(Rev. January 2022)

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

Department of the Treasury Internal Revenue Service

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

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

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

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Туре о						n number (TIN)	
print	YOUTH MUSIC PROJECT	46-0923905					
File by the due date for filing your return. See 2015 EIGHTH AVENUE							
instructio		oreign add	lress, see instructions.				
Enter t	ne Return Code for the return that this application is for (fil	e a separa	te application for each return)				
Applica	ation	Return	Application			Return	
Is For		Code	Is For			Code	
Form 9	90 or Form 990-EZ	01	Form 1041-A			08	
Form 4	720 (individual)	03	Form 4720 (other than individual)			09	
Form 9	90-PF	04	Form 5227			10	
Form 9	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11	
Form 9	90-T (trust other than above)	06	Form 8870			12	
Form 9	90-T (corporation)	07					
 If th If th box 1 th th th th 	request an automatic 6-month extension of time until ne organization named above. The extension is for the org X calendar year 2021 or	Group Exe and atta NOVEI anization's	emption Number (GEN) I ich a list with the names and TINs of MBER 15, 2022 , to file s return for: d ending	f this is fo f all memb	r the whole o ers the exten npt organizat 	group, check this	
	^t this application is for Forms 990-PF, 990-T, 4720, or 6069 ny nonrefundable credits. See instructions.), enter the	e tentative tax, less	3a	\$	0	
-	this application is for Forms 990-PF, 990-T, 4720, or 6069), enter an	v refundable credits and		- -		
	stimated tax payments made. Include any prior year overp			3b	\$	0	
-	Balance due. Subtract line 3b from line 3a. Include your part						
	sing EFTPS (Electronic Federal Tax Payment System). See			3c	\$	0	
	n: If you are going to make an electronic funds withdrawal				nd Form 887	9-TE for payment	

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

Form 8868 (Rev. 1-2022)

COPY

Open to Public

Inspection

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)

► 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.

A For the 2021 calendar year, or tax year beginning and ending в Check if applicable: C Name of organization D Employer identification number Address change YOUTH MUSIC PROJECT]Name]change 46-0923905 Doing business as]Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number]Final]return/ 2015 EIGHTH AVENUE 503-616-5967 termin-ated 2,788,247. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amended 97068 WEST LINN, OR H(a) Is this a group return Applica-F Name and address of principal officer: TRAVIS MAGRANE Yes X No for subordinates? pending SAME AS C ABOVE H(b) Are all subordinates included? Yes I Tax-exempt status: X 501(c)(3) 501(c) () < (insert no.) 4947(a)(1) or 527 If "No," attach a list. See instructions J Website: ► WWW.YOUTHMUSICPROJECT.ORG H(c) Group exemption number K Form of organization: X Corporation Year of formation: 2012 M State of legal domicile: OR Trust Association Other ► Part I Summary Briefly describe the organization's mission or most significant activities: YOUTH MUSIC PROJECT PROVIDES 1 Activities & Governance MUSIC EDUCATION FOR YOUTH. if the organization discontinued its operations or disposed of more than 25% of its net assets. Check this box 🕨 2 9 3 Number of voting members of the governing body (Part VI, line 1a) 3 9 Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2021 (Part V, line 2a) 60 5 5 14 Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 0. 7a **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 7b 0. Prior Year **Current Year** Contributions and grants (Part VIII, line 1h) 1,373,868. 1,545,046. 8 Revenue 446,756. Program service revenue (Part VIII, line 2g) 530,896. 9 -2,874. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 25. 10 -14.06711 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) -25,313.1,803,683. 2,050,654. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3) 193,860. 201,950. 13 Benefits paid to or for members (Part IX, column (A), line 4) 0. 14 0. 1,010,930. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 1,111, 826. 15 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. Õ. 170,860. b Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 245,851. 305,739. 17 1,450,641. 1,619,515. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 353,042. 431,139. 19 Revenue less expenses. Subtract line 18 from line 12 P **Beginning of Current Year** End of Year Assets (Balanc 1,180,933. 20 Total assets (Part X, line 16) 1,663,643. 160,875. 212,446. 21 Total liabilities (Part X, line 26) Vet 1,020,058. 22 Net assets or fund balances. Subtract line 21 from line 20 451,197. Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer TRAVIS MAGRANE, EXECUTIVE DIRECTOR Type or print name and title	Date
Paid	Print/Type preparer's name Preparer's signature Date YEE LEE MCGEE 08/0	8/22 Check PTIN if self-employed P01294356
Preparer	Firm's name GARY MCGEE & CO. LLP	Firm's EIN 🕨
Use Only	Firm's address 🖕 1000 S.W. BROADWAY, SUITE 1200	
	PORTLAND, OR 97205	Phone no. (503) 222-2515
May the IF	RS discuss this return with the preparer shown above? See instructions	Yes No
132001 12-0	19-21 LHA For Paperwork Reduction Act Notice, see the separate instructions.	Form 990 (2021)

Form	990 (2021) YOUTH MUSIC PROJECT 46-092	3905	Page 2
Par	t III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III	<u></u>	X
1	Briefly describe the organization's mission: TO PROVIDE OUTSTANDING ROCK, POP, AND COUNTRY MUSIC EDUCATION	FOR	
	YOUTH BY OFFERING TUITION ASSISTANCE, INSTRUMENT RENTALS, AND		
	EXCEPTIONAL, STATE-OF-THE-ART PERFORMANCE OPPORTUNITIES.		
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	Yes	XNo
	If "Yes," describe these new services on Schedule O.		V
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O.		X No
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total organizations are required to report the amount of grants and allocations to others, the total of the section of the se	expenses,	and
42	revenue, if any, for each program service reported. (Code:) (Expenses \$ 1,326,104 · including grants of \$ 201,950 ·) (Revenue \$	531.	042.)
на	YOUTH MUSIC PROJECT OFFERS YEAR-ROUND INDIVIDUAL AND GROUP MUS		<u>• • • • •</u>)
	INSTRUCTION TO CHILDREN AGED 5-18 IN PIANO, GUITAR, DRUMS, BAS		
	UKULELE, VIOLIN, VOICE AND ROCK BAND, EARLY CHILDHOOD MUSIC CI		то
	CHILDREN AGED 1-5, SUMMER CAMPS, PAID INTERNSHIPS FOR HIGH SCH	IOOL	
	JUNIORS AND SENIORS, AND EXCEPTIONAL PERFORMANCE OPPORTUNITIES	IN T	HE
	COMMUNITY AND AT OUR FACILITY IN WEST LINN, OR. WE BELIEVE ALL	CHIL	DREN
	DESERVE THE POWER OF MUSIC IN THEIR LIVES REGARDLESS OF THEIR	FAMIL	Y'S
	ABILITY TO PAY AND OFFER 100% TUITION ASSISTANCE FOR ANY CHILI	AGED	
	1-18 WHO QUALIFIES FOR THE FREE & REDUCED LUNCH PROGRAM AS DET	ERMIN	ED
	BY FEDERAL POVERTY GUIDELINES.		
	CONTINUED ON SCHEDULE 0		
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$))
4c	(Code:) (Expenses \$including grants of \$) (Revenue \$)
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses > 1,326,104.		
		Form 9	90 (2021)
132002	SEE SCHEDULE O FOR CONTINUATION(S)		

