2020 Exempt Organization Business Tax Return prepared for:

National Association For Music Education 1806 Robert Fulton Drive Reston, VA 20191

F S TAYLOR & ASSOCIATES P C 1420 N STREET NW SUITE 100 WASHINGTON, DC 20005

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)

Department of the Treasury

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

Inter	mal Reve	enue Service	► Go to www.irs.gov/Form990 for instructions and the latest			Inspection
A	For the	e 2020 calen	dar year, or tax year beginning Jul 1 , 2020, and ending		n 30	,20 21
в	Check it	f applicable:	C Name of organization National Association For Music Ed		-	oyer identification number
	Address	s change	Doing business as		52-60	045043
	Name c	hange	Number and street (or P.O. box if mail is not delivered to street address)	oom/suite	•	none number
	Initial re	eturn	1806 Robert Fulton Drive		(703)	860-4000
	Final ret	turn/terminated	City or town, state or province, country, and ZIP or foreign postal code			6,020
	Amende	ed return	Reston, VA 20191			receipts \$7,045,188.
	Applicat	tion pending	F Name and address of principal officer:	H(a) Is this a grou	up return fo	or subordinates? 🛄 Yes 🔀 No
		-	Chaudlier M Moore, 1806 Robert Fulton Drive, Reston, VA 201	91 H(b) Are all su	bordinat	es included? 🗌 Yes 🗌 No
1	Tax-exe	empt status:	X 501(c)(3) 501(c) () ◄ (insert no.) 4947(a)(1) or 527	If "No," at	ttach a li	st. See instructions
J	Website	e: 🕨 WWW.N	AFME.Org	H(c) Group ex	emption	number 🕨
к	Form of	organization:	Corporation Trust Association Other > L Year of forma	tion: 1907	M State	of legal domicile: VA
P	art I	Summa	CTARLES CONTRACTOR CON			
	1	Briefly des	cribe the organization's mission or most significant activities: MRE's mi	ssion is to advance	music edu	cation by encouraging the study
Activities & Governance		and mak	ing of music by all.			
nar						
ver	2		box \blacktriangleright if the organization discontinued its operations or disposed		5% of	its net assets.
00	3		voting members of the governing body (Part VI, line 1a) .		3	15
ъ С	4		independent voting members of the governing body (Part VI, line 1b)		4	14
tie	5				5	38
tivi	6	Total numb	per of volunteers (estimate if necessary)		6	75
Å	7a		ated business revenue from Part VIII, column (C), line 12		7a	<u>1</u> 06,332.
_	b	Net unrelat	ted business taxable income from Form 990-T, Part I, line 11		7b	0.
				Prior Year		Current Year
ē	8		ons and grants (Part VIII, line 1h) .	4,824,	331.	4,323,027.
ent	9	-	ervice revenue (Part VIII, line 2g)	1,356,	938.	189,474.
Revenue	10		t income (Part VIII, column (A), lines 3, 4, and 7d)	217,	945.	1,183,423.
	11		nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	426,	940.	1,188,254.
	12		ue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)	6,826,	154.	6,884,178.
	13		similar amounts paid (Part IX, column (A), lines 1-3)			
	14		aid to or for members (Part IX, column (A), line 4)			
es	15		her compensation, employee benefits (Part IX, column (A), lines 5-10)	3,687,	387.	2,881,754.
Expenses	16a		al fundraising fees (Part IX, column (A), line 11e)			And Constant And Constant And Constant
dx X	b		raising expenses (Part IX, column (D), line 25) ►110, 679.		· 我的意思。	
ш	17		enses (Part IX, column (A), lines 11a–11d, 11f–24e)	5,015,		2,902,838.
	18		nses. Add lines 13–17 (must equal Part IX, column (A), line 25)	8,702,	451.	5,784,592.
	19	Revenue le	ess expenses. Subtract line 18 from line 12	-1,876,		1,099,586.
s or				Beginning of Curre		End of Year
Fund Balance	20		ts (Part X, line 16)	9,826,		9,057,318.
it As	21		ties (Part X, line 26)	5,078,	760.	3,210,490.
			or fund balances. Subtract line 21 from line 20	4,747,	242.	5,846,828.
P	art II 🛛	Signatu	re Block			

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

	Chaudlier Moore	3/29/2022	
Sign Here	Signature of officer Chaudlier M Moore, Chief Financial Officer	Date	
	Type or print name and title	<u>^</u>	
Paid	Print/Type preparer's name Preparer's signature	Date Check	PTIN
Preparer	Terry W. Tyler	3 1 120 self-employed	P02385825
Use Only		Firm's EIN ► 52-1	196225
Use Only	Firm's address ► 1420 N STREET NW SUITE 100, WASHINGTON,	, DC 20005 Phone no. (202) 8	
May the IRS	S discuss this return with the preparer shown above? See instructions		🗙 Yes 🗌 No
For Panerwo	ork Reduction Act Notice see the senarate instructions RAA	BEV 02/17/22 PBO	Form 990 (2020)

work Reduction Act Notice, see the separate instructions. BA

Form **990**

OMB No. 1545-0047

2020

Open to Public

Part		Ded III	
1	Check if Schedule O contains a response or note to any line in this Briefly describe the organization's mission:	Part III	•••• <u>•</u> ••
•			
	NAFME's mission is to advance music education by en and making of music by all.		
	and making of music by all.		
2	Did the organization undertake any significant program services during the	vear which were not listed (on the
	prior Form 990 or 990-EZ?		🗌 Yes 🗵
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in	how it conducts, any pro-	
		• • • • • • • • • •	🗌 Yes 🗵
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of ir expenses. Section 501(c)(3) and 501(c)(4) organizations are required to reported the total expenses, and revenue, if any, for each program service reported.	ts three largest program se ort the amount of grants an	rvices, as measur ad allocations to c
4a	(Code:) (Expenses \$927,974. including grants of \$	0.) (Revenue \$	660,777.)
	Member and Student Experiences:		
	Activities undertaken for both in-person and virtua	l performance and e	educational
	opportunities for middle, high school, and collegiat	te students. Incluc	les print and
	digital marketing campaigns to members and non-member	ers of the associat	tion
	highlighting programs available to their students. Programs	include the Internati	<u>onal Tri-M Mus</u>
	Honor Society, All-National Honor Ensembles, Composition Com	petitions, Music In O	ur Schools Mor
	and Research Assistance Programs.		
4b	(Code:) (Expenses \$ 758, 627, including grants of \$	0) (Beyenue \$	4 020 410)
4b	(Code:) (Expenses \$ 758,627. including grants of \$		4,020,410.)
4b	Membership growth & development:		
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Part	V 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	×	
2	Is the organization required to complete Schedule B, Schedule of Contributors See instructions?	2		×
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		
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			×
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues.	4	×	
6	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	5	i	×
Ŭ	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		×
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		×
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		×
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> .	9		×
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	×	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, 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	<u>11a</u>	<u></u> ×	122.1742.4
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	11a	^	×
c	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	110		×
đ	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	110 11d		×
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	×	~
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		×
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		×
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	×	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		×
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		×
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV.</i>	14b		v
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	14.0		<u>×</u>
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		<u>×</u> _
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		<u>×</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	17		 ~
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			<u>×</u>
20a	If "Yes," complete Schedule G, Part III	19 20a		<u>×</u> _
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 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		×

