but for the organization's involvement. | 2b | | ├─ |
| 3 | Parent of Supported Organizations. Answer (a) and (b) below. | | | l |
| а | Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or | _ | | l |
| | trustees of each of the supported organizations? <i>Provide details in Part VI</i> . | 3a | \vdash | \vdash |
| b | Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each | 01- | | l |
| | of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard. | 3b | | 1 |

| Pa | t V Type III Non-Functionally Integrated 509(a)(3) Supporting | g Organi | zations | |
|----------|---|--------------|-----------------------------|--------------------------------|
| 1 | Check here if the organization satisfied the Integral Part Test as a qualifying | g trust on N | lov. 20, 1970 (explain in F | Part VI.) See instructions. Al |
| | other Type III non-functionally integrated supporting organizations must co | mplete Sec | tions A through E. | |
| Sect | on A - Adjusted Net Income | | (A) Prior Year | (B) Current Year (optional) |
| 1 | Net short-term capital gain | 1 | | |
| 2 | Recoveries of prior-year distributions | 2 | | |
| _3_ | Other gross income (see instructions) | 3 | | |
| 4 | Add lines 1 through 3 | 4 | | |
| 5 | Depreciation and depletion | 5 | | |
| 6 | Portion of operating expenses paid or incurred for production or | | | |
| | collection of gross income or for management, conservation, or | | | |
| | maintenance of property held for production of income (see instructions) | 6 | | |
| 7 | Other expenses (see instructions) | 7 | | |
| 8 | Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) | 8 | | |
| Sect | on B - Minimum Asset Amount | | (A) Prior Year | (B) Current Year (optional) |
| 1 | Aggregate fair market value of all non-exempt-use assets (see | | | |
| | instructions for short tax year or assets held for part of year): | | | |
| a | Average monthly value of securities | 1a | | |
| b | Average monthly cash balances | 1b | | |
| с | Fair market value of other non-exempt-use assets | 1c | | |
| <u>d</u> | 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 1-1/2% of line 3 (for greater amount, | | | |
| | see instructions) | 4 | | |
| _5 | Net value of non-exempt-use assets (subtract line 4 from line 3) | 5 | | |
| _6_ | Multiply line 5 by .035 | 6 | | |
| _7_ | Recoveries of prior-year distributions | 7 | | |
| _8_ | Minimum Asset Amount (add line 7 to line 6) | 8 | | |
| Sect | on C - Distributable Amount | | | Current Year |
| _1_ | Adjusted net income for prior year (from Section A, line 8, Column A) | 1 | | |
| 2 | Enter 85% of line 1 | 2 | | |
| 3 | Minimum asset amount for prior year (from Section B, line 8, Column A) | 3 | | |
| 4 | Enter greater of line 2 or line 3 | 4 | | |
| 5 | Income tax imposed in prior year | 5 | | |
| 6 | Distributable Amount. Subtract line 5 from line 4, unless subject to | | | |
| | emergency temporary reduction (see instructions) | 6 | | |
| 7 | Check here if the current year is the organization's first as a non-functional | ly integrate | d Type III supporting orga | anization (see |
| | instructions). | | | |

Schedule A (Form 990 or 990-EZ) 2018

| Par | τν ∣ Type III Non-Functionally Integrated 509(| a)(3) Supporting Orga | inizations _(continued) | |
|---------------|---|-------------------------------|-----------------------------------|----------------------------------|
| Secti | on D - Distributions | | | Current Year |
| _1_ | Amounts paid to supported organizations to accomplish exer | mpt purposes | | |
| 2 | Amounts paid to perform activity that directly furthers exemp | t purposes of supported | | |
| | organizations, in excess of income from activity | | | |
| 3 | Administrative expenses paid to accomplish exempt purpose | s of supported organization | S | |
| 4 | Amounts paid to acquire exempt-use assets | | | |
| 5 | Qualified set-aside amounts (prior IRS approval required) | | | |
| 6 | Other distributions (describe in Part VI). See instructions. | | | |
| 7 | Total annual distributions. Add lines 1 through 6. | | | |
| 8 | Distributions to attentive supported organizations to which the | ne organization is responsive | 1 | |
| | (provide details in Part VI). See instructions. | · | | |
| 9 | Distributable amount for 2018 from Section C, line 6 | | | |
| 10 | Line 8 amount divided by line 9 amount | | | |
| | | (i) | (ii) | (iii) |
| Secti | on E - Distribution Allocations (see instructions) | Excess Distributions | Underdistributions Pre-2018 | Distributable Amount for 2018 |
| 1 | Distributable amount for 2018 from Section C, line 6 | | | |
| 2 | Underdistributions, if any, for years prior to 2018 (reason- | | | |
| | able cause required- explain in Part VI). See instructions. | | | |
| 3 | Excess distributions carryover, if any, to 2018 | | | |
| а | From 2013 | | | |
| b | From 2014 | | | |
| С | From 2015 | | | |
| | From 2016 | | | |
| | From 2017 | | | |
| | Total of lines 3a through e | | | |
| | Applied to underdistributions of prior years | | | |
| | Applied to 2018 distributable amount | | | |
| i | Carryover from 2013 not applied (see instructions) | | | |
| | Remainder. Subtract lines 3g, 3h, and 3i from 3f. | | | |
| 4 | Distributions for 2018 from Section D, | | | |
| • | line 7: | | | |
| | Applied to underdistributions of prior years | | | |
| | Applied to 2018 distributable amount | | | |
| | •• | | | |
| <u>с</u> 5 | Remainder. Subtract lines 4a and 4b from 4. | | | |
| J | Remaining underdistributions for years prior to 2018, 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 2018. Subtract lines 3h | | | |
| | and 4b from line 1. For result greater than zero, explain in | | | |
| | Part VI. See instructions. | | | |
| 7 | Excess distributions carryover to 2019. Add lines 3j | | | |
| | and 4c. | | | |
| 8 | Breakdown of line 7: | | | |
| | Excess from 2014 | | | |
| <u>b</u> | Excess from 2015 | | | |
| | Excess from 2016 | | | |
| <u>d</u> | Excess from 2017 | | | |
| е | Excess from 2018 | | 1 | |

Schedule A (Form 990 or 990-EZ) 2018

| Part V | Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.) | | | | | | | | | | |
|--------|---|------|------|-------|-----|------|--------|-------|-------|---------|--|
| SCHEI | DULE A, | PART | II, | LINE | 10, | EXPL | OITANA | N FOR | OTHER | INCOME: | |
| SPECI | AL EVEN | TS R | EVEN | JE | | | | | | | |
| 2014 | AMOUNT: | \$ | 203 | ,684. | | | | | | | |
| 2015 | AMOUNT: | \$ | 351, | ,911. | | | | | | | |
| 2017 | AMOUNT: | \$ | 275 | ,584. | | | | | | | |
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Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