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
-	public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		x
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
_	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			x
-	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		x
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	1		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
а	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? <i>If</i> "Yes," <i>complete Schedule D, Part VII</i>	11b		x
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part IX</i>	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	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		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		x
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If</i> "Yes," <i>complete Schedule F, Parts II and IV</i>	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		
10	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	.0	1	<u> </u>
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	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		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X

132003 12-09-21

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 Form 990 (2021)
 YOUTH
 MUSIC
 PROJECT

 Part IV
 Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			37
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			v
~-	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	07		x
00	entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
а		28a		x
h	"Yes," complete Schedule L, Part IV A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	20a		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?/f	200		
Ũ	"Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	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			
	Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			<u>-</u> -
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
De	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pa				
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a			
b		-		
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
	(gamoing) withing to prize without:			

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Form 990 (2	2021)	YOUTH	MUSIC	PROJECT	
Part V	Statements	Regarding	Other IR	S Filings and	Tax Compliance (continued)

			Yes	No
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		165	
za	filed for the calendar year ending with or within the year covered by this return 2a 60			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
D	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> . See instructions.	20		
32		3a		x
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	55		
та	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		x
h	If "Yes," enter the name of the foreign country	та		
D	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
52	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		x
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a 5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	50 5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
ou	any contributions that were not tax deductible as charitable contributions?	6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
		6b		
7	Organizations that may receive deductible contributions under section 170(c).	0.5		
'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	х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
-	to file Form 8282?	7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	N/	A
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	N/	A
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year? N/A	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	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? N/A	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a	4		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	-		
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders N/A			
a		-		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
10-	amounts due or received from them.) [11b] Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	100		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12a		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	-		
	Is the organization licensed to issue qualified health plans in more than one state? N/A	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
с	Enter the amount of reserves on hand	1		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any			
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? N/A	17		
	If "Yes," complete Form 6069.			

Form	990	(2021)
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YOUTH MUSIC PROJECT

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2	Х	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Х	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
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		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		Х
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		37	
а	The governing body?	8a	Х	37
-	Each committee with authority to act on behalf of the governing body?	8b		Х
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			v
<u></u>	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
10-	Did the eventiation have lead charters by a filiate 0	10-	Yes	No X
	Did the organization have local chapters, branches, or affiliates?	10a		
a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
110	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	Па		
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a	X	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	12.0		
Ŭ	on Schedule O how this was done	12c	х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
	Other officers or key employees of the organization	15b		Х
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed $\blacktriangleright OR$			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) availa	able
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, a	nd fina	ncial	
_	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	SEAN JONES - 503-616-5967 2015 EIGHTH AVENUE, WEST LINN, OR 97068			

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.

Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See the instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

т

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)	(C)					(D)	(E)	(F)	
Name and title	Average	(do	not c	Pos heck		l than	one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	erson	is bot	h an	compensation	compensation	amount of
	week		cer an			n/trus	lee)	from	from related	other
	(list any	ndividual trustee or director						the	organizations	compensation
	hours for related	e or d	tee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	from the organization
	organizations	rustee	l trus		ee	npen		1099-NEC)	1039-1120)	and related
	below	d ual t	utiona	L_	mploy	ist col	5	1000 1120)		organizations
	line)	ndivi	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			5
(1) TRAVIS MAGRANE	40.00			_						
EXECUTIVE DIRECTOR		1		X				90,245.	0.	16,315.
(2) MARK SCHLESINGER	3.00									
PRESIDENT		X		X				0.	0.	0.
(3) SARAH BANY	1.00									
VICE-PRESIDENT		X		Х				0.	0.	0.
(4) RICHARD GONZALES	1.00									
TREASURER		X		Х				0.	0.	0.
(5) MARY JAEGER	5.00									
SECRETARY		Х		Х				0.	0.	0.
(6) AMY FAUST	1.00									
DIRECTOR		Х						0.	0.	0.
(7) VERONICA MURRAY	1.00									_
DIRECTOR		X						0.	0.	0.
(8) MICHAEL PITTMAN	1.00									
DIRECTOR		X						0.	0.	0.
(9) RACHAEL SNEDDON	1.00									•
DIRECTOR	1 00	X						0.	0.	0.
(10) JASON WAXBERG	1.00								0	0
DIRECTOR		X						0.	0.	0.
				-		-				
		1								
										– – – – – – – – – –

	1 990 (2021) YOUTH MUS	SIC PROJ	ΓEC	т						46-09	9239	905	Pa	age 8
Pa	t VII Section A. Officers, Directors, Trus		oloy	ees,			ghes	st C	Compensated Employe	es (continued)				
	(A) Name and title	(B) Average hours per week	rage Position (do not check more than one box, unless person is both an				than d is both	n an	(D) Reportable compensation from	(E) Reportable compensatio from related	le Estim ion amou		(F) timate ount other	
		(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organization: (W-2/1099-MIS 1099-NEC)	SC/	fro orga and	oensa om the anizati d relate nizatie	e ion ed
	Subtotal							•	90,245.		0.	1	5,3	15.
с	Total from continuation sheets to Part VI	I, Section A					J		0.		0.		5,3	0.
d	Total (add lines 1b and 1c) Total number of individuals (including but n								90,245.	000 of reportab	-	T	0,3	13.
_	compensation from the organization						.,			,eee en openaa				0
											r		Yes	No
3	Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s							Ŭ	phest compensated emp	•		3		х
4	For any individual listed on line 1a, is the su	im of reportabl	e co	mpe	ensa	ation	n and	l otl	her compensation from	the organization				77
5	and related organizations greater than \$150 Did any person listed on line 1a receive or a											4		Х
_	rendered to the organization? If "Yes," com	-				-			-			5		Х
	tion B. Independent Contractors			<u> </u>						<u></u>				
1	Complete this table for your five highest co the organization. Report compensation for								n the organization's tax		ipensa			
	(A) Name and business	address	NC	ONE	2			_	(B) Description of s	ervices	(C) Compensation			n
								_						
								_						
2	Total number of independent contractors (in \$100,000 of compensation from the organized structure of the transmission from the organized structure of the transmission from the organized structure of the transmission of transmission of the transmission of the transmission of the transmission of transmission of the transmission of transmission of the transmission of	•	ot lir	nite	d to	tho: (stec	above) who received n	nore than				

