Form **8868**

(Rev. January 2022)

Department of the Treasury Internal Revenue Service

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

File a separate application for each return.

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

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Name of exempt organization or other filer, see instructions. Taxpayer identification number (TIN) Type or print 46-0923905 YOUTH MUSIC PROJECT File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date for filing your 2015 EIGHTH AVENUE return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions. WEST LINN, OR 97068 Enter the Return Code for the return that this application is for (file a separate application for each return) **Application** Return **Application** Return Is For Is For Code Code Form 990 or Form 990-EZ 01 Form 1041-A 80 Form 4720 (individual) 03 Form 4720 (other than individual) 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) Form 8870 12 06 Form 990-T (corporation) 07 SEAN JONES • The books are in the care of ▶ 2015 EIGHTH AVENUE - WEST LINN, OR 97068 Telephone No. ► 503-616-5967 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this __l. If it is for part of the group, check this box ▶ ____ and attach a list with the names and TINs of all members the extension is for. NOVEMBER 15, 2023, to file the exempt organization return for I request an automatic 6-month extension of time until the organization named above. The extension is for the organization's return for: ► X calendar year 2022 or tax year beginning , and ending If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Change in accounting period 3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. За **b** If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment

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

Form **8868** (Rev. 1-2022)

instructions.

Form **990**

Return of Organization Exempt From Income Tax

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

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

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

2022

Open to Public Inspection

Department of the Treasury Internal Revenue Service

A	For t	he 2022 calendar year, or tax year beginning and endir	ng	
В	Check applica	if C Name of organization	D Employer identi	ification number
	Ado	YOUTH MUSIC PROJECT		
	Nar cha	ne nge Doing business as	46-0923	905
	lniti retu	al		The state of the s
	Fina	2015 FICHTH AVENUE	503-616	
	tern	City or town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	1,543,814.
Ļ	retu		H(a) Is this a group	
L	App tion	F Name and address of principal officer: TRAVIS MAGRANE	for subordinate	es? Yes X No
		SAME AS C ABOVE	H(b) Are all subordinates	included? Yes No
-		xempt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or		a list. See instructions
	Webs		H(c) Group exempti	
		of organization: X Corporation Trust Association Other L	Year of formation: 2012	M State of legal domicile: OR
P	art I	· · · · · · · · · · · · · · · · · · ·		
Governance	1	Briefly describe the organization's mission or most significant activities: YOUTH MUSIC EDUCATION FOR YOUTH.	USIC PROJECT I	PROVIDES
ž.	2	Check this box if the organization discontinued its operations or disposed of	more than 25% of its net a	assets.
Š	3	Number of voting members of the governing body (Part VI, line 1a)		1
<u>ග</u>	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	
es	5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	
<u>viti</u>	6	Total number of volunteers (estimate if necessary)	6	
Activities &	7 a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	
_	b	Net unrelated business taxable income from Form 990-T, Part I, line 11		
			Prior Year	Current Year
ē	8	Contributions and grants (Part VIII, line 1h)	1,545,046.	795,765.
Revenue	9	Program service revenue (Part VIII, line 2g)	530,896.	711,265.
Se.	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		
_	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,444,261.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		248,370.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		
ses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,287,396.
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
쬬		Total fundraising expenses (Part IX, column (D), line 25) 197, 105.		
_		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	305,739.	
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,903,407.
Sis	19	Revenue less expenses. Subtract line 18 from line 12	431,139.	-459,146.
Net Assets or Fund Balances	00	Total coasts (Doubly line 10)	Beginning of Current Year	End of Year
Asse Ball	20 21	Total liabilities (Part X, line 16)	1,663,643.	1,224,816.
Vet,	22	Total liabilities (Part X, line 26) Net assets or fund balances. Subtract line 21 from line 20	212,446.	232,765.
Pa	rt II	Signature Block	1,451,197.	992,051.
		alties of perjury, I declare that I have examined this return, including accompanying schedules and st	atamanta and to the heat of m	
		et, and complete. Declaration of preparer (other than officer) is based on all information of which pre		y knowledge and belief, it is
,	001100	s and complete. Bookington of property (onto than onlock) is based on an information of which pre-	parer has any knowledge.	
Sign		Signature of officer	Date	
Here		TRAVIS MAGRANE, EXECUTIVE DIRECTOR	- 410	
		Type or print name and title		
		Print/Type preparer's name Preparer's signature	Date , Check	PTIN
Paid		YEE LEE MCGEE	8/11/2 Belf-employe	
Prep		Firm's name GARY MCGEE & CO. LLP	Firm's EIN	<u> </u>
Use (Firm's address 1000 S.W. BROADWAY, SUITE 1200	, and o chi	
		PORTLAND, OR 97205	Phone no. (5	03) 222-2515
Мау	the IF	3S discuss this return with the preparer shown above? See instructions		Yes No

Pai	Check if Cahadula Coastains a vacanase averate to appulies in this Book III	X
		Λ
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?	No
	If "Yes," describe these new services on Schedule O.	,
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes If "Yes," describe these changes on Schedule O.	No
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and	
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 1,570,127. including grants of \$ 248,370.) (Revenue \$ 711,462	I .)
	FOUNDED IN 2012, YOUTH MUSIC PROJECT IS A NON-PROFIT ORGANIZATION	— <i>'</i>
	DEVOTED TO PROVIDING OUTSTANDING ROCK, POP, AND COUNTRY MUSIC EDUCATION	NC
	FOR YOUTH BY FURNISHING TUITION ASSISTANCE, INSTRUMENT RENTAL, AND	
	EXCEPTIONAL PERFORMANCE OPPORTUNITIES. YOUTH MUSIC PROJECT OFFERS	
	YEAR-ROUND AFTER-SCHOOL GROUP AND PRIVATE LESSONS, SUMMER CAMPS, AND	
	EARLY CHILDHOOD MUSIC EDUCATION.	
	YOUTH MUSIC PROJECT BELIEVES THAT MUSIC IS ESSENTIAL FOR CHILD	
	DEVELOPMENT AND THAT ALL CHILDREN DESERVE ACCESS TO QUALITY MUSICAL	
	EXPERIENCES. PERFORMING MUSIC IN FRONT OF A LIVE AUDIENCE BUILDS	
	CONFIDENCE AND PROVIDES VALUABLE SKILLS BENEFITTING STUDENTS FOR THE	
	REST OF THEIR LIVES. CONTINUED ON SCHEDULE 0.	
4b	(Code:) (Expenses \$)
_		
4c	(Code:) (Expenses \$	— ⁾
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses 1,570,127.	
	- 000 a	