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

OMB No. 1545-0047

2018

Name of the organization

SAVE THE MUSIC FOUNDATION

13-6089816

| Organization type (check one): | | | | | | | | |
|--------------------------------|---|--|--|--|--|--|--|--|
| Filers of | Filers of: Section: | | | | | | | |
| Form 99 | 0 or 990-EZ | X 501(c)(3) (enter number) organization | | | | | | |
| | | 4947(a)(1) nonexempt charitable trust not treated as a private foundation | | | | | | |
| | | 527 political organization | | | | | | |
| Form 99 | 0-PF | 501(c)(3) exempt private foundation | | | | | | |
| | | 4947(a)(1) nonexempt charitable trust treated as a private foundation | | | | | | |
| | | 501(c)(3) taxable private foundation | | | | | | |
| | | covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. | | | | | | |
| General | Rule | | | | | | | |
| | • | filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. | | | | | | |
| Special | Rules | | | | | | | |
| X | For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. | | | | | | | |
| | For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. | | | | | | | |
| | For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year | | | | | | | |
| but it mu | ust answer "No" on | at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), 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 ne filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF). | | | | | | |

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization Employer identification number

SAVE THE MUSIC FOUNDATION

13-6089816

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (d) (c) Name, address, and ZIP + 4 No. **Total contributions** Type of contribution 1 X Person **Payroll** 225,000. Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 **Total contributions** No. Type of contribution 2 X Person Payroll 225,000. Noncash (Complete Part II for noncash contributions.) (a) (c) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. 3 X Person **Payroll** 100,000. Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 4 X Person Payroll 190,000. Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 5 Person **Payroll** 300,000. Noncash (Complete Part II for noncash contributions.) (b) (c) (d) (a) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. 6 X Person Payroll 109,597. Noncash (Complete Part II for noncash contributions.)

Name of organization Employer identification number

SAVE THE MUSIC FOUNDATION

13-6089816

| Part I | Contributors (see instructions). Use duplicate copies of Part I if additional | space is needed. | |
|------------|---|----------------------------|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 7 | | \$ <u>177,500.</u> | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |

Name of organization Employer identification number

SAVE THE MUSIC FOUNDATION

13-6089816

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

Name of organization

Employer identification number

SAVE THE MUSIC FOUNDATION

13-6089816

| Part III | Exclusively religious, charitable, etc., contributi from any one contributor. Complete columns (a completing Part III, enter the total of exclusively religious, | through (e) and the following line er | section 501(c)(7), (8), or (10) that total more than \$1,000 for the year entry. For organizations or less for the year. (Enter this info. once.) | | | | | |
|---------------------------|--|---------------------------------------|---|--|--|--|--|--|
| | Use duplicate copies of Part III if additional | space is needed. | | | | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held | | | | | |
| | | | | | | | | |
| | | (e) Transfer of gir | | | | | | |
| | | (e) Hallster Orgi | jiit. | | | | | |
| | Transferee's name, address, ar | nd ZIP + 4 | Relationship of transferor to transferee | | | | | |
| | | | | | | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held | | | | | |
| | | | | | | | | |
| | | () Torreston of all | | | | | | |
| | (e) Transfer of gift | | | | | | | |
| _ | Transferee's name, address, at | nd ZIP + 4 | Relationship of transferor to transferee | | | | | |
| | | | | | | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held | | | | | |
| | | | | | | | | |
| | (e) Transfer of gift | | | | | | | |
| | Transferee's name, address, ar | | Relationship of transferor to transferee | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | (e) Transfer of gi | | | | | | |
| - | Transferee's name, address, ar | nd 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.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

SAVE THE MUSIC FOUNDATION

Employer identification number 13-6089816

| Pai | t I Organizations Maintaining Donor Advise | d Funds or Other Similar Funds | or Accounts. Complete if the |
|-----|--|--|---|
| | organization answered "Yes" on Form 990, Part IV, lin | e 6. | |
| | | (a) Donor advised funds | (b) Funds and other accounts |
| 1 | Total number at end of year | | |
| 2 | Aggregate value of contributions to (during year) | | |
| 3 | Aggregate value of grants from (during year) | | |
| 4 | Aggregate value at end of year | | |
| 5 | Did the organization inform all donors and donor advisors in v | - | |
| | are the organization's property, subject to the organization's | | |
| 6 | Did the organization inform all grantees, donors, and donor a | | |
| | for charitable purposes and not for the benefit of the donor o | r donor advisor, or for any other purpose | |
| Day | | | |
| Pai | | · · · · · · · · · · · · · · · · · · · | Part IV, line 7. |
| 1 | Purpose(s) of conservation easements held by the organization | | |
| | Preservation of land for public use (e.g., recreation or e | | torically important land area |
| | Protection of natural habitat | Preservation of a cer | tified historic structure |
| | Preservation of open space | | |
| 2 | Complete lines 2a through 2d if the organization held a qualif | ied conservation contribution in the form | |
| | day of the tax year. | | Held at the End of the Tax Year |
| а | | | |
| b | | | |
| C | Number of conservation easements on a certified historic stru | | |
| d | Number of conservation easements included in (c) acquired a | | |
| • | listed in the National Register | | |
| 3 | Number of conservation easements modified, transferred, release | eased, extinguished, or terminated by the | organization during the tax |
| 4 | year ▶ Number of states where property subject to conservation eas | noment is legated | |
| 5 | Does the organization have a written policy regarding the per | | |
| 3 | violations, and enforcement of the conservation easements it | | Yes No |
| 6 | Staff and volunteer hours devoted to monitoring, inspecting, | | |
| J | The state of | rialianing of violations, and emoroning conk | sorvation easements daring the year |
| 7 | Amount of expenses incurred in monitoring, inspecting, hand | lling of violations, and enforcing conserva | tion easements during the year |
| • | ► \$ | ining of violations, and emoroting concerva | and sacomonic daming the year |
| 8 | Does each conservation easement reported on line 2(d) above | e satisfy the requirements of section 170 | (h)(4)(B)(i) |
| _ | | | |
| 9 | In Part XIII, describe how the organization reports conservation | | |
| • | include, if applicable, the text of the footnote to the organizat | · | |
| | conservation easements. | | |
| Pai | t III Organizations Maintaining Collections of | Art, Historical Treasures, or O | ther Similar Assets. |
| | Complete if the organization answered "Yes" on Form | 990, Part IV, line 8. | |
| 1a | If the organization elected, as permitted under SFAS 116 (AS | C 958), not to report in its revenue staten | nent and balance sheet works of art, |
| | historical treasures, or other similar assets held for public exh | nibition, education, or research in furthera | nce of public service, provide, in Part XIII, |
| | the text of the footnote to its financial statements that describ | bes these items. | |
| b | If the organization elected, as permitted under SFAS 116 (AS | C 958), to report in its revenue statement | and balance sheet works of art, historical |
| | treasures, or other similar assets held for public exhibition, ed | ducation, or research in furtherance of pu | blic service, provide the following amounts |
| | relating to these items: | | |
| | (i) Revenue included on Form 990, Part VIII, line 1 | | > \$ |
| | | | |
| 2 | If the organization received or held works of art, historical trea | | ıl gain, provide |
| | the following amounts required to be reported under SFAS 1 | 16 (ASC 958) relating to these items: | |
| а | Revenue included on Form 990, Part VIII, line 1 | | > \$ |
| b | Assets included in Form 990, Part X | | |