			Somaline	arespons	c of note to any	<u>r line in this Part VIII</u>	(B)	(C)	L
						Total revenue	Related or exempt		Revenue exclue from tax unde sections 512 -
	1 a	Federated campaigns		1a					
	с	Fundraising events		. 1c	91,420	<u>)</u>			
		Related organizations							
		Government grants (conti			251,595	5.			
	f	All other contributions, gifts,	grants, a	nd					
		similar amounts not included	l above	1f 1	,202,031	. •			
	g	Noncash contributions included in	n lines 1a-1	f 1g \$	716,490).			
	h	Total. Add lines 1a-1f				1,545,046.			
					Business Coo	le			
	2 a	TUITION			611600	521,322.	521,322.		
	b	COMMUNITY EVE	ENTS		611600				
	с	INSTRUMENT RE			611600				
	d					,			
	e								
	-	All other program service	revenue	•		1			
		Total. Add lines 2a-2f				530,896.			
	3	Investment income (inclue							
	-	other similar amounts)	•	-		52.			5
	4	Income from investment of				•			
	5	Royalties				•			
	•			(i) Real	(ii) Persona				
	6 a	Gross rents	6a	()		-			
		Less: rental expenses	6b			-			
		Rental income or (loss)	6c			-			
		Net rental income or (loss)				•			
		Gross amount from sales of) Securities	(ii) Other				
	<i>i</i> a	assets other than inventory		94,937		-			
	h	Less: cost or other basis	1405			-			
	D		766	94,964					
	~			-27	•	-			
	ں م	Gain or (loss) Net gain or (loss)	10			-27.			-2
		Gross income from fundraisi			····· •				
	0 a	including \$ 91							
				_					
		contributions reported on	-		a 17,170				
	h	Part IV, line 18				•			
				·····		-25,459.			-25,45
		Net income or (loss) from		° –	P	23,333			23,33
	J a	Gross income from gamin							
	ь.	Part IV, line 19				-			
		Less: direct expenses			<u> </u>				
		Net income or (loss) from			P				
1	υa	Gross sales of inventory,			a 146				
		and allowances).			
		Less: cost of goods sold				146.	146.		
╋	С	Net income or (loss) from	sales of	inventory			140.		
					Business Coo				
1	1 a								
	b								
2	C								
		All other revenue Total. Add lines 11a-11d							
						S 1			

Form 990 (2021) Part VIII

t VIII	State	ement of Reven	ue	
990 (20	21)	YOUTH	MUSIC	PROJECT

YOUTH MUSIC PROJECT

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 respon				
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations				
and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic	201 050			
individuals. See Part IV, line 22	201,950.	201,950.		
3 Grants and other assistance to foreign				
organizations, foreign governments, and foreign				
individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors,	113,835.	45,534.	45,534.	22,767
trustees, and key employees6 Compensation not included above to disqualified	115,055.	45,554.		22,707
persons (as defined under section 4958(f)(1)) and				
(0 - 0)				
7 Other salaries and wages	857,585.	714,551.	33,464.	109,570
 8 Pension plan accruals and contributions (include 		,		_0,0,0
section 401(k) and 403(b) employer contributions)	15,883.	14,305.	836.	742
9 Other employee benefits	33,946.	25,820.	187.	7,939
10 Payroll taxes	90,577.	74,632.	4,380.	11,565
11 Fees for services (nonemployees):	/ -	,	,	,
a Management				
b Legal	3,750.		3,750.	
c Accounting	16,562.		16,562.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25,				
column (A), amount, list line 11g expenses on Sch 0.)	39,415.	28,814.	10,196.	405
12 Advertising and promotion	17,884.	10,902.		6,982
13 Office expenses	16,620.	14,036.	1,229.	1,355
14 Information technology	24,192.	23,379.	484.	329
15 Royalties				
16 Occupancy	16,555.	15,999.	331.	225
17 Travel	317.		317.	
18 Payments of travel or entertainment expenses				
for any federal, state, or local public officials \dots				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates		<u> </u>		
22 Depreciation, depletion, and amortization	71,753.	69,342.	1,435.	976
23 Insurance	18,787.	18,156.	376.	255
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
a PROGRAM SUPPLIES	39,599.	38,135.		1,464
b OTHER EXPENSES	27,210.	17,869.	3,223.	6,118
c REPAIRS AND MAINTENANCE	13,095.	12,680.	247.	168
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	1,619,515.	1,326,104.	122,551.	170,860
26 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 Figure if following SOP 98-2 (ASC 958-720)				Form 990 (2021

28

29

30 31

32

33

Balance Sheet Part X Check if Schedule O contains a response or note to any line in this Part X ... (A) (B) Beginning of year End of year 91,805. 86,021. Cash - non-interest-bearing 1 1 526,187. 921,161. 2 2 Savings and temporary cash investments 41,000. 146,534. 3 3 Pledges and grants receivable, net 1,400. 4 4 Accounts receivable, net Loans and other receivables from any current or former officer, director, 5 trustee, key employee, creator or founder, substantial contributor, or 35% 5 controlled entity or family member of any of these persons 6 Loans and other receivables from other disgualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 Notes and loans receivable, net 7 Assets 7 82. 82. 8 Inventories for sale or use 8 23,599. Prepaid expenses and deferred charges 20,195. 9 9 **10a** Land, buildings, and equipment: cost or other 1,047,474. basis. Complete Part VI of Schedule D _____ 10a 568,412. 507,448. 479,062. b Less: accumulated depreciation _____ 10b 10c Investments - publicly traded securities 11 11 Investments - other securities. See Part IV, line 11 12 12 13 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 14 Other assets. See Part IV, line 11 15 15 1,180,933. 1,663,643. 16 16 Total assets. Add lines 1 through 15 (must equal line 33) 79,005. 90,475. 17 Accounts payable and accrued expenses 17 18 Grants payable 18 81,870. 19 121,971. 19 Deferred revenue Tax-exempt bond liabilities 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to any current or former officer, director, _iabilities trustee, key employee, creator or founder, substantial contributor, or 35% 22 controlled entity or family member of any of these persons 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, pavables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 25 of Schedule D 160,875. 212,446. 26 26 Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here 🕨 Net Assets or Fund Balances and complete lines 27, 28, 32, and 33. 872,510. 1,108,301. Net assets without donor restrictions 27 27

Net assets with donor restrictions

and complete lines 29 through 33.

Total liabilities and net assets/fund balances ...

Organizations that do not follow FASB ASC 958, check here 🕨 🗎

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building, or equipment fund

Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

1,180,933. 1,663,643. 33 Form 990 (2021)

342,896.

1,451,197.

147,548.

1,020,058.

28

29

30

31

32

(2021)	YC

Form 990

Form	n 990 (2021) YOUTH MUSIC PROJECT	46-	0923905	Pa	ige 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,05		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,61		
3	Revenue less expenses. Subtract line 2 from line 1	3			.39.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,02	0,0	58.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	1,45	1,1	.97.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedu	e 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 reviewe	d on a			
	separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	te basis	,		
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	ne audit			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sc	hedule	Э.		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S	ngle Au	dit		
	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 requ	ired au	dit		
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2021)

Department of the Treasury

Internal Revenue Service

(Form 990)

8 9

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047
2021
Open to Public

Employer identification number

46-0923905

Name of t	the organization	E					
	YOUTH MUSIC PROJECT						
Part I	Reason for Public Charity Status. (All organizations must complete this part.) See instruction	ns.					
The organ	The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)						
1	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).						
2	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)						
3	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).						