Form 990 (2022) YOUTH MUSIC PROJECT Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		х
-	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	4		
5	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		х
9	rganization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
Ū	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		х
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		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	11.5		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		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		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	4.41-		X
15	or more? If "Yes," complete Schedule F, Parts I and IV	14b		
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	-17		
	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,"	4.		v
00	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		-
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х

Form 990 (2022) YOUTH MUSIC PROJECT Part IV Checklist of Required Schedules (continued)

			Yes	No
22 Did th	he organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
Part I	IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23 Did th	he organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
and f	former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
Sche	edule J	23		X
24a Did th	he organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			37
Sche	edule K. If "No," go to line 25a	24a		X
	he organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	040		
any ta	tax-exempt bonds? the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		
	tion 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	21 u		
	saction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
	e organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	edule L, Part I	25b		Х
26 Did th	he organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
or for	rmer officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
contr	rolled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27 Did th	he organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
creat	tor or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	y (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
	the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	uctions for applicable filing thresholds, conditions, and exceptions):			
	rrent or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	00-		х
	," complete Schedule L, Part IV	28a 28b		X
	% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?	200		- 21
	" complete Schedule L, Part IV	28c		Х
	he organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
	he organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	ributions? If "Yes," complete Schedule M	30		X
	he organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32 Did th	he organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
Sche	edule N, Part II	32		X
33 Did th	he organization own 100% of an entity disregarded as separate from the organization under Regulations			
	ons 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
	the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	0.4		х
	V, line 1	34		X
	the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		- 22
	es" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity n the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
	ion 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	555		
	es," complete Schedule R, Part V, line 2	36		Х
	he organization conduct more than 5% of its activities through an entity that is not a related organization			
	that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38 Did th	he organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
Note	: All Form 990 filers are required to complete Schedule O	38	Х	
Part V	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			Ш
4:	r the number reported in box 3 of Form 1096. Enter -0- if not applicable		Yes	No
	- The training topology and the training top			
	r the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
	abling) winnings to prize winners?	1c		

9022) YOUTH MUSIC PROJECT Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

			Yes	No						
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,									
	filed for the calendar year ending with or within the year covered by this return 2a 75									
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х							
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х						
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b								
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			٠,,						
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X						
b	If "Yes," enter the name of the foreign country									
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			Х						
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a 5b	-	X						
b	, , , , , , , , , , , , , , , , , , , ,									
_	If "Yes" to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	5c								
6a	any contributions that were not tax deductible as charitable contributions?	6a		х						
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	- Oa								
	were not tax deductible?	6b								
7	Organizations that may receive deductible contributions under section 170(c).									
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Х							
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х							
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required									
	to file Form 8282?	7c		Х						
d	If "Yes," indicate the number of Forms 8282 filed during the year									
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?									
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	L	Х						
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? \dots	7g	N/							
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	N/	<u> </u>						
8	, , , , , , , , , , , , , , , , , , , ,									
_	sponsoring organization have excess business holdings at any time during the year? N/A	8								
9	Sponsoring organizations maintaining donor advised funds.	0-								
a	Did the sponsoring organization make any taxable distributions under section 4966? N/A Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? N/A	9a 9b								
10	Section 501(c)(7) organizations. Enter:	90								
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a									
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:									
а	Gross income from members or shareholders N/A 11a									
b	Gross income from other sources. (Do not net amounts due or paid to other sources against									
	amounts due or received from them.)									
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a								
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year									
13	Section 501(c)(29) qualified nonprofit health insurance issuers.									
а	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.									
D	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 Enter the amount of reserves on hand 13b									
с 14а		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?									
	If "Yes," see the instructions and file Form 4720, Schedule N.	15		X						
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х						
	If "Yes," complete Form 4720, Schedule O.									
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person 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.									

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 10			
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		X
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		X
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		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	X	
b	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			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	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.		77	
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe		37	
	on Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		37	
	The organization's CEO, Executive Director, or top management official	15a	X	37
b	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			v
	taxable entity during the year?	16a		X
р	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	401		
800	exempt status with respect to such arrangements?	16b		
	List the states with which a copy of this Form 990 is required to be filed OR			
17			\:1	- -
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	, avall	aule
	for public inspection. Indicate how you made these available. Check all that apply. X Own website			
10	·	4 fic -	noia!	
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	u iinal	icial	
20	statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records			
20	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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

Check this box if neither the organization n	or any related	orga	aniza	ation	cor	npei	nsat	ed any current officer, o	director, or trustee.	
(A)	(B)			((C)			(D)	(E)	(F)
Name and title	Average	(do		Pos			one	Reportable	Reportable	Estimated
	hours per	box	(do not check more than one box, unless person is both an officer and a director/trustee)			is bot	h an	compensation	compensation	amount of
	week		Jer an	u a u	recio	ii/ii us	iee)	from	from related	other
	(list any	irecto						the	organizations	compensation
	hours for related	e or d	tee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	from the organization
	organizations	ruste	l trus		ee	nbeu		1099-NEC)	1099-1420)	and related
	below	dualt	itiona	_	oldu	st co yee	<u>.</u>	10001120)		organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) TRAVIS MAGRANE	40.00									
EXECUTIVE DIRECTOR				Х				95,208.	0.	15,927.
(2) MARK SCHLESINGER	3.00									
PRESIDENT		Х		Х				0.	0.	0.
(3) SARAH BANY	1.00									
VICE-PRESIDENT		Х		Х				0.	0.	0.
(4) RICHARD GONZALES	1.00									
TREASURER		Х		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) GAIL GREENMAN	1.00									
DIRECTOR		Х						0.	0.	0.
(8) VERONICA MURRAY	1.00									
DIRECTOR		Х						0.	0.	0.
(9) MICHAEL PITTMAN	1.00									
DIRECTOR		Х						0.	0.	0.
(10) RACHAEL SNEDDON	1.00									
DIRECTOR		Х						0.	0.	0.
(11) JASON WAXBERG	1.00							_	_	_
DIRECTOR		Х						0.	0.	0.
		<u> </u>								
	I	ı	I	ı	I	1	ĺ	i	l l	