| Sche | dule D (Form 990) 2018 SAVE TH | E MUSIC FO | UNDA' | TION | | | | 13-60 | 89816 | P | age 2 |
|----------|--|------------------------|------------|----------------|----------------|---------------|-------------------|-------------|-----------|--------|-------|
| Par | t III Organizations Maintaining C | ollections of Ar | t, Hist | orical Tre | asures, o | r Other 9 | Similaı | r Assets | (contin | ued) | |
| 3 | Using the organization's acquisition, accessi- | on, and other record | ls, check | any of the f | ollowing that | t are a sign | nificant u | se of its c | ollection | items | ; |
| | (check all that apply): | | | | | | | | | | |
| а | Public exhibition | c | t | Loan or exc | hange progra | ams | | | | | |
| b | Scholarly research | • | • | Other | | | | | | | |
| С | Preservation for future generations | | | | | | | | | | |
| 4 | Provide a description of the organization's co | ollections and explain | n how th | ney further th | ne organizatio | on's exemp | ot purpo: | se in Part | XIII. | | |
| 5 | During the year, did the organization solicit of | r receive donations | of art, hi | storical treas | sures, or othe | er similar a | ssets | | | | |
| | to be sold to raise funds rather than to be ma | aintained as part of t | he orgar | nization's co | llection? | | | | Yes | | No |
| Par | t IV Escrow and Custodial Arran | gements. Compl | ete if the | organizatio | n answered | "Yes" on F | orm 990 | , Part IV, | ine 9, or | | |
| | reported an amount on Form 990, Pa | rt X, line 21. | | | | | | | | | |
| 1a | Is the organization an agent, trustee, custodi | an or other intermed | liary for | contributions | s or other as: | sets not ind | cluded | | | | |
| | on Form 990, Part X? | | | | | | | | Yes | | No |
| b | If "Yes," explain the arrangement in Part XIII | | | | | | | | | | |
| | | | | | | | | | Amount | | |
| С | Beginning balance | | | | | | 1c | | | | |
| d | Additions during the year | | | | | | 1d | | | | |
| е | Distributions during the year | | | | | | 1e | | | | |
| f | Ending balance | | | | | | 1f | | | | |
| 2a | Did the organization include an amount on Fe | orm 990, Part X, line | 21, for | escrow or cu | ıstodial acco | unt liability | /? | \square | Yes | | No |
| | If "Yes," explain the arrangement in Part XIII. | | | | | | | | | | |
| Par | t V Endowment Funds. Complete | if the organization ar | nswered | "Yes" on Fo | rm 990, Part | : IV, line 10 | | | | | |
| | | (a) Current year | (b) F | Prior year | (c) Two yea | rs back (c | 1) Three y | ears back | (e) Four | years | back |
| 1a | Beginning of year balance | | | | | | | | | | |
| b | Contributions | | | | | | | | | | |
| С | Net investment earnings, gains, and losses | | | | | | | | | | |
| d | Grants or scholarships | | | | | | | | | | |
| е | Other expenditures for facilities | | | | | | | | | | |
| | and programs | | | | | | | | | | |
| f | Administrative expenses | | | | | | | | | | |
| g | End of year balance | | | | | | | | | | |
| 2 | Provide the estimated percentage of the curr | rent year end balanc | e (line 1 | g, column (a) |)) held as: | | | | | | |
| а | Board designated or quasi-endowment | | _% | | | | | | | | |
| b | Permanent endowment | % | | | | | | | | | |
| С | Temporarily restricted endowment | % | | | | | | | | | |
| | The percentages on lines 2a, 2b, and 2c sho | | | | | | | | | | |
| За | Are there endowment funds not in the posse | ssion of the organiza | ation tha | it are held ar | nd administei | red for the | organiza | ation | Г | | |
| | by: | | | | | | | | | Yes | No |
| | (i) unrelated organizations | | | | | | | | 3a(i) | | |
| | (ii) related organizations | | | | | | | | 3a(ii) | | |
| _ | If "Yes" on line 3a(ii), are the related organiza | | | | | | | | 3b | | |
| Par | Describe in Part XIII the intended uses of the tVI Land, Buildings, and Equipm | | wment i | runas. | | | | | | | |
| <u> </u> | Complete if the organization answere | |) Dart I\ | / lino 11a S | 00 Form 990 | Dart V lir | 20.10 | | | | |
| | Description of property | (a) Cost or o | | | or other | | cumulate | <u>ad </u> | (d) Book | براورن | |
| | Description of property | basis (investr | | 1 ' ' | (other) | | eciation | | (u) Door | valu | |
| | Land | | | | | | | | | | |
| b | Buildings | | | | | | | | | | |
| С | Leasehold improvements | | | | | | | | | | |
| d | Equipment | | | | | | | | | | |

65,000.

Schedule D (Form 990) 2018

32,500.

32,500.