A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:

5	An organization	n operated for the benefit of a college or university owned or operated by a governmental unit described in
)(1)(A)(iv). (Complete Part II.)

- 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 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
	university:

οl	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.)

- 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a L 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.
 - **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.**
 - c L 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.
 - d Li 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.
 - e 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

g Provide the following information about the supported organization(s).						
(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	inization listed	(v) Amount of monetary	(vi) Amount of other
organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see instructions)	support (see instructions)
		above (see instructions))				
Total						

Schedule A (Form 990) 2021

YOUTH MUSIC PROJECT

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

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

Sec	Section A. Public Support								
Caler	dar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total		
1	Gifts, grants, contributions, and								
	membership fees received. (Do not								
	include any "unusual grants.")	839,930.	991,141.	1,161,719.	1,373,868.	1,545,046.	5,911,704.		
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	839,930.	991,141.	1,161,719.	1,373,868.	1,545,046.	5,911,704.		
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)						3,539,651.		
6	Public support. Subtract line 5 from line 4.						2,372,053.		
Sec	tion B. Total Support								
Caler	dar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018 991,141.	(c) 2019	(d) 2020	(e) 2021	(f) Total		
7	Amounts from line 4	839,930.	991,141.	1,161,719.	1,373,868.	1,545,046.	5,911,704.		
8	Gross income from interest,								
	dividends, payments received on								
	securities loans, rents, royalties,								
	and income from similar sources \dots	112.	40.	23.	55.	52.	282.		
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.)	1,339.	1,625.	-3,775.			-811.		
11	Total support. Add lines 7 through 10						5,911,175.		
12	Gross receipts from related activities,	etc. (see instruction	ons)			12 3	,328,548.		
13	First 5 years. If the Form 990 is for th	ne organization's fi	rst, second, third, t	fourth, or fifth tax y	/ear as a section 5	501(c)(3)			
	organization, check this box and stor						▶∟		
Sec	tion C. Computation of Publ	ic Support Pe	rcentage				40.40		
	Public support percentage for 2021 (•			14	40.13 %		
	Public support percentage from 2020					15	32.09 %		
	6a 33 1/3% support test - 2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and								
	stop here. The organization qualifies								
	b 33 1/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box								
	and stop here. The organization qual								
17a	10% -facts-and-circumstances tes	t - 2021. If the org	anization did not c	heck a box on line	13, 16a, or 16b, a	and line 14 is 10%	or more,		
	and if the organization meets the fact	s-and-circumstanc	es test, check this	box and stop her	e. Explain in Part	VI how the organiz	ation		
	meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization								
	b 10% -facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or								
	10% -facts-and-circumstances tes	t - 2020. If the org	anization did not c	neck a box on line	13, 10a, 10b, 0r				
b	10% -facts-and-circumstances tes more, and if the organization meets th						10% OI		
b		ne facts-and-circun umstances test. Th	nstances test, che ne organization qu	ck this box and sto alifies as a publicly	op here. Explain ir supported organ	n Part VI how the ization			

Schedule A (Form 990) 2021

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.)

	tion A. Public Support						
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	tion B. Total Support			•	•		
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
11	Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regulated corriging on						
	regularly carried on Other income. Do not include gain or loss from the sale of capital exects (Exploin in Dart U)						
13	assets (Explain in Part VI.)						
	First 5 years. If the Form 990 is for th	e organization's f	first, second. third.	fourth, or fifth tax	vyear as a section	501(c)(3) oraaniz	ation,
	ale and the last and all all and the second	•			·····		
Sec	tion C. Computation of Publ						
15	Public support percentage for 2021 (I	ine 8, column (f),	divided by line 13,	column (f))		15	%
	Public support percentage from 2020					16	%
	tion D. Computation of Inves						
	Investment income percentage for 20)	17	%
	Investment income percentage from 2					18	%
	33 1/3% support tests - 2021. If the						
	more than 33 1/3%, check this box a						
	33 1/3% support tests - 2020. If the						6. and
	line 18 is not more than 33 1/3%, che						
	Private foundation. If the organizatio						
	3 01-04-22			, c, oncont			e A (Form 990) 2021

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YOUTH MUSIC PROJECT

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If* "Yes," *answer lines 3b and 3c below.*
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If* "Yes," *describe in* **Part VI** *when and how the organization made the determination.*
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," *and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.*
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If* "Yes," *describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If* "Yes," *complete Part I of Schedule L (Form 990).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If* "Yes," *provide detail in* **Part VI.**
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- **c** Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If* "*Yes*," *provide detail in* **Part VI**.
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer line 10b below.*
- **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

Schedule A	(Form 990) 2021	YOUTH	MUSIC	PROJECT
Part IV	Supporting Organi	zations (cc	ntinued)	

1

2

1.4

...

			Yes	No		
11	Has the organization accepted a gift or contribution from any of the following persons?					
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and					
	11c below, the governing body of a supported organization?	11a				
b	A family member of a person described on line 11a above?	11b				
с	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide					
	detail in Part VI.	11c				
Section B. Type I Supporting Organizations						
			Yes	No		

1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or					
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,					
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)					
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported					
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the					
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.					
2	Did the organization operate for the benefit of any supported organization other than the supported					

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(s) that operated, supervised, or controlled the supporting organization.

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		

Section D. All	Type III Supporting	Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		

Section 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 duri	ing the vealsee instructions).

- a The organization satisfied the Activities Test. Complete line 2 below.
- **b** The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*
- c The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).
- 2 Activities Test. Answer lines 2a and 2b below.
- a 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.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- **3** Parent of Supported Organizations. **Answer lines 3a and 3b below.**
- **a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "*No*" provide details in **Part VI.**
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If* "Yes," *describe in* **Part VI** *the role played by the organization in this regard.*

Yes No

Part	V	Type III Non-Functionally
1		Check here if the organization sat

Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Supporting Organizations

YOUTH MUSIC PROJECT

Section 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 instruction	ons) 6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors			
(explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater a	amount,		
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 0.035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1		
2 Enter 0.85 of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, column	A) 3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a no	n-functionally integrate	ed Type III supporting or	anization (see

instructions).

Schedule A (Form 990) 2021

Schedule A (Form 990) 2021

	(Form 990) 202			PROJECT	
Part V	Type III No	on-Functionally Inte	egrated 5	09(a)(3) Supporting Or	ganizations (continued)

Sect	ion D - Distributions		1		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes			1	
2	2 Amounts paid to perform activity that directly furthers exempt purposes of supported				
	organizations, in excess of income from activity 2			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizatior	IS	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	he organization is responsive	e		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2021 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2021	IS	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2021 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2021				
a	From 2016				
b	From 2017				
C	From 2018				
d	From 2019				
e	From 2020				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2021 distributable amount				
i	Carryover from 2016 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2021 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2021 distributable amount				
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2021, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2021. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2022. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
-	Excess from 2017				
-	Excess from 2018				
	Excess from 2019				
	Excess from 2020				
е	Excess from 2021				

Schedule A (Form 990) 2021

YOUTH MUSIC PROJECT

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

MISCELLANEOUS INCOME
2017 AMOUNT: \$ 1,339.
2018 AMOUNT: \$ 1,625.
2019 AMOUNT: \$ -3,775.