Part	Checklist of Required Schedules (continued)			
		r	Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		×
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	×	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
b	through 24d and complete Schedule K. If "No," go to line 25a	24a		×
c	Did the organization minest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	ļ	
Ç	to defease any tax-exempt bonds?	24c		1
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		×
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I.	25b		×
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		×
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		×
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		×
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		×
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		×
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		×
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		×
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		×
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		×
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	×	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		×
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		×
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.	35ь		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		×
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		×
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	38	×	
Part		[
	Check if Schedule O contains a response or note to any line in this Part V		<u> </u>	
-			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 68			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			生成的 交流的
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			
	REV 02/17/22 PRO	1c		(0000)
		rorm	n 990 (,ZUZU}

Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 38			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	· ×	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	×	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	×	—
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		×
b	If "Yes," enter the name of the foreign country >		12	
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		201	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		×
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		x
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	<u> </u>	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
04	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		×
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			N., 8
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
4	and services provided to the payor?	7a		×
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<u> </u>
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	10		
	required to file Form 8282?	7c		×
	If "Yes," indicate the number of Forms 8282 filed during the year	2	141 - 17-	×
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	Bash.	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	76 7f		×
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		^
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	79 7h		
	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the		2422	
	sponsoring organization have excess business holdings at any time during the year?	<u>8</u>	1997	, Malanda S
	Sponsoring organizations maintaining donor advised funds.	•	10-200	81/11/0
	Did the sponsoring organization make any taxable distributions under section 4966?	9a	Sach	al an thair an thair I
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9a 9b		
	Section 501(c)(7) organizations. Enter:	an	19. C.S.	S. See. 1
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
	Section 501(c)(12) organizations. Enter:			197
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		1923	10.22
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	12a	1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.). 1942 - (194
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?			<u> 1869 (</u>
	Note: See the instructions for additional information the organization must report on Schedule O.	<u>13a</u>	9419-01-0	<u></u>
	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 13b			
		10.25		
	Enter the amount of reserves on hand 13c Did the organization receive any payments for indoor tanning services during the tax year?	14-	0.0368 	<u>-53978</u>
		14a		×
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			\sim
	excess parachute payment(s) during the year?	15	i det a	
	If "Yes," see instructions and file Form 4720, Schedule N.			<u>satat</u> i
	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	2023SA	
·			1998	

Page 5

Parl	VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O.	v, and See i	for a	"No"
	Check if Schedule O contains a response or note to any line in this Part VI			. 🗙
Sect	ion A. Governing Body and Management		1	.
1a	Enter the number of voting members of the governing body at the end of the tax year $ 1a $ 15		Yes	No
	If there are material differences in voting rights among members of the governing body, or	4		:
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain on Schedule O.		1.1.1.1.1	
b	Enter the number of voting members included on line 1a, above, who are independent . 1b 14	1		3
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		×
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		×
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		×
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5	<u>†</u>	×
6	Did the organization have members or stockholders?	6	×	·
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	×	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	×	pa ki t
b	Each committee with authority to act on behalf of the governing body?	8b	×	
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		×
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven		ode.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		x
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?			
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b		
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	11a	X	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	×	i de analiadad de la calega de
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	x	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	12c	x	
13	Did the organization have a written whistleblower policy?	13	×	
14	Did the organization have a written document retention and destruction policy?	14	×	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	×	
b	Other officers or key employees of the organization	15b	×	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	<u> </u>	S.S.S.S. Additional	×
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its		11. 1	
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Secti	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► VA			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-1 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.	" (Sect	tion 5	01(c)
	Own website Another's website I Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict o and financial statements available to the public during the tax year.			olicy,
20	State the name, address, and telephone number of the person who possesses the organization's books and re-	cords	►	
	The Organization, 1806 Robert Fulton Drive, Reston, VA 20191 (703)860-4000			
	REV 02/17/22 PRO	Form	n 990	(2020)

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

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

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

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

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week	box, office	unles er an	Pos neck ss pe d a d	erson lirect	e than o is both or/trust	n an j tee)	(D) Reportable compensation from the	(E) Reportable compensation	(F) Estimated amount of other
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Mackie V. Spradley	3.00			-						·
President		×		×				0.	0.	0.
(2) Scott R. Sheehan President-Elect	3.00	×		×				0.	0.	0.
(3) Kathleen D. Sanz Immediate Past President	3.00	×		×				0.	0.	0.
(4) Susan Barre Eastern Division President	1.00	x						0.	0.	0.
(5) Karen Salvador North Central Division President	1.00	×						0.	0.	0.
(6) Tom Muller Nortrhwest Division President	1.00	×						0.	0.	0.
(7) Sonja Z. M. Williams Southern Division President	1.00	×						0.	0.	0.
(8) Anne Dawson Southwestern Division President	1.00	×					i	0.	0.	0.
(9) Renee Shane-Boyd Western Division President	1.00	×						0.	0.	0.
(10) Keith Hodgson Eastern Division Immediate Past President	1.00	×						0.	0.	0.
(11) Judith Bush North Central Division Immediate Past President	1.00	×						0.	0.	0.
(12) Scott Barnes Northwest Division Immediate Past President	1.00	×						0.	0.	0.
(13) Dian P. Eddleman Southern Division Immediate Past President	1.00	×						о.	0.	0.
(14) Michael Raiber Southwestern Divison Immediate Past President	1.00	×						0.	0.	0.