32,500.

e Other

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

| Schedule D (Form 990) 2018 SAVE THE MU | SIC FOUNDA | TION | 13-6089816 Page 3 |
|--|----------------------|--------------------------------|---|
| Part VII Investments - Other Securities. | | | - |
| Complete if the organization answered "Yes" | | | |
| (a) Description of security or category (including name of security) | (b) Book value | (c) Method of valu | ation: Cost or end-of-year 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, Par | t X, line 13. |
| (a) Description of investment | (b) Book value | (c) Method of valu | ation: Cost or end-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. | | | |
| Complete if the organization answered "Yes" | on Form 990, Part IV | , line 11d. See Form 990, Par | t 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) lin | e 15.) | | |
| Part X Other Liabilities. | | | |
| Complete if the organization answered "Yes" | on Form 990, Part IV | , line 11e or 11f. See Form 99 | 90, Part X, line 25. |
| 1. (a) Description of liability | | (b) Book value | |

| 1. (a) Description of hability | (b) Book value |
|--|----------------|
| (1) Federal income taxes | |
| (2) DUE TO MTV NETWORKS | 294,429. |
| (3) | |
| (4) | |
| (5) | |
| (6) | |
| (7) | |
| (8) | |
| (9) | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) | 294,429. |

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 FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

| Pai | rt XI | Reconciliation of Revenue per Audited Financial Statemen | ts With Revenue per Re | turn. | |
|-------|-------------|---|------------------------------------|----------|------------------------|
| | | Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. | | | |
| 1 | Total | revenue, gains, and other support per audited financial statements | | 1 | 4,610,921. |
| 2 | | ints included on line 1 but not on Form 990, Part VIII, line 12: | | | |
| а | | nrealized gains (losses) on investments | 2a | | |
| b | | ted services and use of facilities | 2b 707,116. | | |
| С | Reco | veries of prior year grants | 2c | | |
| d | Other | (Describe in Part XIII.) | 2d | | |
| е | Add li | nes 2a through 2d | | 2e | 707,116. |
| 3 | Subtr | act line 2e from line 1 | | 3 | 3,903,805. |
| 4 | Amou | ints included on Form 990, Part VIII, line 12, but not on line 1: | | | |
| а | Invest | tment expenses not included on Form 990, Part VIII, line 7b | 4a | | |
| b | Other | (Describe in Part XIII.) | 4b | | |
| С | | nes 4a and 4b | | 4c | 0. |
| 5 | Total | revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) | | 5 | 3,903,805. |
| Pa | rt XII | Reconciliation of Expenses per Audited Financial Stateme | nts With Expenses per F | ?eturn | l . |
| | | Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. | | | |
| 1 | Total | expenses and losses per audited financial statements | | 1 | 4,378,228. |
| 2 | Amou | ints included on line 1 but not on Form 990, Part IX, line 25: | 1 1 | | |
| а | Dona | ted services and use of facilities | 2a 707,116. | | |
| b | Prior | year adjustments | 2b | | |
| С | Other | losses | 2c | | |
| d | Other | (Describe in Part XIII.) | 2d | | |
| е | Add li | nes 2a through 2d | | 2e | 707,116. 3,671,112. |
| 3 | Subtr | act line 2e from line 1 | | 3 | 3,671,112. |
| 4 | | ints included on Form 990, Part IX, line 25, but not on line 1: | | | |
| а | Invest | tment expenses not included on Form 990, Part VIII, line 7b | 4a | | |
| b | Other | (Describe in Part XIII.) | 4b |] | |
| С | Add li | nes 4a and 4b | | 4c | 0. |
| 5 | | expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) | | 5 | 3,671,112. |
| | | Supplemental Information. | | | |
| Provi | ide the | descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV | V, lines 1b and 2b; Part V, line 4 | ; Part X | , line 2; Part XI, |
| lines | 2d and | l 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any addit | ional information. | | |
| | | | | | |
| | | | | | |
| PAI | RT X | , LINE 2: | | | |
| | | | | | |
| THI | E FO | <u>UNDATION BELIEVES IT HAS NO UNCERTAIN T</u> | AX POSITIONS AS | OF S | SEPTEMBER |
| | | | | | |
| 30 | <u>, 20</u> | 19 AND 2018 IN ACCORDANCE WITH ACCOUNTI | NG STANDARDS COD | IFIC | CATION |
| | | | | | |
| ("2 | ASC" |) TOPIC 740, WHICH PROVIDES STANDARDS FO | OR ESTABLISHING | AND | |
| | | | | | |
| CL2 | ASSI | FYING ANY TAX PROVISIONS FOR UNCERTAIN ' | TAX POSITIONS. | | |
| | | | | | |
| | | | | | |
| | | | | | |
| PAI | RT X | , LINE 1(2) | | | |
| | | | | | |
| OTE | IER | LIABILITIES CONSISTS OF LIABILITY TO MT | V NETWORKS (MTVN |) FC |)R |
| | | | | | |
| EXI | PENS | ES PAID BY MTVN THAT SAVE THE MUSIC FOU | NDATION NEEDS TO | RE] | MBURSE |
| | | | | | |
| /TM | ЛN. | THE FOUNDATION IS ABLE TO UTILIZE MTVN : | BUYING POWER AND | QUA | NTITY |
| | | | | | |
| DIS | SCOU | NTS. THE DIRECT EXPENSES RELATED TO FOU | NDATION ARE RECO | RDEI | AS |
| | | | | | |

EXPENSES AND LIABILITY TO BE REIMBURSED TO MTVN.

| Schedule D (Form 990) 2018 SAVE THE | MUSIC FOUNDATION | 13-6089816 | Page 5 |
|---|------------------|------------|--------|
| Schedule D (Form 990) 2018 SAVE THE Part XIII Supplemental Information continuous | ued) | | |
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SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

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

► Attach to Form 990.