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Organization type (check one):

** PUBLIC DISCLOSURE COPY **

Schedule of Contributors

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

OMB No. 1545-0047

2021

Employer identification number

46-0923905

|--|

Filers of:	Section:
Form 990 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 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. **Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one 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.

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

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

	MUSIC PROJECT	4
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
1		\$695,464
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions
2		\$244,827
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions
3		\$100,000
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions
4		

Name of organization

Employer identification number

46-0923905

Person Payroll

Noncash (Complete Part II for noncash contributions.)

(d)

Type of contribution

(d)

X

X

Type of contribution X Person Payroll 827. Noncash (Complete Part II for noncash contributions.) (d) Type of contribution ons X Person Payroll 000. Noncash (Complete Part II for noncash contributions.) (d) Type of contribution ons X Person Payroll 75,000. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 5 X Person Payroll 59,758. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash \$ (Complete Part II for noncash contributions.)

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Schedule B (Form 990) (2021)

Schedule B (Form 990) (2021)

Schedule B	(Form 990)) (2021)

Name of organization

YOUTH MUSIC PROJECT

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

art II	Noncash Property (see instructions). Use duplicate copies of P	art in in additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	PUBLICLY TRADED SECURITIES		
		<u> </u>	09/10/21
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

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46-0923905

Employer identification number

Schedule E	3 (Form 990) (2021)			Page 4				
Name of or	rganization			Employer identification number				
холтн	MUSIC PROJECT			46-0923905				
Part III	Exclusively religious, charitable, etc., contribut from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious,	through (e) and the following line en charitable, etc., contributions of \$1,000 or	try For organizations	that total more than \$1,000 for the year				
(a) No.	Use duplicate copies of Part III if additional							
`from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held				
		(e) Transfer of gif	t					
	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	nsferor to transferee				
Ī	· · ·		•					
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held				
Part I		(0) 000 01 gitt	(4) 2000					
ŀ		(e) Transfer of gif	+					
			·					
Ļ	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	nsferor to transferee				
(a) No.								
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held				
ľ		(e) Transfer of gif	t					
	Transferee's name, address, a		Relationship of transferor to transferee					
F								
(a) No. from				wintion of how oith in hold				
Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held				
-			-					
	(e) Transfer of gift							
	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	nsferor to transferee				
Γ								

Department of the Treasury Internal Revenue Service

(Form	990)
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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.



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		<i>~</i>	~ ~	22	0		

Nam	of the organization YOUTH MUSIC PROJEC	т	Employer identification number 46-0923905
Pa			
	organization answered "Yes" on Form 990, Part IV, lin		
		(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		nds
	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 of	or donor advisor, or for any other purpose confe	erring
	impermissible private benefit?	·····	Yes No
Pa			
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply).	
	Preservation of land for public use (for example, recrea	ation or education) 🔲 Preservation of a hist	orically 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 quali	fied conservation contribution in the form of a c	onservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
с	Number of conservation easements on a certified historic str		2c
d	Number of conservation easements included in (c) acquired		
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re		nization during the tax
	year ►		
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements i	it holds?	Yes 🗌 No
6	Staff and volunteer hours devoted to monitoring, inspecting,	, handling of violations, and enforcing conservat	tion easements during the year
	▶		
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservation e	asements during the year
	►\$		
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes 🛛 No
9	In Part XIII, describe how the organization reports conservation	ion easements in its revenue and expense state	ement and
	balance sheet, and include, if applicable, the text of the foot	note to the organization's financial statements t	hat describes the
	organization's accounting for conservation easements.		
Pa	t III Organizations Maintaining Collections o		Similar Assets.
	Complete if the organization answered "Yes" on Form		
1a	If the organization elected, as permitted under FASB ASC 95	58, not to report in its revenue statement and ba	alance sheet works
	of art, historical treasures, or other similar assets held for pul	blic exhibition, education, or research in further	ance of public
	service, provide in Part XIII the text of the footnote to its final	ncial statements that describes these items.	
b	If the organization elected, as permitted under FASB ASC 95	58, to report in its revenue statement and balan	ce sheet works of
	art, historical treasures, or other similar assets held for public	c exhibition, education, or research in furtherand	ce of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		▶ \$
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financial gain	, provide
	the following amounts required to be reported under FASB A	ASC 958 relating to these items:	

b Assets included in Form 990, Part X LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 132051 10-28-21

a Revenue included on Form 990, Part VIII, line 1

\$ ►

\$ ►

Schedule D (Form 990) 2021

Sche	dule D (Form 990) 2021 YOUTH M	USIC PROJE	СТ				4	46-09	23905	D Page 2
Pa	t III Organizations Maintaining C	Collections of A	rt, Hist	orical Tre	easures, o	or Othe				
3	Using the organization's acquisition, access	ion, and other record	ds, check	any of the	following tha	at make s	ignificant	use of its		
	collection items (check all that apply):									
а	Public exhibition	c			nange progra					
b	Scholarly research	e	• 🗆 (Other						
С	Preservation for future generations									
4	Provide a description of the organization's c							se in Par	t XIII.	
5	During the year, did the organization solicit of		,		,				-	
	to be sold to raise funds rather than to be m								Yes	No No
Pai	t IV Escrow and Custodial Arran	-	ete if the	organizatio	n answered	"Yes" on	Form 990	, Part IV,	line 9, or	
	reported an amount on Form 990, Pa									
1a	Is the organization an agent, trustee, custod		•						٦.,	—
_	on Form 990, Part X?							L	Yes	└── No
b	If "Yes," explain the arrangement in Part XIII	and complete the to	bliowing t	able:					Amount	
									Amount	
	Beginning balance									
	Additions during the year									
-	Distributions during the year									
f	Ending balance Did the organization include an amount on F								Yes	No
	If "Yes," explain the arrangement in Part XIII									
	t V Endowment Funds. Complete									
		(a) Current year	1	rior year	(c) Two yea			ears back	(e) Four	years back
1a	Beginning of year balance			,			., .		. ,	<u> </u>
b	Contributions									
	Net investment earnings, gains, and losses									
	Grants or scholarships									
	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
	End of year balance									
2	Provide the estimated percentage of the cur		ce (line 1	g, column (a)) held as:					
а	Board designated or quasi-endowment 🕨		%							
b	Permanent endowment	_%								
с	Term endowment	%								
	The percentages on lines 2a, 2b, and 2c sho	ould equal 100%.								
3a	Are there endowment funds not in the posse	ession of the organiz	ation tha	t are held a	nd administe	ered for th	ne organiz	ation	-	
	by:									Yes No
	(i) Unrelated organizations								3a(i)	
	(ii) Related organizations								3a(ii)	
b	If "Yes" on line 3a(ii), are the related organization								3b	
4	Describe in Part XIII the intended uses of the		owment f	unds.						
Pai	t VI Land, Buildings, and Equipm									
	Complete if the organization answere		· ·							
	Description of property	(a) Cost or c		(b) Cost		• •	cumulate	d	(d) Book	value
		basis (investi	ment)	basis (other)	dep	preciation			
	Land									
	Buildings				6 1 1 0		44,80		101	200
	Leasehold improvements				6,140. 1,334.	6	<u>44,00</u> 523,55			L,280. 7,782.
	Equipment			01	-,JJ 4 •		123,3		20	,104.
	Other		V oolu	n (D) line 1	00)				170	9,062.
rota	I. Add lines 1a through 1e. (Column (d) must e	-yuarı onn 990, Part	. ^, coiuff	ייי, וווופ ד,						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