REV 02/17/22 PRO

Page 7

Page 8 Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (C)Position (A) (B) (D)(E)(F) (do not check more than one Name and title Average Reportable Reportable Estimated amount box, unless person is both an hours compensation compensation officer and a director/trustee) of other per week from the from related compensation Individual Officer ę Former Institutional trustee бęу Highest compensated employee (list any organization organizations from the director hours for (W-2/1099-MISC) (W-2/1099-MISC) employee organization and related related organizations ganizations trustee below dotted line) (15) Samuel Tsugawa 1.00 Western Divison Immediate Past President x Ο. 0. Ο. (16) Michael Brownell 1.00 Eastern Division President-Elect x 0. 0. 0. (17) Richard Tengowski 1.00 North Central Division President-Elect х 0. 0. Ο. (18) Dusty Molyneaux 1.00 × Northwest Division President-Elect 0. 0 0. (19) Christopher Woodside 37.50 Executive Director × 247,929. 0. 0. (20) Kim Henry 37.50 x Director of Governance and Administrative 93,841. 0. 0. (21) Chaudlier Moore 37.50 Chief Financial Officer х 173,989. 0 Ο. (22) Elizabeth W Lasko 37.50 × Director of Membership and Marketing Communications 127,481. 0. Ο. (23) Kristen Rencher 37.50 Director of Business Development, Strategic Initiatives, and Student Programs × 124,369. 0. Ο. (24) (25) Subtotal 1h ► 767,609. Ο. 0. c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c) 767,609. ► 0. Ο. Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of 2 reportable compensation from the organization > 4 Yes No Did the organization list any former officer, director, trustee, key employee, or highest compensated 3 employee on line 1a? If "Yes," complete Schedule J for such individual 3 × For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the 4 organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such 4 × Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual 5 for services rendered to the organization? If "Yes," complete Schedule J for such person 5 × Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) (B) (C) Name and business address Description of services Compensation APLUSIFY, 7250 Standish Pl#265, Rockville, MA 20855 Resolve technical issues 754,466. Gaylord Palms Hotel, 6000 W Osceola Pkwy, Kissimmee, FL 34746 Meeting cancellation fee 475,000. DesignData, 610 Professional Dr, #102, Gaithersburg, MA 20879 IT services 268,096. Anthem BC&BS, P.O.Box 11792, Newark, NC 07101 Employee insurance coverage 202,009.

Form 990 (2020)

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization > 4

Form 9	990 (202	20)								Page 9
Part	t VIII									
		Check if Schedule	0 cc	ontains a re	espor	nse or note to a	ny line in this Pa	art VIII		<u>· · · 〔</u>
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts its	1 a	Federated campaig	ns .		1a					
irar oun	þ	Membership dues			1b	4,200,411.	la serie de la companya de		· · ·	
s, G	C .	Fundraising events			1c		-		· · ·	
Gift Iar	d	·····			1d		-			· ·
imi,	e f	Government grants All other contribution			1e					
er S		and similar amounts n			11	122,616.				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributio			<u> </u>	122/010.				
ontr od O		lines1a-1f			1g	\$				
<u>a Č</u>	h	Total. Add lines 1a-	-1f.	<u> </u>		🕨	4,323,027.			
-						Business Code				
vice	2a	Publication r	evei	nue		900099	7,560.	7,560.	0.	0.
ue n	b	Sponsorships				900099	16,500.	0.	0.	16,500.
Jram Sen Revenue	C	Advertising r	evei	nue		541800	165,414.	59,082.	106,332.	0.
Program Service Revenue	d e									
roć	f	All other program se	ervice	revenue				<u> </u>		
<u>а</u>	g	Total. Add lines 2a-				└ ▶	189,474.			
	3	Investment income					100/1111			<u>, i tre di tre di </u>
	-	other similar amoun					1,183,423.	0.	0.	1,183,423.
	4	Income from investr								
	5	Royalties	<u></u>	·		<u></u>	94,882.	0.	0.	94,882.
				(i) Rea	1	(ii) Personal				
	6a	Gross rents	<u>6a</u>							
	b	Less: rental expenses	6b							
	c d	Rental income or (loss) Net rental income o		<u> </u>		L		<u>Astra - Gastas</u>	<u>an da an ann an an an An</u> tair I	<u>9668-330314</u>
	7a			(i) Securi	ties	(ii) Other		i de la factoria de la composición de l La composición de la c	1955 - Set Schutz (1955)	
	7a	sales of assets		(7 + + + + + + + + + + + + + + + + + + +						
		other than inventory	7a							
e	b	Less: cost or other basis								
enne		and sales expenses .	7b							
Sev.	c	Gain or (loss)	7c			<u> </u>				
er	d	Net gain or (loss)	•••	• • •	·	···· · · •	a an airteacht agus achtaí ins a	l Receiver and there a	and the first of the second	· 金融 法法律性 医结核 医门内 计引起 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997
Other Rev	8a			Indraising						
Ũ		events (not including of contributions rep		d on line						
		1c). See Part IV, line			8a					
	b	Less: direct expense			8b					
	с	Net income or (loss)	from	n fundraisin	g eve	nts 🕨			<u></u>	24 - 198 - 198 - 198 - 198 - 198 - 198 - 198 - 198 - 198 - 198 - 198 - 198 - 198 - 198 - 198 - 198 - 198 - 198
	9a	Gross income f								
		activities. See Part I			9a					
	b	Less: direct expense			9b	<u> </u>			<u>是</u> 1998年7月24日	
	c	Net income or (loss)			Cavitie	es►				
	10a	Gross sales of ir returns and allowan		ory, less	10a	412,975.				
	Ь	Less: cost of goods		•••	10a	161,010.				
	c	Net income or (loss)				1	251,965.	251,965.	0.	0.
S		. ,				Business Code		33333 <u>7</u> 34		
eon	11a	Paycheck Protectic	n Pre	ogram proc	eeds	900099	510,300.	510,300.	0.	0.
scellanec Revenue		Meetings and			5	900099	169,811.	169,811.	0.	0.
cel tev	l _	Miscellaneous	ind	come		900099	161,296.	161,296.	0.	0.
Miscellaneous Revenue	d	All other revenue	•••		• •	L	041 407		an the second	
-	12	Total. Add lines 11a			· · · ·	· · · · ·	841,407.		106 222	1 204 205
<u> </u>	12	Total revenue. See	mştr	actions	•••	REV 02/17/22	6,884,178.	1,160,014.	106,332.	1,294,805. Form 990 (2020)