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

| Name of the organization SAVE THE | MUSIC FOU | FOUNDATION | | | | | Employer identification number 13-6089816 |
|---|--------------------------------|------------------------------------|-----------------------------|---|---|---|---|
| Grants | ind Assistance | | | | | | |
| Does the organization maintain records to substantiate the amount of criteria used to award the grants or assistance? | to substantiate the stance? | | or assistance, the | grantees' eligibility | for the grants or assik | the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection | no X Yes No |
| 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States | ocedures for monit | oring the use of grant f | funds in the United | States. | | | |
| Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. | Domestic Organi | zations and Domestic | Governments. | omplete if the org | anization answered "Y | Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any | IV, line 21, for any |
| recipient that received more than \$5,000. Part II can be duplicated if additional space is needed | \$5,000. Part II can | be duplicated if additic | onal space is need | Эd. | | | |
| 1 (a) Name and address of organization or government | (p) | (c) IRC section (if applicable) | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, EMV, appraisal, other) | (g) Description of noncash assistance | (h) Purpose of grant or assistance |
| ANAHEIM ELEMENTARY SCHOOL DISTRICT | | | | | | | |
| EAST | | i. | • | | | MUSICAL | |
| ANAHKIM, CA 92805 | 6TT0009-66 | 115 | 0. | 148,514. | BOOK VALUE | LNSTRUMENTS | MUSIC EDUCATION |
| ATLANTA PUBLIC SCHOOLS 130 TRINITY AVE SW ATLANTA, GA 30303 | 58-6000134 | 501(C)(3) | •0 | 15,543. | BOOK VALUE | MUSICAL INSTRUMENTS | MUSIC EDUCATION |
| AVONDALE ELEMENTARY SCHOOL | | | | | | | |
| DISTRICT - 295 W WESTERN AVE - AVONDALE A7, 85323 | 86-6000500 | 501(C)(3) | 0 | 43 345 | BOOK VALUE | MUSICAL TNSTRUMENTS | MUSTC RDUCATION |
| 7 | | 16110110 | • | | TOTAL VOOD | CIMERONIANI | |
| BOONE COUNTY SCHOOLS 69 AVENUE B | | | | | | MUSICAL | |
| MADISON, WV 25130 | 55-6000299 | 501(C)(3) | 0. | 49,505. | BOOK VALUE | INSTRUMENTS | MUSIC EDUCATION |
| VIST CT - | | | | | | MUSICAL | |
| VISTA, CA 91910 | 95-6000613 | 501(C)(3) | 0. | 99,010. | BOOK VALUE | INSTRUMENTS | MUSIC EDUCATION |
| DANBURY PUBLIC SCHOOLS 63 BEAVER BROOK RD DANBIRY CT 68100 | 06-6001980 | 501(0)(3) | d | 43 345 | ROOK VALUR | MUSICAL TNSTRUMENTS | MUSIC RDUCATION |
| DANBORI, CI COLOO | 0067000-00 | | | ` | BOOK VALUE | TINGTROUTENTS | |
| | nd government or | ions | listed in the line 1 table | | | | 77 |
| -1 | s listed in the line | 1 table | | | | | A |
| LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. | , see the Instructi | ions for Form 990. | | | | | Schedule I (Form 990) (2018 |

Schedule I (Form 990) (2018)

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| Schedule (Form 990) SAVE THE MUSIC FOUNDATION Dart II Continuation of Grants and Other Assistance to Congruents and | THE MUSIC FOU | | Organizations in the United States | | Schodula I (Form 000) Dart [1] | 1 | 3-6089816 Page 1 |
|---|---------------|------------------|------------------------------------|----------|---|--|---------------------------------------|
| (a) Name and address of organization or government | (p) EIN | | (d) Amount of cash grant | 1 7 7 0 | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| DAYTON PUBLIC SCHOOLS 115 S. LUDLOW ST DAYTON, OH 45402 | 31-6000784 | 501(C)(3) | .0 | 101,995. | BOOK VALUE | MUSICAL INSTRUMENTS | MUSIC EDUCATION |
| GREENBRIER COUNTY SCHOOLS 202 CHESTNUT ST LEWISBURG, WV 24901 | 55-6000321 | 501(C)(3) | .0 | 49,505. | BOOK VALUE | MUSICAL INSTRUMENTS | MUSIC EDUCATION |
| HOUSTON INDEPENDENT SCHOOL DISTRICT - 4400 WEST 18TH STREET - HOUSTON, TX 77092-8501 | 74-6001255 | 501(C)(3) | •0 | 12,648. | BOOK VALUE | MUSICAL INSTRUMENTS | MUSIC EDUCATION |
| KANAWHA COUNTY SCHOOLS 200 ELIZABETH ST CHARLESTON, WV 25311 | 55-0687006 | 501(C)(3) | 0. | 49,505. | BOOK VALUE | MUSICAL INSTRUMENTS | MUSIC EDUCATION |
| LOS ANGELES UNIFIED SCHOOL DISTRICT - 333 SOUTH BEAUDRY AVENUE - LOS ANGELES, CA 90017 | 95-6001908 | 501(C)(3) | .0 | 54,879. | BOOK VALUE | MUSICAL INSTRUMENTS | MUSIC EDUCATION |
| MERCER COUNTY SCHOOLS 1403 HONAKER AVE PRINCETON, WV 24740 | 55-6000358 | 501(C)(3) | .0 | 49,505. | BOOK VALUE | MUSICAL INSTRUMENTS | MUSIC EDUCATION |
| MIAMI DADE COUNTY PUBLIC SCHOOLS 1450 NE SECOND AVE MIAMI, FL 33132 | 59-6000572 | 501(C)(3) | 0. | 75,137. | BOOK VALUE | MUSICAL INSTRUMENTS | MUSIC EDUCATION |
| MINBRAL COUNTY SCHOOLS 1 BAKER PLACE KEYSER, WV 26726 | 55-6000361 | 501(C)(3) | .0 | 49,505, | BOOK VALUE | MUSICAL INSTRUMENTS | MUSIC EDUCATION |
| MONONGALIA COUNTY SCHOOLS 12 S HIGH ST MORGANTOWN, WV 26501 | 55-6000366 | 501(C)(3) | 0. | 40,505. | BOOK VALUE | MUSICAL INSTRUMENTS | MUSIC EDUCATION |
| | | | | | | | Schedule I (Form 990) |

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| Schedule I (Form 990) SAVE THE 1 | MUSIC FOU | | | | | 1 | 13-6089816 Page 1 |
|--|------------|-----------|---|----------|---|--|------------------------------------|
| (a) Name and address of coganization or government if applications of a coganization or government (b) EIN (c) IRC sec | (b) EIN | | ion (d) Amount of (e) Amou le cash grant assistar | l freq | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| MONROE COUNTY SCHOOLS WILLOW BEND RD UNION, WV 24983 | 55-6000368 | 501(C)(3) | •0 | 49,505. | BOOK VALUE | MUSICAL INSTRUMENTS | MUSIC EDUCATION |
| NEWARK PUBLIC SCHOOLS 15 STATE ST NEWARK, NJ 07104 | 22-6002140 | 501(C)(3) | 0 | 340,423. | BOOK VALUE | MUSICAL INSTRUMENTS | MUSIC EDUCATION |
| NYC BOARD OF EDUCATION 52 CHAMBERS ST NEW YORK, NY 10007 | 33-2200010 | 501(C)(3) | .0 | 87,701. | BOOK VALUE | MUSICAL INSTRUMENTS | MUSIC EDUCATION |
| ORLEANS PARISH PUBLIC SCHOOLS 3510 GENERAL DECAULLE STREET NEW ORLEANS, LA 70114 | 72-1409800 | 501(C)(3) | .0 | 194,801. | BOOK VALUE | MUSICAL INSTRUMENTS | MUSIC EDUCATION |
| PAJARO VALLEY UNIFIED SCHOOL DISTRICT - 294 GREEN VALLEY RD - WATSONVILLE, CA 95076 | 77-0375541 | 501(C)(3) | 0. | 25,299. | BOOK VALUE | MUSICAL INSTRUMENTS | MUSIC EDUCATION |
| PATERSON PUBLIC SCHOOLS 90 DELAWARE AVENUE PATERSON, NJ 07503 | 22-6002199 | 501(C)(3) | 0. | 94,122. | BOOK VALUE | MUSICAL INSTRUMENTS | MUSIC EDUCATION |
| PUTNAM COUNTY SCHOOLS 9 COURTHOUSE DR WINFIELD, WV 25213 | 59-6000621 | 501(c)(3) | 0. | 49,505. | BOOK VALUE | MUSICAL INSTRUMENTS | MUSIC EDUCATION |
| VISTA UNIFIED SCHOOL DISTRICT 1234 ARCADIA STREET VISTA, CA 92084 | 95-6003432 | 501(C)(3) | 0. | 15,543. | BOOK VALUE | MUSICAL INSTRUMENTS | MUSIC EDUCATION |
| WELLPINIT SCHOOL DISTRICT #49 6270 WELLPINIT-WESTEND RD WELLPINIT, WA 99040 | 91-1073793 | 501(C)(3) | 0. | 44,429. | BOOK VALUE | MUSICAL INSTRUMENTS | MUSIC EDUCATION |