Pa	rt VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, an	d Hi	ighe	st C	Compensated Employe	es (continued)				
	(A)	(B)			•	C)			(D)	(E)			(F)	
	Name and title	Average hours per week	box	Position (do not check in box, unless per officer and a direction)			than	th an	Reportable compensation from	Reportable compensatio from related	on I	am	timate nount o other	
		(list any hours for related organizations	Individual trustee or director	Institutional trustee		oyee	Highest compensated employee		the organization (W-2/1099-MISC/ 1099-NEC)	organization (W-2/1099-MIS 1099-NEC)		fr orga	pensat om the anizati d relate	e on
		below line)	Individua	Institutio	Officer	Key employee	Highest c employer	Former				orga	ınizatio	ons
			-											
			_											
			_											
									05 200			1	F 0'	2.77
С	Subtotal Total from continuation sheets to Part V Total (add lines 1b and 1c)	II, Section A							95,208. 0. 95,208.		0.		5,92 5,92	0.
2	Total number of individuals (including but r compensation from the organization								1),000 of reportab	le			C
3	Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s			•		•	-	_		•		3	Yes	No X
4	For any individual listed on line 1a, is the stand related organizations greater than \$15	um of reportab	le co	omp	ensa	atior	n an	d ot	her compensation from			4		Х
5	Did any person listed on line 1a receive or rendered to the organization? If "Yes," com	•				•	•		ted organization or indiv	idual for services		5		Х
1	ction B. Independent Contractors Complete this table for your five highest countries the organization. Report compensation for										npens	ation f	rom	
	(A) Name and business			ONI					(B) Description of s		C	(C Comper	;) nsatior	า
2	Total number of independent contractors (\$100,000 of compensation from the organi		ot li	mite	d to	tho	se li	stec	d above) who received n	nore than				
												Form	990 (2	0000

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) Revenuè éxcluded Related or exempt Unrelated Total revenue from tax under function revenue business revenue sections 512 - 514 Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a **b** Membership dues 1b 105,638. c Fundraising events 1c 1d d Related organizations 516,536. e Government grants (contributions) 1e f All other contributions, gifts, grants, and 173,591 similar amounts not included above 1f 37,520. g Noncash contributions included in lines 1a-1f 1g \$ 795,765. h Total. Add lines 1a-1f **Business Code** 700,070. 700,070. 2 a TUITION 611600 Program Service Revenue b INSTRUMENT RENTAL 611600 8,545. 8,545. 2,650. **COMMUNITY EVENTS** 611600 2,650. d All other program service revenue 711,265. g Total. Add lines 2a-2f. Investment income (including dividends, interest, and 2,412. 2,412. other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (ii) Personal (i) Real 6 a Gross rents **b** Less: rental expenses ... 6b c Rental income or (loss) d Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of assets other than inventory 7a **b** Less: cost or other basis 20,483. Other Revenue and sales expenses 7b 20,483. c Gain or (loss) ______7c -20,483. -20,483. d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ 105,638. of contributions reported on line 1c). See 34,095. Part IV, line 18 78,989. **b** Less: direct expenses -44,894. -44,894.c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 9b **b** Less: direct expenses c Net income or (loss) from gaming activities **10 a** Gross sales of inventory, less returns 277 and allowances 10a 10b **b** Less: cost of goods sold 196. 196. c Net income or (loss) from sales of inventory **Business Code** Miscellaneous Revenue 11 a d All other revenue e Total. Add lines 11a-11d 1,444,261. 711,461. -62,965. Total revenue. See instructions 12

Form 990 (2022) 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,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations		СХРСПЗСЗ	general expenses	САРСПЗСЗ
•	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
_	individuals. See Part IV, line 22	248,370.	248,370.		
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,				
•	trustees, and key employees	116,331.	46,532.	46,532.	23,267.
6	Compensation not included above to disqualified		,		<u> </u>
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,009,843.	842,161.	35,844.	131,838.
8	Pension plan accruals and contributions (include		,		<u> </u>
	section 401(k) and 403(b) employer contributions)	16,028.	16,028.		
9	Other employee benefits	37,085.	30,040.	160.	6,885.
10	Payroll taxes	108,109.	89,601.	4,773.	13,735.
11	Fees for services (nonemployees):				<u> </u>
	Management				
	Legal	17,065.		17,065.	
	Accounting	11,834.		11,834.	
	Lobbying	-		-	
	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 O.)	61,305.	46,657.	13,991.	657.
12	Advertising and promotion	14,833.	8,609.		6,224.
13	Office expenses	18,497.	15,730.	1,051.	1,716.
14	Information technology	33,782.	32,647.	676.	459.
15	Royalties				
16	Occupancy	21,504.	20,782.	430.	292.
17	Travel	669.		669.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	74,143.	71,652.	1,483.	1,008.
23	Insurance	24,906.	24,069.	498.	339.
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.)				
а	PROGRAM SUPPLIES	41,923.	38,944.		2,979.
b	OTHER EXPENSES	31,797.	23,413.	877.	7,507.
С	REPAIRS AND MAINTENANCE	15,383.	14,892.	292.	199.
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	1,903,407.	1,570,127.	136,175.	197,105.
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 if following SOP 98-2 (ASC 958-720)				
					F 000 (2020)