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Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX . . . Do not include amounts reported on lines 6b, 7b, (A) Total expenses (B) (C) (D) Fundraising Program service expenses Management and general expenses 8b, 9b, and 10b of Part VIII. expenses 1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 2 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign 3 organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members 4 Compensation of current officers, directors, 5 trustees, and key employees 6 Compensation not included above to disgualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . 7 Other salaries and wages 2,881,754. 1,602,096. 1,222,124 57,534. 8 Pension plan accruais and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 9 Payroll taxes 10 Fees for services (nonemployees): 11 Management а 271,984. 88,438. 168,730. 14,816. Legal b c Accounting d е Professional fundraising services. See Part IV, line 17 승규는 가슴을 가운 것을 가슴을 가운 것을 다 가슴을 다. f Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column q (A) amount, list line 11g expenses on Schedule O.) 12 Advertising and promotion Office expenses 13 Information technology 14 15 Royalties 16 Occupancy 17 Travel 12,389. 12,209. 180. Ο. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings . 81,984. 73,753. 8,231. 0. 20 Interest Payments to affiliates 21 22 Depreciation, depletion, and amortization . 23 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 O.) Professional services а 1,496,080. 483,448. 975,023. 37,609. Production and printing b 288,801. 287,573. 593. 635. Postage and mailing С 91,034. 89,511. 1,523. Ο. d Other 660,566. 635,878. 24,603. 85. e All other expenses 25 Total functional expenses. Add lines 1 through 24e 5,784,592. 3,272,906. 2,401,007. 110,679. 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)

REV 02/17/22 PRO

Page 11 Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year Cash-non-interest-bearing 1 629,271 1 723,814. 2 Savings and temporary cash investments . . 2 116,071. . . 116,212. 3 Pledges and grants receivable, net 3 4 4 116,245. 124,753. 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 6 Loans and other receivables from other disgualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) $\ .$ 6 7 Assets 7 8 Inventories for sale or use 8 Prepaid expenses and deferred charges . . 9 9 89,834 160,178. 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D . . . 10a 1,205,929. Less: accumulated depreciation 10b h 787,523. 533,784. 10c 418,406. 11 Investments-publicly traded securities 8,340,656. 11 7,514,096. 12 Investments-other securities. See Part IV, line 11 . 12 13 Investments-program-related. See Part IV, line 11 . . . 13 14 Intangible assets 14 Other assets. See Part IV, line 11 15 15 16 Total assets. Add lines 1 through 15 (must equal line 33) . 9,826,002. 16 9,057,318. 17 Accounts payable and accrued expenses 899,522. 17 677,998. . . . 18 18 Deferred revenue 19 1,867,823. 1,477,975. 19 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D . . 21 22 Loans and other payables to any current or former officer, director, Liabilities trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 510,300. 462,500. 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 25 1,801,115. 592,017. 26 Total liabilities. Add lines 17 through 25 5,078,760. 26 3,210,490. Organizations that follow FASB ASC 958, check here > 🗵 Balances Q. 1 and complete lines 27, 28, 32, and 33. 27 Net assets without donor restrictions . . 4,652,300. 27 5,752,026. 28 Net assets with donor restrictions 94,942 28 94,802. Net Assets or Fund Organizations that do not follow FASB ASC 958, check here > and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 29 Paid-in or capital surplus, or land, building, or equipment fund 30 30 31 Retained earnings, endowment, accumulated income, or other funds . . . 31 32 4,747,242. 32 5,846,828. Total liabilities and net assets/fund balances _____ 33 9,826,002. 33 9,057,318.

REV 02/17/22 PRO

Des			F	Page 12
Pai	t XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI			- 🗆
1	I ofal revenue (must equal Part VIII, column (A), line 12)		884,	178.
2	Total expenses (must equal Part IX, column (A), line 25)		784,	
3	Revenue less expenses. Subtract line 2 from line 1		099,	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4		747,	
5	Net unrealized gains (losses) on investments		1111	272.
6	Donated services and use of facilities	1		
7	Investment expenses	<u> </u>		
8	Prior period adjustments	┣┈───		
9	Other changes in net assets or fund balances (explain on Schedule O)	<u> </u>		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line	<u> </u>		
_	32, column (B))	5,	846,	828.
Pari	All Financial Statements and Reporting			<u> </u>
	Check if Schedule O contains a response or note to any line in this Part XII			. 🗂
			Yes	No
1	Accounting method used to prepare the Form 990: 🗌 Cash 🛛 Accrual 🗌 Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain			
	Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	. 2a		
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled			
	reviewed on a separate basis, consolidated basis, or both:	'		
	Separate basis Consolidated basis Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	. 2b	4	×
	If "Yes," check a box below to indicate whether the financial statements for the year were audited o	- <u>-</u>		
	separate basis, consolidated basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis	23, 22, 24 17, 27 17, 27		
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh		석 하는 영상	
-	the audit, review, or compilation of its financial statements and selection of an independent accountant?			
	and selection of an independent accountant?	. 2c	×	

If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

Single Audit Act and OMB Circular A-133? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits .

REV 02/17/22 PRO

Form **990** (2020)

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3a

Зb

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(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Bevenue Service

(E)