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Page 1

| edule I (Form 990) | SAVE | THE | THE MUSIC | SAVE THE MUSIC FOUNDATION | |
|--------------------|--------------|---------|------------|---|-----------------------------------|
| Continuation | of Grants an | d Other | Assistance | e to Governments and Organizations in the United States (| (Schedule I (Form 990), Part II.) |

| (a) Name and address of cash grant or government or government assistance appraisal, other | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | ا ـ ا | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|----------------------------------|--------------------------|-----------------------------------|--------------------|--|------------------------------------|
| WINDHAM PUBLIC SCHOOLS 322 PROSPECT STREET WILLIMANTIC, CT 06226 | 06-1201204 | 501(C)(3) | .0 | 25,499. | 25,499. BOOK VALUE | MUSICAL INSTRUMENTS | MUSIC EDUCATION |
| WYOMING COUNTY SCHOOLS 19 PARK ST PINEVILLE, WV 24874 | 55-6000422 | 501(C)(3) | .0 | 49,505. | BOOK VALUE | MUSICAL INSTRUMENTS | MUSIC EDUCATION |
| ZION ELEMENTARY SCHOOL DISTRICT 6 2200 BETHESDA BOULEVARD ZION, IL 60099 | 36-6004832 | 501(C)(3) | 0. | 97,500. | 97,500.BOOK VALUE | MUSICAL INSTRUMENTS | MUSIC EDUCATION |
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| | | | | | | | Schedule I (Form 990) |

13-6089816

Schedule I (Form 990) (2018) SAVE THE MUSIC FOUNDATION

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.

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

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Part I Types of Property

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

Attach to Form 990.

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

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

| | | (a) Check if applicable | (b) Number of contributions or litems contributed | (c) Noncash contribution amounts reported on Form 990, Part VIII, line 1q | (d) Method of determ noncash contribution | • | | |
|---------|--|-------------------------------|---|---|---|-----|-----|--|
| 1 | Art - Works of art | | Itomo continuatos | r onn ood, r are viii, iino 1g | | | | |
| 2 | Art - Historical treasures | | | | | | | |
| 3 | Art - Fractional interests | | | | | | | |
| 4 | Books and publications | | | | | | | |
| 5 | Clothing and household goods | | | | | | | |
| 6 | Cars and other vehicles | | | | | | | |
| 7 | Boats and planes | | | | | | | |
| 8 | Intellectual property | | | | | | | |
| 9 | Securities - Publicly traded | | | | | | | |
| 10 | Securities - Closely held stock | | | | | | | |
| 11 | Securities - Partnership, LLC, or | | | | | | | |
| | trust interests | | | | | | | |
| 12 | Securities - Miscellaneous | | | | | | | |
| 13 | Qualified conservation contribution - | | | | | | | |
| | Historic structures | | | | | | | |
| 14 | Qualified conservation contribution - Other | | | | | | | |
| 15 | Real estate - Residential | | | | | | | |
| 16 | Real estate - Commercial | | | | | | | |
| 17 | Real estate - Other | | | | | | | |
| 18 | Collectibles | | | | | | | |
| 19 | Food inventory | | | | | | | |
| 20 | Drugs and medical supplies | | | | | | | |
| 21 | Taxidermy | | | | | | | |
| 22 | Historical artifacts | | | | | | | |
| 23 | Scientific specimens | | | | | | | |
| 24 | Archeological artifacts | | | 4 4 2 4 4 4 2 | | | | |
| 25 | Other (MUSIC INSTRUM) | X | 4,503 | | | | | |
| 26 | Other (OTHER) | Х | 120 | 87,849. | COST | | | |
| 27 | Other () | | | | | | | |
| 28 | Other () | | | | | | | |
| 29 | Number of Forms 8283 received by the organiz | | | | | | | |
| | for which the organization completed Form 828 | 83, Part IV, I | Donee Acknowledo | jement 29 | | _ | _ | |
| | | | | | | Yes | No | |
| 30a | During the year, did the organization receive by | | | = | | | | |
| | must hold for at least three years from the date | | , | , | | | - T | |
| _ | exempt purposes for the entire holding period? | ? | | | <u>30</u> a | 1 | X | |
| | b If "Yes," describe the arrangement in Part II. | | | | | | | |
| 31 | | | | | | | | |
| 32a | | | _ | • • | | | x | |
| ı. | contributions? | | | | 328 | + | ├^ | |
| 33 D | If "Yes," describe in Part II. | olump (a) ta | r a type of propert | for which column (a) is about | akad | | | |
| SS | | oiuiiii (c) foi | a type of property | TOT WHICH COLUMN (a) IS CHEC | JNOU, | | | |
| 33 | If the organization didn't report an amount in c describe in Part II. | olumn (c) fo | r a type of property | rfor which column (a) is chec | cked, | | | |

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

SAVE THE MUSIC FOUNDATION

Employer identification number 13-6089816

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

Name of the organization

Employer identification number

SAVE THE MUSIC FOUNDATION 13-6089816

PROGRAM AND POLICY STAFF MEMBERS FROM THE FOUNDATION WORK CLOSELY WITH

SUPERINTENDENTS, SCHOOL BOARD MEMBERS, PRINCIPALS, ARTS COORDINATORS,

AND MUSIC EDUCATORS IN EACH SCHOOL DISTRICT TO IDENTIFY SCHOOLS THAT

ARE ELIGIBLE TO PARTICIPATE. THE FOUNDATION WORKS WITH LOCAL

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

CURRENTLY ELIGIBLE TO PARTICIPATE IN THE FOUNDATION'S RESTORATION OF

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

FOUNDATION WORKS TO ENABLE EVERY SCHOOL WITHIN THE DISTRICT TO HAVE

ACCESS TO MUSIC EDUCATION.