Form 990 (2022)
Part X Balance Sheet

Pa	rt X	Balance Sheet					
		Check if Schedule O contains a response or no	ote to any	/ line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		91,805.	1	135,565.	
	2	Savings and temporary cash investments			921,161.	2	521,221.
	3	Pledges and grants receivable, net		146,534.	3	92,400.	
	4	Accounts receivable, net	1,400.	4	1,188.		
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, sub					
		controlled entity or family member of any of the	ese perso	ons		5	
	6	Loans and other receivables from other disqua					
		under section 4958(f)(1)), and persons describ	ed in sec	tion 4958(c)(3)(B)		6	
ts	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			82.	8	3,048.
Ä	9	Prepaid expenses and deferred charges			23,599.	9	33,392.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a				
	b	Less: accumulated depreciation	10b	487,590.	479,062.	10c	438,002.
	11	Investments - publicly traded securities			11		
	12	Investments - other securities. See Part IV, line		12			
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must eq			1,663,643.	16	1,224,816.
	17	Accounts payable and accrued expenses			90,475.	17	101,504.
	18	Grants payable		18			
	19	Deferred revenue	121,971.	19	131,261.		
	20	Tax-exempt bond liabilities			20		
	21	Escrow or custodial account liability. Complete	Part IV o	of Schedule D		21	
es	22	Loans and other payables to any current or for	mer offic	er, director,			
≝		trustee, key employee, creator or founder, sub	stantial c	ontributor, or 35%			
Liabilities		controlled entity or family member of any of the	ese perso	ons		22	
_	23	Secured mortgages and notes payable to unre	lated thir	d parties		23	
	24	Unsecured notes and loans payable to unrelat		_		24	
	25	Other liabilities (including federal income tax, p	ayables t	o related third			
		parties, and other liabilities not included on line	es 17-24).	Complete Part X			
		of Schedule D			010 116	25	222 565
	26	Total liabilities. Add lines 17 through 25			212,446.	26	232,765.
ű		Organizations that follow FASB ASC 958, ch	eck here	· X			
nce		and complete lines 27, 28, 32, and 33.			1 100 201		722 150
ala	27	Net assets without donor restrictions			1,108,301.	27	733,152.
dВ	28	Net assets with donor restrictions			342,896.	28	258,899.
Ë		Organizations that do not follow FASB ASC	958, che	ck here			
Net Assets or Fund Balances		and complete lines 29 through 33.					
)ts	29	Capital stock or trust principal, or current fund			29		
SSE	30	Paid-in or capital surplus, or land, building, or				30	
χ¥	31	Retained earnings, endowment, accumulated		_	1 451 105	31	000 051
ž	32	Total net assets or fund balances		1,451,197.	32	992,051.	
	33	Total liabilities and net assets/fund balances			1,663,643.	33	1,224,816.

Form **990** (2022)

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	1,44 1,90	4,2	61.			
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,90 -45					
3	Revenue less expenses. Subtract line 2 from line 1							
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,45	1,1	97.			
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	99	2,0	51.			
Pa	rt XII Financial Statements and Reporting							
	Check if Schedule O contains a response or note to any line in this Part XII				Ш			
				Yes	No			
1	Accounting method used to prepare the Form 990: Cash X Accrual Other							
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.							
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X			
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a						
	separate basis, consolidated basis, or both:							
	Separate basis Consolidated basis Both consolidated and separate basis							
b	Were the organization's financial statements audited by an independent accountant?		2b	X				
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,						
	consolidated basis, or both:							
	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							
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X				
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	nedule O.						
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the							
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		X			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired audit						
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b					

Form **990** (2022)

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

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

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

Employer identification number

46-0923905

			H MUSIC PR						6-0923905
Pa	art I	Reason for Public (Charity Status.	(All organizations must o	omplete th	nis part.) S	See instructions	5.	
The	organ	nization is not a private found							
1		A church, convention of ch	•		•	•			
2		A school described in sect i	•				-76-76-		
3		A hospital or a cooperative		•		/h)/1)/Δ)/ii	ii)		
4	H	A medical research organiz					-	'iii) Enter	the hospital's name
7		•	ation operated in co	njunction with a nospita	i described	ı III Sectio	/// //O(D)(1)(A)	iii). Liitei	the nospital s hame,
_		city, and state:	ar the benefit of a co	llaga ar university avenu	d or opera	tod by a a	overnmental u	ait dagarih	and in
5		An organization operated for		niege or university owner	u or opera	ted by a g	overnmentai u	nii descrit	bea in
_		section 170(b)(1)(A)(iv). (C							
6	37	A federal, state, or local government							
7	X	An organization that norma		intial part of its support f	from a gov	ernmental	unit or from th	ie general	public described in
		section 170(b)(1)(A)(vi). (C							
8	Щ	A community trust describe	ed in section 170(b)((1)(A)(vi). (Complete Par	t II.)				
9		An agricultural research org	ganization described	in section 170(b)(1)(A)(ix) operate	ed in conju	ınction with a l	and-grant	college
		or university or a non-land-g	grant college of agric	ulture (see instructions).	Enter the	name, city	y, and state of	the colleg	e or
		university:							
10		An organization that norma	Ily receives (1) more	than 33 1/3% of its sup	port from o	contributio	ons, membersh	ip fees, a	nd gross receipts from
		activities related to its exen	npt functions, subjec	ct to certain exceptions;	and (2) no	more than	n 33 1/3% of it	s support	from gross investment
		income and unrelated busin	ness taxable income	(less section 511 tax) fr	om busine	sses acqu	ired by the org	ganization	after June 30, 1975.
		See section 509(a)(2). (Cor				·			
11		An organization organized a	and operated exclus	ively to test for public sa	afety. See s	section 50	09(a)(4).		
12		An organization organized a	•	•	-			rry out the	e purposes of one or
		more publicly supported or	•	•	-			-	
		lines 12a through 12d that	~						
á	, [Type I. A supporting orga				-		-	, aivina
		the supported organization	· · · · · · · · · · · · · · · · · · ·	•	•				
		organization. You must o			a majority .	or the dire	otoro or tradici	30 01 1110 0	apporting
k	, _	Type II. A supporting org			tion with it	e eunnort	ed organization	n(e) by ba	vina
•	, _		•				_		-
		control or management o			arrie perso	JIIS IIIAI CI	ontroi or manaç	ge trie sup	pported
		organization(s). You mus					I f 1: II	!	مالان، . الم
(☐ Type III functionally inte						y integrati	ed with,
		its supported organization		· ·					
(d ∟	⊥ Type III non-functionally						-	* *
		that is not functionally int	-		•		-	an attent	iveness
		requirement (see instruct	,	•	•				
•	• L	☐ Check this box if the organical contents in the contents of the con					a Type I, Type I	I, Type III	
		functionally integrated, or	r Type III non-functio	nally integrated support	ing organiz	zation.			
1		er the number of supported o	•						
		vide the following information			(iv) le the orga	nization lieted	1		
	((i) Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the orga in your governi		(v) Amount of	•	(vi) Amount of other support (see instructions)
		organization		above (see instructions))	Yes	No	support (see ins	structions)	support (see instructions)
Tot	al								