Total

Open to Public

OMB No. 1545-0047

2020

N

	Internal Revenue Service Form 990 for instructions and the latest information.							Inspection	
	Name of the organization Employer identification number								
			ation For M					52-6045043	
Pa	rt I	Reason	for Public Cha	rity Status. (A	Il organizations mus	st compl	ete this	part.) See instruct	ions.
	e organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1								
1		nurch, co abaal daa	nvention of churc	nes, or associat	ion of churches descr	ribed in s	ection 17	70(b)(1)(A)(i).	
2					(Attach Schedule E (F ganization described				
4		redical re	search organizati	on onerated in c	onjunction with a hos	nital desc	n 170(0)(Sribed in (1)(A)(III). section 170/b)(1)(A)	(iiii) Entor the
•	hos	pital's na	me, city, and stat	te:	organization with a rios	pital acot			Am). Enter the
5	☐ An sec	organizat tion 170(ion operated for b)(1)(A)(iv). (Corr	the benefit of a plete Part II.)	college or university	owned o	or operate	ed by a governmen	tal unit described in
6	🗋 A fe	ederal, sta	te, or local gover	mment or govern	mental unit described	d in secti	on 170(b)(1)(A)(v).	
7	des	cribed in	section 170(b)(1)(A)(vi). (Comple	'		n a gover	mmental unit or from	m the general public
8)(1)(A)(vi). (Complete				
9	or u univ	iniversity / /ersity:	or a non-land-gra	ant college of agr	d in section 170(b)(1) riculture (see instruction	ons). Ente	er the nar	me, city, and state o	f the college or
10	rece	port from	activities related gross investmen	to its exempt fu	e than 331/3% of its sunctions, subject to ce related business taxa 75. See section 509(3	ertain exc ble incon	eptions; a ne (less s	and (2) no more thar ection 511 tax) from	n 221/20/2 of ite
	🗌 An d	organizati	on organized and	d operated exclu	sively to test for publi	c safety.	See sect	ion 509(a)(4).	
12	🗌 An	organizati	on organized and	l operated exclus	sively for the benefit o	f, to perfe	orm the fi	unctions of, or to ca	rry out the purposes
	Che	eck the bo	x in lines 12a thro	ough 12d that dea	ns described in sect scribes the type of su	oporting o	organizati	on and complete line	es 12e, 12f, and 12g.
а	÷	the suppo	orted organization	n(s) the power to	l, supervised, or contr regularly appoint or e ete Part IV, Sections	elect a ma	iority of t	rted organization(s), the directors or trust	, typically by giving tees of the
b		control or	management of	the supporting o	ed or controlled in co rganization vested in V, Sections A and C	the same	with its s persons	supported organizat that control or man	ion(s), by having age the supported
с	\Box .	Type III fu	unctionally integ	rated. A suppor	ting organization oper	rated in c	onnectio	n with, and function	ally integrated with,
					ns). You must comp				
d	t	that is not	functionally inte	grated. The orga	pporting organization nization generally mu omplete Part IV, Sec	st satisfy	a distribu	ution requirement ar	orted organization(s) Id an attentiveness
e		Check thi	s box if the orgar	ization received	a written determinatio	on from tl	ne IRS th	at it is a Type I, Typ	e II, Type III
	1	functional	ly integrated, or	Type III non-func	tionally integrated sup	oporting	organizat	ion.	- ·
f			er of supported (• • • • • • •	• • •	• • •		·
g				1	oorted organization(s).			1	I
	(i) Name	of supporte	d organization	(îi) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in you	rganization µr governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
						Yes	No	1	
(A)			_						
(B)									· · · · · · · · · · · · · · · · · · ·
(C)									· · · · · · · · · · · · · · · · · · ·
(D)					÷				

Schedule A (Form 990 or 990-EZ) 2020

Par	t II Support Schedule for Organiz (Complete only if you checked t Part III. If the organization fails t	he box on lin	e 5, 7, or 8 of	f Part I or if th	ne organizatio	on failed to gu	i) alify under
Sect	tion A. Public Support	- 4				eter art m.j	
	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")					(0) 2020	() Fotal
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				1		
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)						
6	Public support. Subtract line 5 from line 4						
	ion B. Total Support	· · · · · · · · · · · · · · · · · · ·					
	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7	Amounts from line 4				···-		
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
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.)						
11	Total support. Add lines 7 through 10					a an	
12	Gross receipts from related activities, etc.					12	
13	First 5 years. If the Form 990 is for the	organization's	first, second	, third, fourth,	or fifth tax ye	ar as a sectior	n 501(c)(3)
	organization, check this box and stop her			<u></u>			> 🗆
	on C. Computation of Public Suppor					· · · · · · · · · · · · · · · · · · ·	
14	Public support percentage for 2020 (line 6		-		1	14	%
15	Public support percentage from 2019 Sch	iedule A, Part I	I, line 14	· · · · ·		15	%
16a	33 ¹ / ₃ % support test-2020. If the organized box and stop here. The organization qual	zation did not	cneck the box				
b							
b	33 ¹ / ₃ % support test—2019. If the organiz this box and stop here. The organization	cualifies as a r	CRECK a DOX O	n line 13 or 16	a, and line 15	is 331/3% or mo	ore, check
170							
17a	10%-facts-and-circumstances test —20 10% or more, and if the organization me Part VI how the organization meets the f organization	eets the facts- facts-and-circu	and-circumsta	ances test, che t. The organiz	eck this box a ation qualifies	nd stop here.	Explain in
b	10%-facts-and-circumstances test — 20 15 is 10% or more, and if the organization in Part VI how the organization meets the organization) 19. If the orga n meets the fac facts-and-circ	nization did n cts-and-circun cumstances te	ot check a bo: nstances test, st. The organi	x on line 13, 1 check this bo zation qualifies	and stop her as a publicly s	a, and line e. Explain supported
18	Private foundation. If the organization of	did not check	a box on line	13, 16a, 16b,	17a, or 17b,	check this box	and see
<u></u> .	instructions	• • • • •	• • • •	. <i></i>	<u></u>		<u>··</u> ► 🗖

Schedule A (Form 990 or 990-EZ) 2020

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.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2016 (b) 2017 (c) 2018 (d) 2019 (e) 2020 (f) Total

	der veer (er fierel veer he simply in)	(-) 0010	1 // 20047		(1
	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2	2020	(f) Total
1	Gifts, grants, contributions, and membership fees							
~	received. (Do not include any "unusual grants.")	5,496,492.	5,548,201.	5,513,331.	4,824,331.	4,200	,411.	25,582,766.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities					1		
	furnished in any activity that is related to the							
	organization's tax-exempt purpose	2,035,943.	2,179,528.	1,808,150.	1,646,798.	582	.786.	8,253,205.
3	Gross receipts from activities that are not an							
	unrelated trade or business under section 513							
4	Tax revenues levied for the					1		
	organization's benefit and either paid to							
	or expended on its behalf							
_	-							
5	The value of services or facilities							
	furnished by a governmental unit to the							
	organization without charge							
6	Total. Add lines 1 through 5	7,532,435.	7,727,729.	7,321,481.	6,471,129.	4,783	,197.	33,835,971.
7a	Amounts included on lines 1, 2, and 3		1	-			<u>.</u>	
	received from disqualified persons							
b	Amounts included on lines 2 and 3		<u></u>		·			
~	received from other than disqualified							
	persons that exceed the greater of \$5,000							
	or 1% of the amount on line 13 for the year							
	5							
	Add lines 7a and 7b	-						
8	Public support. (Subtract line 7c from							
	line 6.)							33,835,971.
Secti	on B. Total Support							
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2	020	(f) Total
9	Amounts from line 6	7,532,435.	7,727,729.					33,835,971.
10a	Gross income from interest, dividends,			, ,	_ <u>, ,</u>	-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,	00,000,011
	payments received on securities loans, rents,							
	royalties, and income from similar sources	349,894.	255,991.	305,121.	202 071	1 4 2 0	CO1	0 700 670
b	Unrelated business taxable income (less	549,094.	200,991.	305,121.		1,439	,601.	2,732,678.
D.	section 511 taxes) from businesses							
	acquired after June 30, 1975							
c	Add lines 10a and 10b	349,894.	255,991.	305,121.	_382,071.	1,439	,601.	2,732,678.
11	Net income from unrelated business							
	activities not included in line 10b, whether						l	
	or not the business is regularly carried on	22,152.	15,992.	0.	21,734.		ł	59,878.
12	Other income. Do not include gain or				0277011			
	loss from the sale of capital assets							
	(Explain in Part VI.)							
13	Total support. (Add lines 9, 10c, 11,	·						
10		7 004 401			6 00 0 00 0			
		7,904,481.	7,999,712.	7,626,602.	6,874,934.	6,222	,798.	36,628,527.
14	First 5 years. If the Form 990 is for the							
	organization, check this box and stop he		<i>.</i>	<u>.</u>	<u> </u>	• •	<u> </u>	►
Secti	on C. Computation of Public Suppor							
15	Public support percentage for 2020 (line 8					15		92.38 %
16	Public support percentage from 2019 Sch	nedule A, Part	III, line 15			16		95.57 %
Secti	on D. Computation of Investment Inc	come Perce	ntage					
17	Investment income percentage for 2020 (by line 13. colu	mn (f))	17		7.46 %
18	Investment income percentage from 2019					18		4.18 %
19a	33 ¹ / ₃ % support tests-2020. If the organ						1 331/29	
100	17 is not more than 33 ¹ / ₃ %, check this box	and ston here	The organization	on qualifies as a	a publiciv suppr	orted or	nanizati	on b ro
b	33 ¹ / ₃ % support tests – 2019. If the organiz							
u								
- -	line 18 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization 🕨 🔲							
20	Private foundation. If the organization di			, 19a, or 19b, c	heck this box	and see	: instru	ctions 🕨 🗌
		RE	/ 02/17/22 PRO		Sch	edule A (Form 990	0 or 990-EZ) 2020