THE FOUNDATION OFFERS FOUR DIFFERENT TYPES OF GRANT PACKAGES TO PUBLIC
SCHOOLS BASED ON GRADE LEVEL, NEED, AND THE SCHOOL'S MUSIC PROGRAMMING
GOALS. THE GRANT PACKAGES ARE DECIDED UPON WITH THE INPUT OF DISTRICT
ADMINISTRATORS, SCHOOL LEADERS, AND THE FOUNDATION'S PROGRAM AND POLICY
STAFF. THE FOUNDATION EXPANDS ITS REACH IN SERVING ALL PUBLIC SCHOOL
STUDENTS PRE-KINDERGARTEN THROUGH 12TH GRADE. A SCHOOL MUST CONDUCT
THEIR INSTRUMENTAL MUSIC PROGRAM AS PART OF THE REGULAR SCHOOL DAY,
PROVIDE A DESIGNATED SPACE FOR MUSIC INSTRUCTION AND COMMIT TO HIRING A
FULL-TIME, CERTIFIED MUSIC EDUCATOR. BY GUARANTEEING THAT EACH GRANT
RECIPIENT SCHOOL FULFILLS THE SCHEDULE, SPACE, AND STAFF REQUIREMENTS,
THE FOUNDATION FOSTERS A SUSTAINABLE MUSIC PROGRAM.

CORE GRANT

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

CORNERSTONE GRANT THAT WE PROVIDE TO THE MAJORITY OF OUR GRANTEE

SCHOOLS ACROSS THE COUNTRY. EACH GRANT IS VALUED AT APPROXIMATELY

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

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

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

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

INTRO TO MUSIC GRANT

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

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

SEQUENTIAL, STANDARDS-BASED GENERAL MUSIC INSTRUCTION, FOCUSED IN

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

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

CULTURALLY-RELEVANT INSTRUMENTS AND RESOURCES: DIGITAL PIANO, ACOUSTIC

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

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

SUPPORT FOR 10 YEARS.

J DILLA MUSIC TECH GRANT

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

DELIVERING THE FUTURE OF MUSIC LEARNING THROUGH INNOVATIVE MUSIC TECH

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

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

FUNDAMENTALS OF ELECTRONIC MUSIC CREATION, RECORDING, AND PRODUCTION.

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

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

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

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

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

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

MUSIC EDUCATION, AND PROGRAM SUPPORT FOR 10 YEARS.

Name of the organization **Employer identification number** SAVE THE MUSIC FOUNDATION 13-6089816 THE KEYS + KIDS GRANT SUPPORTS ANY TYPE OF MUSIC EDUCATION PROGRAM, INCLUDING VOCAL/CHORAL, GENERAL MUSIC, MUSICAL THEATRE, ETC. THE GRANT IS VALUED AT APPROXIMATELY \$22,000 AND INCLUDES A CONTEMPORARY, DIGITAL HYBRID PIANO, KEYBOARDS, METHOD BOOKS, AND PROGRAM SUPPORT FOR 10 YEARS. A GRANT OF INSTRUMENTS PROVIDES THE IMPETUS FOR MUSIC PROGRAMS TO BE RESTORED, BUT THIS IS ONLY THE BEGINNING OF OUR PARTNERSHIPS WITH SCHOOL DISTRICTS NATION-WIDE. GRANT RECIPIENT PRINCIPALS ARE PROVIDED WITH HANDS-ON GUIDANCE IN BUILDING AN INSTRUMENTAL MUSIC PROGRAM. THE FOUNDATION'S PROGRAM AND POLICY STAFF ASSISTS PRINCIPALS IN DEVELOPING THEIR MUSIC PROGRAM THROUGH WORKSHOPS, PERSONAL MEETINGS AND THE SAVE THE MUSIC FOUNDATION'S GUIDE TO BUILDING AN INSTRUMENTAL MUSIC PROGRAM. MUSIC EDUCATORS FROM GRANT RECIPIENT SCHOOLS HAVE THE OPPORTUNITY TO ATTEND PROFESSIONAL DEVELOPMENT WORKSHOPS THAT FOCUS ON GROWING THEIR SKILLS AND BUILDING THEIR MUSIC PROGRAMS. THERE HAVE BEEN CASES OF SAVE THE MUSIC FOUNDATION GRANT RECIPIENT COMMUNITIES WHERE SCHOOL PROGRAMS THAT HAD BEEN JUMPSTARTED BY THE FOUNDATION WERE THREATENED TO BE ELIMINATED. IN EACH CASE, A LETTER WAS SENT TO THE PRINCIPAL OF THE GRANTEE SCHOOL, SCHOOL BOARD MEMBERS AND SUPERINTENDENT FROM THE SCHOOL DISTRICT STATING CONCERN ABOUT THE PENDING ELIMINATION AND STATING THE ORIGINAL AGREEMENT TO MAINTAINING THE PROGRAM MADE BY THE SCHOOL DISTRICT AND MEETINGS WERE SET UP TO

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

CASES, THE PROGRAMS WERE NOT ELIMINATED.

Name of the organization
SAVE THE MUSIC FOUNDATION

Employer identification number 13-6089816

THE CONVERSATIONS THAT TAKE PLACE WHILE ADVOCATING IN LOCAL COMMUNITIES

PROVE MOST EFFECTIVE WHEN DECISION MAKERS, COMMUNITY MEMBERS,

STAKEHOLDERS, AND FUNDERS ARE ALREADY FAMILIAR WITH THE IMPORTANCE OF

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

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

SUCCESSFUL LOCAL ADVOCACY. BELOW ARE EXAMPLES FROM THE FISCAL YEAR

ENDED SEPTEMBER 30, 2019:

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.

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.