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2018 **(b)** 2019 (c) 2020 (d) 2021 (e) 2022 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not 991,141. 795,765. 1,161,719 1,373,868 1,545,046 5,867,539. include any "unusual grants.") 2 Tax revenues levied for the organization'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 ... 991,141. 795,765. 1,161,719 1,373,868. 1,545,046 5,867,539. 4 Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 2,917,690. 2,949,849. Public support. Subtract line 5 from line 4.

Se	ction B. Total Support						
Cale	endar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	991,141.	1,161,719.	1,373,868.	1,545,046.	795,765.	5,867,539
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	40.	23.	55.	52.	2,412.	2,582
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.)	1,625.	-3,775.				-2,150
11	Total support. Add lines 7 through 10						5,867,971
12	Gross receipts from related activities,	etc. (see instruction	ons)			12 3	,258,150

13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Sec	tion C. Computation of Public Support Percentage		
14	Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f))	14	50.27 %
15	Public support percentage from 2021 Schedule A, Part II, line 14	15	40.13 %
16a	33 1/3% support test - 2022. If the organization did not check the box on line 13, and line 14 is 33 1/3% or n	nore, o	check this box and
	stop here. The organization qualifies as a publicly supported organization		X
b	33 1/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3%	or m	ore, check this box
	and stop here. The organization qualifies as a publicly supported organization		
17a	10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, or 16b, a	and lir	ne 14 is 10% or more,
	and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part'	VI hov	v the organization
	meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		
b	10% -facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, 16b, or	17a, a	nd line 15 is 10% or
	more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in	n Part	VI how the
	organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organ	izatioı	n
18	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box a	nd se	e instructions

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

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

Se	ction A. Public Support	, , , , , , , , , , , , , , , , , , ,	,				
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	<u> </u>					
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose	<u> </u>					
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			1			
	the organization without charge						
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support		1	,			
	endar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b,						
	whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part VI.)	 			1		
	Total support. (Add lines 9, 10c, 11, and 12.)			<u>l</u>		<u> </u>	<u> </u>
14	First 5 years. If the Form 990 is for the	e organization's fi	irst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) organizat	tion,
<u></u>	check this box and stop here						<u></u>
	ction C. Computation of Publ					Liel	
	Public support percentage for 2022 (I					15	%
	Public support percentage from 2021 ction D. Computation of Investigation					16	%
	Investment income percentage for 20					17	04
						18	%
	Investment income percentage from 2 a 33 1/3% support tests - 2022. If the						17 is not
196	more than 33 1/3%, check this box a						
L	33 1/3% support tests - 2021. If the						
	line 18 is not more than 33 1/3%, che	•			•	•	
20	Private foundation If the organization						

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

	Yes	No
1		
2		
3a		
3b		
_		
3с		
4a		
4 a		
41		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
Ju		
9b		
9с		
10a		
10b		

Par	t IV Supporting Organizations (continued)			
	, territoria, terr		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
	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		
	A family member of a person described on line 11a above?	11b		
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sect	tion B. Type I Supporting Organizations	•		
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers	,		
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported	,		
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sect	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sect	tion D. All Type III Supporting Organizations			
			Yes	No
	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		
	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		
	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.	_		
	tion E. Type III Functionally Integrated Supporting Organizations	3		
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instruction	ne)		
' a	The organization satisfied the Activities Test. Complete line 2 below.	113).		
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 (se	e instructio	ns).	
	Activities Test. Answer lines 2a and 2b below.		Yes	No
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described 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.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

	dule A (Form 990) 2022 YOUTH MUSIC PROJECT			46-0923905 Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Orga	anizations	
1	Check here if the organization satisfied the Integral Part Test as a qualify	ing trust o	n Nov. 20, 1970 (explain in	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu	st comple	te Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			

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

Schedule A (Form 990) 2022

emergency temporary reduction (see instructions).

instructions).

6

COLIC	duic A (1 01111 330) 2022 = 0 0 1 1 1 1 2 3 2 0 0 1				t trager
Pa	t V Type III Non-Functionally Integrated 509	9(a)(3) Supporting Orga	anizations _{(continued}	d)	
Sect	on D - Distributions		•		Current Year
1	Amounts paid to supported organizations to accomplish ex	empt purposes		1	
2	Amounts paid to perform activity that directly furthers exem	pt purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpos	ses of supported organization	s	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - prior IRS approval - prior	rovide 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 organization is responsive	,		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount		1	10	
		(i)	(ii)		(iii)

Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2022 (reason-			
	able cause required - explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2022			
а	From 2017			
b	From 2018			
С	From 2019			
d	From 2020			
е	From 2021			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2022 distributable amount			
i	Carryover from 2017 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2022 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2022 distributable amount			
С	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2022, 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 2022. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2023. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а	Excess from 2018			
b	Excess from 2019			
С	Excess from 2020			
d	Excess from 2021			
е	Excess from 2022			

Schedule A (Form 990) 2022

Part V	Part IV, line 1; P	Section art IV, S D, lines	A, lines 1 Section D, 5, 6, and	, 2, 3b, 3c, 4 lines 2 and	4b, 4c, 5a 3; Part IV	ı, 6, 9a, 9b, , Section E	, 9c, 11a, 11l , lines 1c, 2a	o, and 11 , 2b, 3a,	c; Part IV, So and 3b; Part	art II, line 17a or 17b; Part III, line 12; ection B, lines 1 and 2; Part IV, Section C, V, line 1; Part V, Section B, line 1e; Part V, for any additional information.	
SCHE	DULE A	, PA	RT II	, LINE	10,	EXPLA	NATION	FOR	OTHER	INCOME:	
MISC	ELLANE	ous :	INCOM	E							
2018	AMOUN'	Г: \$	1,	625.							
2019	AMOUN'	r: \$	-3	,775.							