Supporting Organizations

Part IV

	(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, compl and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Pa	ete Se	ectior	ıs A
	Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete	te Par	t V.)	ele
Sect	tion A. All Supporting Organizations			
4			Yes	No
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.	1		
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).	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.	2 3a		
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.	3b		
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.	3c		:
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.	4a		
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.	4b		
С	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.	4c		
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?	5a 5b		
C	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
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 .	6		
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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L. (Form 990 or 990-EZ).	8		
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 .	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>	9b		<u> </u>
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c	an a	
10a	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>	10a		
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.)	10a 10b		
	Schedule A (Form	<u> </u>	90-EZ)	2020

REV 02/17/22 PRO

Schedule A (Form 990 or 990-EZ) 2020

Part IV Supporting Organizations (continued)

- Has the organization accepted a gift or contribution from any of the following persons? 11 a A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?
 - b A family member of a person described in line 11a above?
 - c A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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).

Section D. All Type III Supporting Organizations

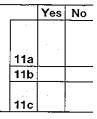
- Did the organization provide to each of its supported organizations, by the last day of the fifth month of the 1 organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of 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?
- Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported 2 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).
- 3 By reason of the relationship described in line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.

Section E. Type III Functionally Integrated Supporting Organizations

- Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
- a The organization satisfied the Activities Test. Complete line 2 below.
- **b** The organization is the parent of each of its supported organizations. *Complete line 3 below.*
- c The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).
- Activities Test. Answer lines 2a and 2b below. 2
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.
- Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each b of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Schedule A (Form 990 or 990-EZ) 2020

		-
	Yes	No
2		
8		



Yes

1

2

No

	Yes	No
1		
	Yes	No
	Yes	No

	Yes	No
_2a		
2b		
3a		
	1295 - 1 1 297 - 1 2 201 - 1	
Зb		

Page 5

Part V

Sect	tion 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	······································	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		<u>i na kata kata kata kata kata kata kata k</u>
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		·····
Secti	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 emergency temporary reduction (see instructions).			
7	Check here if the current year is the organization's first as a non-function	6		

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

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

Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990-EZ) 2020

Part	V Type III Non-Functionally Integrated 509(a)(a)	3) Supporting Organ	izations (continue	d)	
Sect	tion D—Distributions				Current Year
	Amounts paid to supported organizations to accomplish	exempt purposes		1	
2	Amounts paid to perform activity that directly furthers exponentiations				
	organizations, in excess of income from activity	- 		2	
3	Administrative expenses paid to accomplish exempt pure	poses of supported orga	anizations	3	
4	Amounts paid to acquire exempt-use assets			4	· ····
5	Qualified set-aside amounts (prior IRS approval required		t VI)	5	····
6	Other distributions (describe in Part VI). See instructions.	· · · · · · · · · · · · · · · · · · ·		6	
7 8	Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to whic	h the executive is us		7	
	(provide details in Part VI). See instructions.	in the organization is re-	sponsive	8	
9	Distributable amount for 2020 from Section C, line 6			9	
_10	Line 8 amount divided by line 9 amount			10	
Sect	ion E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2020	าร	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020 (reasonable cause required — <i>explain in Part VI</i>). See instructions.				
3	Excess distributions carryover, if any, to 2020			5	
а	From 2015				
b	From 2016				
с	From 2017				
d	From 2018				
е	From 2019				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2020 distributable amount				······································
<u>i</u>	Carryover from 2015 not applied (see instructions)		STREET STREET		Solidon and a star of
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				E CARLES CARLES
4	Distributions for 2020 from Section D, line 7: \$				
а	Applied to underdistributions of prior years	Rés à Bandas			SCARADA PART
b	Applied to 2020 distributable amount				
C	Remainder. Subtract lines 4a and 4b from line 4.	,			
5	Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI.</i> See instructions.				
6	Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j and 4c.				
8	Breakdown of line 7:	Second La Martena			
а	Excess from 2016			1	
b	Excess from 2017				
c	Excess from 2018				
d	Excess from 2019	Station of the Ma	YUMEDROOM-51:		18882098300
e	Excess from 2020				