Schedule O (Form 990 or 990-EZ) (2018) Name of the organization **Employer identification number** SAVE THE MUSIC FOUNDATION 13-6089816 PROFESSIONAL DEVELOPMENT THE FOUNDATION AND THEIR MANUFACTURING PARTNERS PRESENT HALF-DAY PROFESSIONAL DEVELOPMENT WORKSHOPS FOR THE MUSIC TEACHERS IN ALL ACTIVE GRANTEE SCHOOL DISTRICTS. THE CLINICS ARE PLANNED AND TAILORED TO EACH SCHOOL'S DISTRICTS INDIVIDUAL NEEDS. HONORS THE FOUNDATION HONORS IN FRONT OF THOUSANDS OF SCHOOL DISTRICT LEADERS AND ADMINISTRATORS FROM AROUND THE COUNTRY THOSE SCHOOL DISTRICT OFFICIALS WHO HAVE BEEN SUPPORTIVE OF MUSIC EDUCATION AT AASA'S ANNUAL NATIONAL CONFERENCE. DIGITAL RESOURCES IN APRIL OF 2018, THE FOUNDATION LAUNCHED A NEWLY DESIGNED WEBSITE, WITH A NEW AND ENHANCED TAKE ACTION/ADVOCACY TOOLKIT. THESE ONLINE RESOURCES ARE SPECIFICALLY DESIGNED FOR COMMUNITY MEMBERS, PARENTS, TEACHERS, AND ADMINISTRATORS WHO NEED RESOURCES FOR LOCAL ARTS EDUCATION ADVOCACY EFFORTS. RESOURCES ARE ADDED REGULARLY. IN JUNE OF 2019, THE FOUNDATION ADDED A LISTING OF TEACHER RESOURCES WHICH INCLUDES LINKS TO CURRICULUM TOOLS, PROFESSIONAL DEVELOPMENT OPPORTUNITIES, AS WELL AS ORGANIZATIONS THAT PROVIDE FUND FORM 990, PART VI, SECTION A, LINE 2:

AMY DOYLE, CO-CHAIRPERSON, CHRIS MCCARTHY, CO-CHAIRPERSON, AND HENRY DONAHUE, EXECUTIVE DIRECTOR, HAVE A BUSINESS RELATIONSHIP.

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

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

Name of the organization

Employer identification number

SAVE THE MUSIC FOUNDATION 13-6089816

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 SEPTEMBER 30, 2019.

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

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

IS RESPONSIBLE FOR GOVERNANCE AND OVERSIGHT OF THE COMPENSATION AND

BENEFITS PROGRAMS FOR EXECUTIVE LEVEL STAFF (INCLUDING THE SENIOR DIRECTOR

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

THE SENIOR DIRECTOR OF DEVELOPMENT) AND ENSURING THAT THE COMPENSATION

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

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

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

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

Name of the organization **Employer identification number** SAVE THE MUSIC FOUNDATION 13-6089816 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. 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, NJ, 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 GOVERNING DOCUMENTS

| SAVE THE MUSIC FOUNDATION | 13-6089816 | | | | |
|--|------------------|--|--|--|--|
| CONFLICT OF INTERST POLICY, AND FINANCIAL STATEMENTS ARE A | AVAILABLE TO THE | | | | |
| PUBLIC BY REQUEST. | | | | | |
| | | | | | |
| FORM 990, PART VII, SECTION A: | | | | | |
| HENRY DONAHUE, EXECUTIVE DIRECTOR/VP PERFORMS THE FUNCTION | | | | | |
| ORGANIZATION'S TOP FINANCIAL OFFICER. | | | | | |
| FORM 990, PART VII, SECTION A, COLUMN A: | | | | | |
| UNRELATED THIRD PARTY VIACOM PAYS THE COMPENSATION OF HENF | RY DONAHUE, | | | | |
| EXECUTIVE DIRECTOR. THIS MEETS THE TAXABLE ORGANIZATION F | | | | | |
| 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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Form **8868**

(Rev. January 2019)

Department of the Treasury Internal Revenue Service

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

► File a separate application for each return.

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

OMB No. 1545-1709

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

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts

| must use | Form 7004 to request an extension of time to file incom | e tax retur | ns. | | | | | | |
|---|--|--|---------------------------------------|-----------------------------|------------------|---|--|--|--|
| | | | | Enter file | er's identifying | g number | | | |
| Type or print | | | | | | Employer identification number (EIN) or | | | |
| | SAVE THE MUSIC FOUNDATION | | 13-6089816 | | | | | | |
| File by the due date for filing your return. See | Number, street, and room or suite no. If a P.O. box, s 1515 BROADWAY, 20TH FLOOR | Social se | Social security number (SSN) | | | | | | |
| instructions. | City, town or post office, state, and ZIP code. For a following NEW YORK, NY 10036 | | | | | | | | |
| Enter the | Return Code for the return that this application is for (file | e a separa | te application for each return) | | | 01 | | | |
| Applicati | ion | Return | Application | Return | | | | | |
| Is For | | Code | Is For | Code | | | | | |
| Form 990 or Form 990-EZ | | | Form 990-T (corporation) | 07 | | | | | |
| Form 990 |)-BL | 02 | Form 1041-A | 80 | | | | | |
| Form 472 | 20 (individual) | 03 | Form 4720 (other than individual) | 09 | | | | | |
| Form 990 | | 04 | Form 5227 | 10 | | | | | |
| | 0-T (sec. 401(a) or 408(a) trust) | 05 | Form 6069 | 11 | | | | | |
| Form 990-T (trust other than above) 06 Form 8870 LYNN ALBALA | | | | | | 12 | | | |
| Teleph If the c If this box ▶ | cooks are in the care of ▶ 1515 BROADWAY none No. ▶ 212-846-7599 organization does not have an office or place of business is for a Group Return, enter the organization's four digit If it is for part of the group, check this box ▶ quest an automatic 6-month extension of time until | s in the Un Group Exe] and atta | Fax No. ited States, check this box | If this is fo f all memb | r the whole gr | oup, check this ion is for. | | | |
| > | corganization named above. The extension is for the organization named above. The extension is for the organization part of the corganization of the corgani | , ar | d ending <u>SEP 30, 2019</u> | Final retur | · n | | | | |
| | nis application is for Forms 990-BL, 990-PF, 990-T, 4720, | , or 6069, e | enter the tentative tax, less | | | 0 | | | |
| any nonrefundable credits. See instructions. | | | | 3a | \$ | 0. | | | |
| b If this application is for Forms 990-PF, 990-T, 4720, or 6069, | | | | 3b | <u> </u> | 0. | | | |
| | estimated tax payments made. Include any prior year overpayment allowed as a credit. Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by | | | | \$ | <u> </u> | | | |
| | ng EFTPS (Electronic Federal Tax Payment System). See | • | | 3с | \$ | 0. | | | |
| Caution: | If you are going to make an electronic funds withdrawal | (direct del | oit) with this Form 8868, see Form 8 | 453-EO an | d Form 8879-E | O for payment | | | |

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

Form 8868 (Rev. 1-2019)

instructions.