Schedule B

Schedule of Contributors

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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

Employer identification number

YOUTH MUSIC PROJECT 46-0923905 Organization type (check one): Filers of: Section: X = 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule ☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules 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. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \$______\$ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), 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

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

that it doesn't meet the filing requirements of Schedule B (Form 990).

Schedule B (Form 990) (2022)

Name of organization Employer identification number

YOUTH MUSIC PROJECT

46-0923905

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$385,312.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	Name, address, and ZIP + 4	\$ 20,224.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization Employer identification number

YOUTH MUSIC PROJECT

46-0923905

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

Name of organization Employer identification number 46-0923905 YOUTH MUSIC PROJECT Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements
Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

YOUTH MUSIC PROJECT

Employer identification number 46-0923905

Pa	organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		imilar Funds or <i>F</i>	Accounts. Complete if the
		(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 wi	-		
	are the organization's property, subject to the organization's ex			
6	Did the organization inform all grantees, donors, and donor ad			
	for charitable purposes and not for the benefit of the donor or	·		
Da	impermissible private benefit?			
Pa			" on Form 990, Part IV	/, line 7.
1	Purpose(s) of conservation easements held by the organization	` '		
	Preservation of land for public use (for example, recreation			orically important land area
	Protection of natural habitat		Preservation of a cert	ified historic structure
_	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualified	ed conservation contribu	ition in the form of a c	onservation easement on the last Held at the End of the Tax Year
	day of the tax year.			
	Total number of conservation easements			2a
	Total acreage restricted by conservation easements			2b
C	Number of conservation easements on a certified historic structure.			2c
a	Number of conservation easements included in (c) acquired af	•		
2	historic structure listed in the National Register			2d
3	Number of conservation easements modified, transferred, release	ased, extinguished, or to	erminated by the orga	nization during the tax
4	year Number of states where property subject to conservation ease	oment is located		
5	Does the organization have a written policy regarding the period		on handling of	
3	violations, and enforcement of the conservation easements it h			Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, h			
Ū	otali and volunteer neare devoted to monitoring, inspecting, in	arraning or violations, arr	a cincioning conservat	ion oddornomo daning the year
7	Amount of expenses incurred in monitoring, inspecting, handli	ng of violations, and enf	orcina conservation e	asements during the year
	3,		g	g ,
8	Does each conservation easement reported on line 2(d) above	satisfy the requirement	s of section 170(h)(4)(l	B)(i)
	and section 170(h)(4)(B)(ii)?	•		
9	In Part XIII, describe how the organization reports conservation			
	balance sheet, and include, if applicable, the text of the footnot	te to the organization's	financial statements t	hat describes the
	organization's accounting for conservation easements.			
Pa	t III Organizations Maintaining Collections of	Art, Historical Tre	asures, or Other	Similar Assets.
	Complete if the organization answered "Yes" on Form 9	990, Part IV, line 8.		
1a	If the organization elected, as permitted under FASB ASC 958	, not to report in its reve	nue statement and ba	alance sheet works
	of art, historical treasures, or other similar assets held for publi	c exhibition, education,	or research in furthera	ance of public
	service, provide in Part XIII the text of the footnote to its finance	cial statements that des	cribes these items.	
b	If the organization elected, as permitted under FASB ASC 958	, to report in its revenue	statement and balance	ce sheet works of
	art, historical treasures, or other similar assets held for public e	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			\$ <u></u>
	mn			<u> </u>
2	If the organization received or held works of art, historical treas	sures, or other similar as	sets for financial gain,	provide
	the following amounts required to be reported under FASB AS	C 958 relating to these	items:	
а	Revenue included on Form 990, Part VIII, line 1			\$
b	Assets included in Form 990, Part X			\$

Sche	dule D (Form 990) 2022 YOUTH M	USIC PROJE	СТ				46-	0923	905	Page	2
Par	t III Organizations Maintaining C	ollections of A	rt, His	torical Tr	easures, o	or Other	Similar A	ssets(c	ontinue	ed)	_
3	Using the organization's acquisition, accession	on, and other record	ls, chec	k any of the	following tha	ıt make sigi	nificant use o	of its			
	collection items (check all that apply):										
а	Public exhibition	d		Loan or exc	hange progra	am					
b	Scholarly research	е		Other							
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explai	n how th	ney further t	he organizati	on's exemp	ot purpose ir	Part XIII			
5	During the year, did the organization solicit o										
	to be sold to raise funds rather than to be ma	aintained as part of t	the orga	nization's c	ollection?			Y	es	N	No
Par	t IV Escrow and Custodial Arran	gements. Comple	ete if the	organizatio	n answered	"Yes" on Fo	orm 990, Par	t IV, line	9, or		
	reported an amount on Form 990, Par	t X, line 21.									
1a	Is the organization an agent, trustee, custodi	an or other intermed	diary for	contribution	ns or other as	sets not in	cluded				
	on Form 990, Part X?							, 🔲 Ye	s	N	No
b	If "Yes," explain the arrangement in Part XIII										
								Am	ount		
С	Beginning balance						1c				
d	Additions during the year						1d				
	Distributions during the year						1e				
	Ending balance						1f				
	Did the organization include an amount on Fo						?	Ye	es	N	No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	kplanatio	on has been	provided on	Part XIII					
Par	t V Endowment Funds. Complete it	f the organization ar	swered	"Yes" on Fo	orm 990, Parl	IV, line 10.					
		(a) Current year	(b) P	rior year	(c) Two year	rs back (d)	Three years I	oack (e)	Four ye	ars bad	ck
1a	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curr	rent year end baland	e (line 1	g, column (a	a)) held as:						
а	Board designated or quasi-endowment		_%								
b	Permanent endowment	%									
С	Term endowment	%									
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.									
3a	Are there endowment funds not in the posse	ssion of the organiz	ation tha	at are held a	ınd administe	ered for the					
	organization by:								Ye	es N	lo
	(i) Unrelated organizations								a(i)		
	(ii) Related organizations							3	a(ii)		
	If "Yes" on line 3a(ii), are the related organization							<u>L</u>	3b		
	Describe in Part XIII the intended uses of the		wment	funds.							
Par	t VI Land, Buildings, and Equipm										
	Complete if the organization answered	1			İ						
	Description of property	(a) Cost or o basis (investr		` ,	or other (other)		umulated eciation	(d)	Book v	alue	
1a	Land										
	Buildings										
	Leasehold improvements				8,140.		0,997.		217,		
d	Equipment			65	7,452.	43	6,593.		220,	859).