Schedule A (Form 990 or 990-EZ) 2020

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

*	

SCHEDULE C Political Campaign and Lobbying Activities							OMB No. 1545-0047		
Department of the Treasury Internal Revenue Service For Organizations Exempt From Income Tax Under section 501(c) and section 527 Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. Op Go to www.irs.gov/Form990 for instructions and the latest information.									
	If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then								
			Complete Parts I-A and B. Do not cor						
			on 501(c)(3)) organizations: Complete F	Parts I-A and C belo	w. Do not co	mplete Part I-B.			
	*		nplete Part I-A only.		r				
			5," on Form 990, Part IV, line 4, or For that have filed Form 5768 (election und						
			that have NOT filed Form 5768 (election						
If the o		wered "Yes	s," on Form 990, Part IV, line 5 (Proxy						
), or (6) orga	anizations: Complete Part III.						
	of organization					Employer identif	ication number		
			For Music Education			52-604504			
Part	I-A Comp	olete if th	e organization is exempt und	er section 501(c) or is a s	section 527 or	ganization.		
1			f the organization's direct and in- npaign activities")	direct political ca	mpaign act	tivities in Part IV	. (See instructions for		
2			y expenditures (See instructions) .			🕨 💲			
3			cal campaign activities (See instrue						
Part			e organization is exempt und						
1			excise tax incurred by the organiza						
2			excise tax incurred by organizatior	-					
3			ed a section 4955 tax, did it file Fo	rm 4720 for this ye	ear?		. 🗌 Yes 🗌 No		
4a b	Was a correction If "Yes," descri						. 🗌 Yes 🗌 No		
Part			e organization is exempt und	er section 501(c), except	section 501(c)	(3)		
1			ly expended by the filing organiz	h			(0).		
	activities					► \$			
2			filing organization's funds contrib						
3	-		expenditures. Add lines 1 and 2.						
4							. Yes No		
5									
	(a) Name		(b) Address	(c) EIN	filing or	unt paid from ganization's none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0		
(1)									
(2)				· · · · · · · · · · · · · · · · · · ·					
(3)									
(4)									
(5)									
(6)									

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. BAA REV 02/17/22 PRO

Schedule C (Form 990 or 990-EZ) 2020

Schedule C (Form 990 or 990-EZ) 2020

Par	t II-A Complete if the organization section 501(h)).	n is exempt under section 501(c)(3) and file	d Form 5768 (el	ection under
	address, EIN, expenses, and	gs to an affiliated group (and list in Part IV each aff share of excess lobbying expenditures). ed box A and "limited control" provisions apply.	iliated group mem	ber's name,
	Limits on Lobb (The term "expenditures" me	ying Expenditures eans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a		public opinion (grassroots lobbying)	9,293.	· · · · ·
b	i se indepining experiance to innaction	a legislative body (direct lobbying)	0.	· · · · ·
C	Total lobbying expenditures (add lines 1a	and 1b)	9,293.	
d	- and analytic pulpedo oxpondical co	0.		
e	Total exempt purpose expenditures (add	lines 1c and 1d)	9,293.	
f	Lobbying nontaxable amount. Enter t	he amount from the following table in both		
	columns.		1,859.	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e.		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
	Over \$17,000,000	\$1,000,000.		
g	Grassroots nontaxable amount (enter 259		465.	
h	Subtract line 1g from line 1a. If zero or les		8,828.	
i	Subtract line 1f from line 1c. If zero or les		7.434	
j	If there is an amount other than zero or reporting section 4911 tax for this year?	on either line 1h or line 1i, did the organization	file Form 4720	Yes 🛛 No

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

		Lobbying Expenditures During 4-Year Averaging Period						
	Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total		
2a	Lobbying nontaxable amount					· · · · · · · · · · · · · · · · · · ·		
b	Lobbying ceiling amount (150% of line 2a, column (e))							
с	Total lobbying expenditures							
d	Grassroots nontaxable amount							
e	Grassroots ceiling amount (150% of line 2d, column (e))							
f	Grassroots lobbying expenditures			, , , , , , , , , , , , , , , , , , ,				

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REV 02/17/22 PRO

Schedule C (Form 990 or 990-EZ) 2020

Schedule C (Form 990 or 990-EZ) 2020

Part II-B	Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768
	(election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed		(a)		(b)	
	iption of the lobbying activity.	Yes	No	Amount	
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			2.1.2	
c	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			hann	
i	Other activities?				
j	Total. Add lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		· ·		
b	If "Yes," enter the amount of any tax incurred under section 4912	1.1		- 1999 - X 1997 - 19	
с	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			Contraction of the Contraction of the	
Part)(5), c	or se	ction	

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3		

5	Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section i01(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."
---	---

1	Dues, assessments and similar amounts from members	1
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	
а	Current year	2a
		<u>2a</u>
b	Carryover from last year	2b
С		2c
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the	
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying	
	and political expenditure next year?	4
5	Taxable amount of lobbying and political expenditures (See instructions)	5

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Part IV	m 990 or 990-EZ) 2020 Supplemental Information (continued)	Page 4
I GILLY		

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		.
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		······································

Schedule C (Form 990 or 990-EZ) 2020

SCHEDULE D (Form 990) 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. > Internal Revenue Service > Go to www.irs.gov/Form990 for instructions and the latest information.		OMB No. 1545-0047 2020 Open to Public Inspection			
	of the organization				ification number
Nat	ional Assoc	iation For Music Educatio		52-604504	
Par			sed Funds or Other Similar Fund	s or Accou	<u>s</u>
	Comple	ete if the organization answered "	Yes" on Form 990. Part IV. line 6.		
	· · ·		(a) Donor advised funds	(b) Fund	is and other accounts
1	Total number a	t end of year			
2		e of contributions to (during year)			·····
3	Aggregate valu	e of grants from (during year)			
4		e at end of year			
5	Did the organi	zation inform all donors and donor a	advisors in writing that the assets hel	ld in donor a	dvised
6	Did the organiz only for charita	zation inform all grantees, donors, an ble purposes and not for the benefit	organization's exclusive legal control? d donor advisors in writing that grant of the donor or donor advisor, or for	funds can be any other pu	e used irpose
Par		vation Easements.			
- ar		te if the organization answered "	(es" on Form 990 Part IV line 7		
1		onservation easements held by the o			,,
-	 Preservation Protection c 	of land for public use (for example, recreation of natural habitat			important land area storic structure
2	Complete lines	2a through 2d if the organization held he last day of the tax year.	d a qualified conservation contribution	1 I	f a conservation
а	Total number o	f conservation easements		. 2a	
b	Total acreage r	estricted by conservation easements		. 2b	+ 1 4 m
c	Number of con	servation easements on a certified his	storic structure included in (a)	. 2c	
d	Number of cor	nservation easements included in (c	acquired after 7/25/06, and not or	na	· · · · · · · · · · · · · · · · · · ·
_		5		2d	
3	tax year 🕨		erred, released, extinguished, or term	inated by the	organization during the
4 5	Does the orga	es where property subject to conserv nization have a written policy rega enforcement of the conservation ease	urding the periodic monitoring, inspe	ection, handli	ing of · · ① Yes □ No
6			ing, handling of violations, and enforcing	conservation e	
7		nses incurred in monitoring, inspecting	, handling of violations, and enforcing c	onservation ea	asements during the year
8	Does each cons	servation easement reported on line 2)(h)(4)(B)(ii)?	(d) above satisfy the requirements of se	ection 170(h)(
9	In Part XIII, des	cribe how the organization reports co	nservation easements in its revenue a	nd expense s	• •
	balance sheet,	and include, if applicable, the text of	the footnote to the organization's finar	ncial statemer	its that describes the
		accounting for conservation easement			
Part	-	tations Maintaining Collections te if the organization answered "Y	of Art, Historical Treasures, or O 'es" on Form 990, Part IV, line 8.	ther Simila	r Assets.
1a	of art, historica	I treasures, or other similar assets h	ASC 958, not to report in its revenue neld for public exhibition, education, the its financial statements that describe	or research i	n furtherance of public
b	art, historical tre provide the follo	easures, or other similar assets held for owing amounts relating to these items		earch in furthe	erance of public service,
	(i) Revenue inc	luded on Form 990, Part VIII, line 1		>	\$
	(ii) Assets included in Form 990, Part X			\$	
2	It the organizat	ion received or held works of art, r	historical treasures, or other similar a	issets for fina	incial gain, provide the
		nts required to be reported under FAS			
a					\$
			· · · · · · · · · · · · · · · · · · ·	🕨	\$
For Pag BAA	perwork Reductio	on Act Notice, see the Instructions for F	orm 990. REV 02/17/22 PRO		Schedule D (Form 990) 2020