Schedule D (Form 990) 2021

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or e	end-of-year market value
) Financial derivatives			
Closely held equity interests			
) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
tal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990 Part IV line	11c See Form 990 Part X line 13	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or e	and of year market value
			and or your market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(9) iotal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
• •			
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)	on Form 990, Part IV, line	e 11d. See Form 990, Part X, line 15.	
otal. (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 Description	e 11d. See Form 990, Part X, line 15.	(b) Book value
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes"		e 11d. See Form 990, Part X, line 15.	(b) Book value
Otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" (a)		e 11d. See Form 990, Part X, line 15.	(b) Book value
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Datal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4)		e 11d. See Form 990, Part X, line 15.	(b) Book value
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4) (5)		e 11d. See Form 990, Part X, line 15.	(b) Book value
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otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4) (5) (6) (7)		e 11d. See Form 990, Part X, line 15.	(b) Book value
Datal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4) (5) (6) (7) (8)		e 11d. See Form 990, Part X, line 15.	(b) Book value
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4) (5) (6) (7) (8) (9)	Description	e 11d. See Form 990, Part X, line 15.	(b) Book value
tal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4) (5) (6) (7) (8) (9) otal. (Column (b) must equal Form 990, Part X, col. (B) lin	Description	e 11d. See Form 990, Part X, line 15.	(b) Book value
Otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4) (5) (6) (7) (8) (9) otal. (Column (b) must equal Form 990, Part X, col. (B) line	Description		
Art IX Other Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4) (5) (6) (7) (8) (9) Other Liabilities. Complete if the organization answered "Yes"	Description		25.
Art IX Other Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4) (5) (6) (7) (8) (9) Other Liabilities. Complete if the organization answered "Yes"	Description		
Atal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4) (5) (6) (7) (8) (9) Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability (1)	Description		25.
Art IX Other Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4) (5) (6) (7) (8) (9) Other Liabilities. Complete if the organization answered "Yes"	Description		25.
Ottal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4) (5) (6) (7) (8) (9) Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability (1)	Description		25.
Other Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4) (5) (6) (7) (8) (9) Other Liabilities. Complete if the organization answered "Yes"	Description		25.
Other Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4) (5) (6) (7) (8) (9) Other Liabilities. Complete if the organization answered "Yes" (3) (4) (5) (6) (7) (8) (9) Other Liabilities. Complete if the organization answered "Yes" (1) (2) (3)	Description		25.
Other Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4) (5) (6) (7) (8) (9) Other Liabilities. Complete if the organization answered "Yes" (1) (2) (3) (4) (5) (6) (7) (8) (9) Other Liabilities. Complete if the organization answered "Yes" (1) Federal income taxes (2) (3) (4)	Description		25.
tal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4) (5) (6) (7) (8) (9) otal. (Column (b) must equal Form 990, Part X, col. (B) lin Part X Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability (1) Federal income taxes (2) (3) (4) (5)	Description		25.
tal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4) (5) (6) (7) (8) (9) otal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7)	Description		25.
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4) (5) (6) (7) (8) (9) otal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8)	Description		25.
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" (a) (1) (2) (3) (4) (5) (6) (7) (8) (9) otal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" (1) (2) (3) (4) (5) (6) (7) (8) (9) otal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. Complete if the organization answered "Yes" (1) Federal income taxes (2) (3) (4) (5) (6) (7)	Description		25.

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

Schedule D (Form 990) 2021

Sche	edule D (Form 990) 2021 YOUTH MUSIC PROJECT		46-0923905 Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Statem	ents With Rev	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	a.	
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments	. 2a	
b	Donated services and use of facilities	2b	
с	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a	
b	Other (Describe in Part XIII.)	. 4b	
с	Add lines 4a and 4b		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		
Pa	rt XII Reconciliation of Expenses per Audited Financial Staten	•	enses per Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a		
1	Total expenses and losses per audited financial statements		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments	. 2 b	
С	Other losses	2c	
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d		
3	Subtract line 2e from line 1		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4 a	
b	Other (Describe in Part XIII.)	. 4b	
С	Add lines 4a and 4b		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		
Pa	rt XIII Supplemental Information.		

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

SCHEDULE G	Suppleme	ntal Information Regarding	g Fun	drais	ing or Gaming	Activ	vities	OMB No. 1545-0047
(Form 990)		e organization answered "Yes" or rganization entered more than \$				or 19,	or if the	2021
Department of the Treasury		Attach to Form 99	0 or Fo	rm 99	0-EZ.			Open to Public
Internal Revenue Service Name of the organization		to www.irs.gov/Form990 for inst	ruction	is and	the latest informat	ion.	Employer i	Inspection dentification number
Hame of the organization		USIC PROJECT					46-092	
	complete this par	Complete if the organization answ	vered "Y	'es" o	n Form 990, Part IV,	line 1	7. Form 990	-EZ filers are not
 Indicate whether the a Mail solicitate Mail solicitate Internet and Phone solicitate In-person social In-person social Indicate the organization key employees list 	e organization rais ions email solicitations tations licitations on have a written c red in Form 990, P	ed funds through any of the follow e Solicita f Solicita g Specia or oral agreement with any individua art VII) or entity in connection with	ation of ation of Il fundra al (inclue profess	non-g gover aising ding o ional 1	overnment grants nment grants events fficers, directors, trus fundraising services?	stees	Y	/es 🗌 No
compensated at le	•	viduals or entities (fundraisers) purs organization.		agree	ements under which	ine iu	inuraiser is t	obe
(i) Name and addres or entity (fund		(ii) Activity	fundi have c or cor	Did raiser ustody itrol of utions?	(iv) Gross receipts from activity	tò (c	Amount paid or retained b fundraiser red in col. (i)	y) to (or retained by)
			Yes	No				
			-					_
			-					
3 List all states in wh or licensing.	ich the organizatio	n is registered or licensed to solicit	contrib	oution	s or has been notified	d it is	exempt fror	n registration

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

Schedule G (Form 990) 2021

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-FZ lines 1 and 6b. List events with gross receipts greater than \$5,000