Schedule D (Form 990) 2022

438,002.

e Other.

d Equipment

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

Schedule D (Form 990) 2022 YOUTH MUSIC	PROJECT	46	-0923905 Page
Part VII Investments - Other Securities.			. age
Complete if the organization answered "Yes'			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 000 Part IV line	11c Soc Form 900 Part V line 13	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	d-of-vear market value
	(b) Book value	(c) Wethod of Valuation. Cost of end	d-or-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6) (7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11d. See Form 990. Part X. line 15.	
	Description	, ,	(b) Book value
(1)			, ,
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) lir	ne 15.)		
Part X Other Liabilities.	l on Form 000. Port IV line	110 or 11f Coo Form 000 Dort V line 05	-
Complete if the organization answered "Yes" (a) Description of liability	on Form 990, Part IV, line	The or Tif. See Form 990, Part X, line 25	(b) Book value
1. (7 1 7			(b) BOOK Value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			

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

(7) (8)

Pai	Reconciliation of Revenue per Audited Financial Sta		n Revenue per H	eturr	1.
	Complete if the organization answered "Yes" on Form 990, Part IV, lir				1 440 001
1	Total revenue, gains, and other support per audited financial statements			1	1,449,091.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 - 1			
а	Net unrealized gains (losses) on investments		253,200.	-	
b	Donated services and use of facilities		253,200.	-	
С.	Recoveries of prior year grants				
d	, , , , , , , , , , , , , , , , , , , ,				253,200.
e	Add lines 2a through 2d			2e	1,195,891.
3	Subtract line 2e from line 1			3	1,133,031.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1.1			
a	Investment expenses not included on Form 990, Part VIII, line 7b		248,370.	-	
b	Other (Describe in Part XIII.)	-		1 1	248,370.
c	Add lines 4a and 4b			4c	1,444,261.
Dai	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12. rt XII Reconciliation of Expenses per Audited Financial St			Dotu	
rai	Complete if the organization answered "Yes" on Form 990, Part IV, lir		iii Expelises pei	netu	111.
				1	1,908,237.
1	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:			-	1,500,257.
2		2a	253,200.		
a	Donated services and use of facilities		255,200	-	
b	Prior year adjustments			-	
۲ C	Other losses Other (Describe in Part XIII.)			-	
d e		· · · · · · · · · · · · · · · · · · ·		2e	253,200.
3				3	1,655,037.
4	Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:				1,033,037
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)		248,370.		
	Add lines 4a and 4b			4c	248,370.
5	Total expenses. Add lines 3 and 4c. (<i>This must equal Form</i> 990, <i>Part I, line</i> 1			5	1,903,407.
	rt XIII Supplemental Information.	<u></u>			
	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	4: Part IV. lines 1	b and 2b: Part V. line	4: Part	X. line 2: Part XI.
	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a			,	, , ,
		,			
PAI	RT XI, LINE 4B - OTHER ADJUSTMENTS:				
TU:	ITION ASSISTANCE				248,370.
PAI	RT XII, LINE 4B - OTHER ADJUSTMENTS:				
TU:	ITION ASSISTANCE				248,370.

SCHEDULE G (Form 990)

Department of the Treasury

Name of the organization

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public

Inspection
Employer identification number

Schedule G (Form 990) 2022

YOUTH M	MUSIC PROJECT				46-0923	905
Part I Fundraising Activities required to complete this part	Complete if the organization answert.	ered "Y	es" or	n Form 990, Part IV,	line 17. Form 990-E2	filers are not
 Indicate whether the organization rai a Mail solicitations b Internet and email solicitations c Phone solicitations d In-person solicitations 2 a Did the organization have a written of key employees listed in Form 990, F b If "Yes," list the 10 highest paid indicompensated at least \$5,000 by the 	e Solicitat f Solicitat g Special or oral agreement with any individual Part VII) or entity in connection with p ividuals or entities (fundraisers) pursu	tion of tion of fundra I (include profess	non-g gover lising o ding o ional f	overnment grants nment grants events fficers, directors, tru fundraising services?	stees, or Yes	
(i) Name and address of individual or entity (fundraiser)			(iii) Did fundraiser have custody or control of contributions? (iv) Gross rec from activi		(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
otal						
3 List all states in which the organization or licensing.	on is registered or licensed to solicit	contrib	utions	s or has been notified	d it is exempt from re	egistration
-						

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

46-0923905 Page 2 Schedule G (Form 990) 2022 YOUTH MUSIC PROJECT 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-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 **(b)** Event #2 (c) Other events (d) Total events NONE (add col. (a) through GALA col. (c)) (event type) (event type) (total number) Revenue 139,733. 139,733. 1 Gross receipts 105,638 105,638. 2 Less: Contributions 34,095 34,095. 3 Gross income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes Direct Expenses 6 Rent/facility costs 13,298. 13,298. 7 Food and beverages 8 Entertainment 65,691. 9 Other direct expenses 65,691. 78,989. 10 Direct expense summary. Add lines 4 through 9 in column (d) -44,894 11 Net income summary. Subtract line 10 from line 3, column (d) Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses Yes Yes % Yes 6 Volunteer labor No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) **9** Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? No **b** If "No," explain:

Schedule G (Form 990) 2022

b If "Yes," explain:

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? _____ Yes ____ No

Sch	chedule G (Form 990) 2022 YOUTH MUSIC	PROJECT 46-	0923	3905	Page 3
11	1 Does the organization conduct gaming activities with non	members?		Yes	☐ No
12	2 Is the organization a grantor, beneficiary or trustee of a tr				
			. Ш	Yes	└── No
	Indicate the percentage of gaming activity conducted in:		مدا	1	0.4
				+	<u>%</u>
		the organization's gaming/special events books and records:	. 130		
•	Enter the hame and address of the person who propares	the organization organization of the books and rooms.			
	Name				
	Address				
45.				Yes	☐ No
158	ba Does the organization have a contract with a third party to	rom whom the organization receives gaming revenue?	🖳	res	□ NO
ŀ	b If "Yes," enter the amount of gaming revenue received by	the organization \$ and the amount			
	of gaming revenue retained by the third party \$	and an amount			
c	c If "Yes," enter name and address of the third party:				
	Name				
	Address				
	Address				
16	6 Gaming manager information:				
	3 3				
	Name				
	Gaming manager compensation \$	_			
	Description of services provided				
	Director/officer Employee	Independent contractor			
47	7 Mary dekarra diskilaraki				
	7 Mandatory distributions:a Is the organization required under state law to make char	itable distributions from the gaming proceeds to			
•		trable distributions from the garming proceeds to		Yes	☐ No
k		v to be distributed to other exempt organizations or spent in the			
	organization's own exempt activities during the tax year	\$			
Pa		xplanations required by Part I, line 2b, columns (iii) and (v); and F	art III, I	ines 9,	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provid	e any additional information. See instructions.			

Schedule G	G (Form 990)	YOUTH MUSIC	PROJECT	46-0923905	Page 4
Part IV	G (Form 990) Supplemental Info	rmation (continued)			

SCHEDULE I (Form 990)

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

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

Department of the Treasury Internal Revenue Service Attach to Form 990.
Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization YOUTH MUS	TC PROJEC	Ф					Employer identification number $46-0923905$
Part I General Information on Grants a							10 0510500
Does the organization maintain records t criteria used to award the grants or assis Describe in Part IV the organization's pro	tance?				•	sistance, and the selec	₹
Part II Grants and Other Assistance to I recipient that received more than \$					anization answered "\	es" on Form 990, Par	t IV, line 21, for any
1 (a) Name and address of organization or government	(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 Enter total number of section 501(c)(3) at3 Enter total number of other organizations					<u> </u>		

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

(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
TUITION ASSISTANCE	448	0.	248,370.	IR MARKET VALUE TUITION REDUCTION tional information.	TUITION REDUCTION
Part IV Supplemental Information. Provide the information re	equired in Part I, lin	ne 2; Part III, column	n (b); and any other a	dditional information.	
PART I, LINE 2:					
TUITION ASSISTANCE IS PROVIDED TO	STUDENTS	WHO QUALI	FY. ELIGIB	ILITY IS	
DETERMINED BASED ON THE FEDERAL F	INANCIAL	INCOME GUI	DELINES FO	R FREE AND	
REDUCED LUNCH.					

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

Open to Public Inspection

Employer identification number

	YOUTH MUSIC	PROJEC	T'		46-0	923	905	
Pai					<u> </u>			
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu			s
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded							
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other (AUCTION ITEMS)	X	101		MARKET PRIC			
26	Other (SUPPLIES)	X	91	3,425.	MARKET PRIC	ES		
27	Other ()							
28	Other ()							
29	Number of Forms 8283 received by the organi							
	for which the organization completed Form 82	83, Part V, [Donee Acknowledg	ement 29				
							Yes	No
30a	During the year, did the organization receive b	y contribution	on any property rep	ported in Part I, lines 1 throug	gh 28, that it			
	must hold for at least 3 years from the date of							
	exempt purposes for the entire holding period	?				30a		X
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance				tions?	31		X
32a	Does the organization hire or use third parties	or related or	rganizations to soli	cit, process, or sell noncash				
	contributions?					32a		X
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in o	olumn (c) fo	r a type of propert	y for which column (a) is che	cked,			
	describe in Part II.							

Schedule M (Form 990) 2022

SCHEDULE O (Form 990)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

2022
Open to Public Inspection

Internal Revenue Service

Name of the organization

YOUTH MUSIC PROJECT

Employer identification number 46-0923905

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

ACCESSIBILITY AND INCLUSIVITY ARE AT YOUTH MUSIC PROJECT'S CORE.

YOUTH MUSIC PROJECT OFFERS INDIVIDUAL, GROUP, AND SUMMER CAMP MUSIC

INSTRUCTION IN PIANO, VIOLIN, DRUMS, GUITAR, BASS, UKULELE, VOICE, ROCK

BAND, AND MORE. LAUNCHED OUT OF A TRAVEL TRAILER IN 2012, THE

ORGANIZATION WENT FROM A TRAVELING MUSIC PROGRAM TO HAVING A PERMANENT

HOME IN AN ADA ACCESSIBLE, STATE-OF-THE-ART FACILITY. IN 2022, YOUTH

MUSIC PROJECT PROVIDED MUSIC INSTRUCTION TO 1,280 NON-DUPLICATED

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

FOR A CUMULATIVE TOTAL OF 2,705 ENROLLMENTS THROUGHOUT THE YEAR, 34% OF

WHICH WERE PROVIDED AT NO COST. THIS REFLECTED A 38% GROWTH IN TOTAL

NON-DUPLICATED STUDENTS, AND A 32% GROWTH IN TOTAL ENROLLMENTS BETWEEN

FISCAL YEAR 2021 AND 2022.

YOUTH MUSIC PROJECT IS ALSO THE MUSIC EDUCATION PROVIDER FOR LAKE

OSWEGO PARKS & RECREATION, PROVIDING MUSIC EDUCATION TO AN ADDITIONAL

212 NON-DUPLICATED STUDENTS AND 287 ENROLLMENTS VIA THIS CONTRACT IN

2022.

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 SECRETARY, HAVE A
BUSINESS RELATIONSHIP.

Schedule O (Form 990) 2022 Page 2 Name of the organization **Employer identification number** YOUTH MUSIC PROJECT 46-0923905 FORM 990, PART VI, SECTION A, LINE 8B: DURING 2022, 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 COMMITTEE 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.