ļ			(a) Event #1	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through
ы			(event type)	(event type)	(total number)	col. (c))
	1	Gross receipts	108,590.			108,590
	2	Less: Contributions	91,420.			91,420
	3	Gross income (line 1 minus line 2)	17,170.			17,170
	4	Cash prizes				
,	5	Noncash prizes				
2	6	Rent/facility costs				
חוובתו דאמנוספס	7	Food and beverages				
,	8	Entertainment	10 (00			42,629
	9 10	Other direct expenses Direct expense summary. Add lines 4 throug			•	42,629
		Net income summary. Subtract line 10 from				-25,459
_	rt l					· · ·
		\$15,000 on Form 990-EZ, line 6a.				
			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (d
2	1	Gross revenue				
,	2	Cash prizes				
81		• • • • • • • • • • • • • • • • • • • •				
	3	Noncash prizes				
הוובתו דעהבווסב	3 4					
	4	Noncash prizes				
	4 5	Noncash prizes		└── Yes% └── No	└── Yes% └── No	
	4 5	Noncash prizes Rent/facility costs Other direct expenses	└── Yes% └── No		No	
	4 5 6 7	Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 throug	yes%	□ No	<u> </u>	
a	4 5 7 8 Ent	Noncash prizes Rent/facility costs Other direct expenses Volunteer labor	gh 5 in column (d) 7 from line 1, column (d) ducts gaming activities: _ activities in each of these	No	□ No ►	YesN

132082 10-21-21

Schedule G (Form 990) 2021

Sch	hedule G (Form 990) 2021 YOUTH MUSIC PROJECT 46-	0923	905	Page 3
11	Does the organization conduct gaming activities with nonmembers?		Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?		Yes	No No
13	Indicate the percentage of gaming activity conducted in:	. —		
	a The organization's facility	13a		%
	o An outside facility			%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			/0
	Name ▶			
	Address			
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	No No
k	o If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount			
	of gaming revenue retained by the third party > \$			
c	If "Yes," enter name and address of the third party:			
	Name			
	Address			
16	Gaming manager information:			
	Name			
	Gaming manager compensation 🕨 \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
a	a Is the organization required under state law to make charitable distributions from the gaming proceeds to			┌┐
	retain the state gaming license?		Yes	└── No
k	b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
_	organization's own exempt activities during the tax year 🕨 \$			
Pa	art IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and F 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	°art III, li	ines 9,	9b, 10b,

Part IV	Supplemental Information (continued)

SCHEDL (Form 99			G GO Compl	OMB No. 1545-0047							
	of the Treasury enue Service			Go to www.ir	Attach to For s.gov/Form990 for		nation.		Open to Public Inspection		
Name of	the organization		IC PROJEC	Т					Employer identification number $46-0923905$		
Part I	General Info	rmation on Grants a	and Assistance								
	-			e amount of the grants							
				toring the use of grant							
Part II	Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.										
1 (a)	Name and addr or gover	ess of organization nment	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance		
2 Ent	ter total number	of section 501(c)(3) a	and government or	ganizations listed in th	ne line 1 table				•		
3 Ent	ter total number	of other organization	s listed in the line [.]	1 table							
LHA Fo	or Paperwork R	eduction Act Notice	, see the Instruct	ions for Form 990.					Schedule I (Form 990) 2021		

Page 2

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.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
UITION ASSISTANCE	817	0.	201,950.	FAIR MARKET VALUE	TUITION REDUCTION

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

TUITION ASSISTANCE IS PROVIDED TO STUDENTS WHO QUALIFY. ELIGIBILITY IS

DETERMINED BASED ON THE FEDERAL FINANCIAL INCOME GUIDELINES FOR FREE AND

REDUCED LUNCH.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

ſ

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

Name of t	the organization
Number of t	and organization

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

mann	e of the organization		_			Employ	yer ident			nber
	YOUTH MUSIC	PROJEC	T				46-0	923	905	
Pa	rt I Types of Property									
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	n		(d) nod of de n contribu	etermin	•	3
1	Art - Works of art									
2	Art - Historical treasures									
3	Art - Fractional interests									
4	Books and publications									
5	Clothing and household goods									
6	Cars and other vehicles									
7	Boats and planes									
8	Intellectual property									
9	Securities - Publicly traded	Х	1	694,964.	QUO	TED	PRIC	E		
10	Securities - Closely held stock									
11	Securities - Partnership, LLC, or									
	trust interests									
12	Securities - Miscellaneous									
13	Qualified conservation contribution -									
	Historic structures									
14	Qualified conservation contribution - Other									
15	Real estate - Residential									
16	Real estate - Commercial									
17	Real estate - Other									
18	Collectibles									
19	Food inventory									
20	Drugs and medical supplies									
21	Taxidermy									
22	Historical artifacts									
23	Scientific specimens									
24	Archeological artifacts									
25	Other ► (AUCTION ITEMS)	Х	39		MAR	KET	PRIC	ES		
26	Other (SUPPLIES)	Х	37	3,720.	MAR	KET	PRIC	ES		
27	Other ► ()									
28	Other ► ()									
29	Number of Forms 8283 received by the organ	ization durin	g the tax year for o	contributions	-					
	for which the organization completed Form 82		• •							
30-2	During the year, did the organization receive b	wcontributir	n any proporty ro	norted in Part I lines 1 through	ah Jo	that it			Yes	No
JUd	must hold for at least three years from the dat									
								200		Х
L.	exempt purposes for the entire holding period	If						30a		~
ь 31	If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance			of any managements of a set of the		0		31		Х

b If "Yes," describe in Part II. 33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,

contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash

describe in Part II.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2021

32a

х

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B):

Part II

THE ORGANIZATION IS REPORTING THE NUMBER OF CONTRIBUTIONS RECEIVED.

46-0923905

Page 2

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

Employer identification number 46 - 0923905

YOUTH MUSIC PROJECT

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

IN 2021, YOUTH MUSIC PROJECT PROVIDED MUSIC INSTRUCTION TO 926

UNDUPLICATED STUDENTS, 35% OF WHOM ATTENDED FOR NO COST. THESE STUDENTS

ACCOUNTED FOR A CUMULATIVE TOTAL OF 2,042 ENROLLMENTS THROUGHOUT THE

YEAR, 40% OF WHICH WERE PROVIDED FOR NO COST.

IN ADDITION TO REDUCING BARRIERS TO ACCESS, YMP TARGETS FOUR PRIMARY

PROGRAM OBJECTIVES IN ITS EFFORT TO CULTIVATE AND DEVELOP CREATIVE,

CONFIDENT, AND CAPABLE YOUTH TO SET THEM UP FOR A LIFETIME OF SUCCESS:

1) YOUTH HAVE A LIFELONG APPRECIATION OF AND ENGAGEMENT WITH MUSIC.

YOUTH'S EXPERIENCES ARE SHAPED THROUGH POSITIVE MENTORSHIP AND EXPOSURE

TO A VARIETY OF MUSIC GENRES RESULTING IN AN APPRECIATION FOR ALL MUSIC

AND THE ARTS.

2) YOUTH ENGAGE IN AND DEVELOP A SENSE OF BELONGING IN COMMUNITY.

YOUTH FEEL ACCEPTED AND VALUED AND HAVE REGULAR OPPORTUNITIES TO

PRACTICE AND STRENGTHEN COLLABORATION AND COMMUNICATION SKILLS.

3) YOUTH CULTIVATE A GROWTH MINDSET AND PERSEVERANCE.

YOUTH BELIEVE THAT ABILITY IS DEVELOPED THROUGH PRACTICE AND

PERSISTENCE AND EMBRACE OBSTACLES AND MISTAKES AS PART OF THE LEARNING PROCESS.

4) YOUTH DEVELOP A GREATER CONFIDENCE AND A POSITIVE SENSE OF

IDENTITY. YOUTH FEEL FREE TO BE THEIR AUTHENTIC SELVES AND ARE GIVEN

Name of the organization

YOUTH MUSIC PROJECT

OPPORTUNITIES TO PROGRESS AND SUCCEED.

TO MEASURE THIS, YMP CONDUCTS QUARTERLY SURVEYS TO PARTICIPANTS FAMILIES, ASKING A SERIES OF QUESTIONS DESIGNED TO TRACK WHAT HAS CHANGED FOR THEIR CHILD AS A RESULT OF PARTICIPATING IN OUR PROGRAMS. IN 2021, OVER 90% OF SURVEY RESPONDENTS REPORTED GROWTH IN: SKILL LEVEL ON THEIR INSTRUMENT; APPRECIATION FOR MUSIC. OVER 85% REPORTED GROWTH IN: CONFIDENCE; WILLINGNESS TO TRY NEW THINGS; WILLINGNESS TO STRETCH THEIR COMFORT ZONES; EXCITEMENT TO LEARN AND GROW; AWARENESS OF THEIR OWN STRENGTHS; RESILIENCE WHEN MAKING MISTAKES; AND AWARENESS THAT THEIR PROGRESS IS A DIRECT RESULT OF THEIR EFFORTS. OVER 80% REPORTED IMPROVEMENT IN: COLLABORATION SKILLS; COMFORT LEVEL WITH INTERPERSONAL RELATIONSHIPS; AND AWARENESS OF THEIR OWN AREAS OF GROWTH.

YMP ALSO EXPANDED ITS PARTNERSHIPS WITH OTHER YOUTH SERVING ORGANIZATIONS IN THE TRI-COUNTY AREA IN 2021 TO PROVIDE EXCEPTIONAL MUSIC EDUCATION OPPORTUNITIES TO KIDS AND FAMILIES FROM THOSE PARTNER AGENCIES. THESE INCLUDED: FRIENDS OF THE CHILDREN, KINSHIP HOUSE, NORTHWEST HOUSING ALTERNATIVES, AND HACIENDA CDC. THESE PARTNERSHIPS SUPPORTED 72 NON-DUPLICATED STUDENTS THROUGH 108 ENROLLMENTS AT NO COST TO STUDENTS OR THEIR FAMILIES.

OTHER NOTABLE HIGHLIGHTS OF 2021 INCLUDED THE LAUNCH OF A NEW MUSIC TECHNOLOGY LAB AT OUR FACILITY IN WEST LINN TO TEACH MUSIC PRODUCTION, RECORDING AND ENGINEERING, BEAT MAKING, AND MORE; AND YMP BECOMING THE EXCLUSIVE MUSIC EDUCATION PROVIDER OF LAKE OSWEGO PARKS AND RECREATION MUSIC PROGRAMMING. YOUTH MUSIC PROJECT

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

SARAH BANY, VICE-PRESIDENT, AND RACHAEL SNEDDON, BOARD MEMBER, HAVE A

FAMILY RELATIONSHIP.

SARAH BANY, VICE-PRESIDENT, AND MARY JAEGER, BOARD MEMBER, HAVE A BUSINESS RELATIONSHIP.

MARK SCHLESINGER, PRESIDENT, AND RACHAEL SNEDDON, BOARD MEMBER, HAVE A BUSINESS RELATIONSHIP.

FORM 990, PART VI, SECTION A, LINE 4:

IN 2021 THE BOARD OF DIRECTORS AMENDED ITS BYLAWS TO ESTABLISH AN EXECUTIVE COMMITTEE, COMPOSED OF THE PRESIDENT, VICE-PRESIDENT, SECRETARY, AND TREASURER. THE BOARD OR THE PRESIDENT MAY ALSO APPOINT AT-LARGE DIRECTORS TO SERVE ON THE EXECUTIVE COMMITTEE. ONLY DIRECTORS MAY BE VOTING MEMBERS OF THE EXECUTIVE COMMITTEE. THE EXECUTIVE COMMITTEE SHALL HAVE AND EXERCISE ALL THE AUTHORITY OF THE BOARD IN THE MANAGEMENT OF THE AFFAIRS OF THE ORGANIZATION, EXCEPT AS LIMITED BY SECTION 1.10, WHICH STATES THAT NO COMMITTEE MAY:

(A)AUTHORIZE THE PAYMENT TO A PERSON FROM THE INCOME OR ASSETS OF THE CORPORATION, OTHER THAN A PAYMENT OF REASONABLE VALUE FOR PROPERTY RECEIVED OR SERVICES PERFORMED OR PAYMENT THAT FURTHERS THE CORPORATION'S PURPOSES;

(B)APPROVE DISSOLUTION, MERGER, OR THE SALE, PLEDGE, OR TRANSFER OF ALL OR SUBSTANTIALLY ALL OF THE CORPORATION'S ASSETS;

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Name of the organization

YOUTH MUSIC PROJECT

ON ANY BOARD COMMITTEES;

(D)ADOPT, AMEND, OR REPEAL THE ARTICLES OF INCORPORATION OR BYLAWS; OR

(E)APPOINT OR REMOVE OFFICERS.

FORM 990, PART VI, SECTION A, LINE 8B:

DURING 2021, THE ORGANIZATION ESTABLISHED AN EXECUTIVE COMMITTEE WITH THE POWER TO ACT ON BEHALF OF THE BOARD OF DIRECTORS, WITH CERTAIN LIMITATIONS. HOWEVER, THERE WERE NO EXECUTIVE COMMITEE MEETINGS HELD DURING THE YEAR.

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

THE TAX RETURN IS PREPARED BY AN OUTSIDE CPA FIRM, REVIEWED BY THE

ORGANIZATON'S MANAGEMENT, AND PRESENTED TO THE BOARD OF DIRECTORS FOR

REVIEW PRIOR TO FILING.

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

THE BOARD OF DIRECTORS MEET QUARTERLY TO DISCUSS POLICIES.

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

THE COMPENSATION OF THE EXECUTIVE DIRECTOR IS DETERMINED BY THE BOARD OF

DIRECTORS AFTER CONSULTATION WITH INDEPENDENT OUTSIDE ADVISORS USING

COMPARABLE SALARY DATA. THE PROCESS OF DETERMINING THE COMPENSATION AMOUNT

IS CONTEMPORANEOUSLY DOCUMENTED.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST

POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.