Schedule D (Form 990) 2020 Page 2 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) Part III Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its 3 collection items (check all that apply): Public exhibition а d Loan or exchange program Scholarly research e 🗌 Other _____ h Preservation for future generations С Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part 4 XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes . No Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not 1a 🗌 Yes 🗌 No If "Yes," explain the arrangement in Part XIII and complete the following table: b Amount С 1c d Additions during the year 1d ę Distributions during the year 1e f 1f 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? No No b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII . Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back Beginning of year balance . 1a 94,942. 93,457. 92,597. 91,584. 91,694. Contributions ь Net investment earnings, gains, and С losses 10. 1,635. 1,860. 2,013. 1,890. đ Grants or scholarships Other expenditures for facilities and programs 150. 150. 1,000. 1,000. 2,000. Administrative expenses f g End of year balance 94,802. 94,942. 93,457. 92,597. 91,584. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment > % Permanent endowment Ь Term endowment 🕨 С The percentages on lines 2a, 2b, and 2c should equal 100%. Are there endowment funds not in the possession of the organization that are held and administered for the 3a organization by: Yes No (i) Unrelated organizations 3a(i) (ii) Related organizations 3a(ii) b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated (d) Book value (investment) (other) depreciation 1a Land 0. 0. b Buildings Leasehold improvements С d Equipment 1,205,929. 787,523. 418,406. е Other Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) . . <u>. .</u> . > 418,406. REV 02/17/22 PRO BAA Schedule D (Form 990) 2020

Part VII	Investments-Other Securities.			
	Complete if the organization answered "Yes" on For	rm 990, Part IV, li	ne 11b. See Form 99	0, Part X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value		of valuation: /ear market value
(1) Financia	I derivatives			
(2) Closely I	neld equity interests			
(3) Other				
(A)				
(B)				····
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Colu Part VIII	mn (b) must equal Form 990, Part X, col. (B) line 12.) . ► Investments—Program Related.			
	Complete if the organization answered "Yes" on For	m 990, Part IV, li	<u>ne 11c. See Form 99</u>	0, Part X, line 13.
<u> </u>	(a) Description of investment	(b) Book value		of valuation: rear market value
(1)				
(2)				
(3)				
(4)				
(5)	·····			
(6)			"Į	
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets.			
	Complete if the organization answered "Yes" on For	m 990, Part IV, lir	1e 11d. See Form 99	
(4)	(a) Description			(b) Book value
(1)		······		
(2)				
(3)				
(4)				
(5)				
.,				
(7) (8)		······································		*
(9)	**************************************			
	mn (b) must equal Form 990, Part X, col. (B) line 15.)			
Part X	Other Liabilities.	* * * * * * * *		
I CITE X	Complete if the organization answered "Yes" on For	m 990 Part IV lir	ne 11e or 11f. See Fr	orm 000 Part Y
	line 25.	000, i aitiv, II		mi oou, raita,
1.	(a) Description of liability		· · · · · · · · · · · · · · · · · · ·	(b) Book value
(1) Federal in				(b) DOOK VAUG
(2) Defer:				94,690.
	red gain on sale of building			497,327.
(4) Margin				497,327.
(5)				
(6)			_	
(7)		· · · · · · · · · · · · · · · · · · ·		
(8)		· · · · · · · · · · · · · · · · · · ·		
(9)	· · · · · · · · · · · · · · · · · · ·			····
	mn (b) must equal Form 990, Part X, col. (B) line 25.)		· · · · · · · · · · · · · · · · · · ·	592,017.
	uncertain tax positions. In Part XIII, provide the text of the footn	ote to the organizatio	n's financial statements	that reports the
	s liability for uncertain tax positions under FASB ASC 740. Check			

Schedule D (Form 990) 2020

BAA

Par	t XI Reconciliation of Revenue per Audited Financial Statements With Revenue per	r Return	l.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		<u> </u>
1	Total revenue, gains, and other support per audited financial statements	1	7,045,188.
2 a	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a b	Net unrealized gains (losses) on investments	· [
	Donated services and use of facilities	_	
c d	Recoveries of prior year grants 2c Other (Describe in Part XIII.) 2d		
e	Other (Describe in Part XIII.) 2d Add lines 2a through 2d		
3	Subtract line 2e from line 1	_2e	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	3	7,045,188.
a			
b	Other (Describe in Part XIII.) 4a	-	
c	Add lines 4a and 4b		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	4c 5	5 045 100
	XII Reconciliation of Expenses per Audited Financial Statements With Expenses p	or Rotu	7,045,188.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		[[].
1	Total expenses and losses per audited financial statements	1	E 045 600
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		5,945,602.
а	Donated services and use of facilities		
b	Prior year adjustments	-	
с	Other losses	-	
d	Other (Describe in Part XIII.)	-	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	E 04E 600
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		5,945,602.
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
с	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	5,945,602.
Part	XIII Supplemental Information.	<u> </u>	<u> </u>
2; Part 	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2 XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional i	nformatic	n.
	· · · · · · · · · · · · · · · · · · ·		

REV 02/17/22 PRO

Schedule D (Fo	rm 990) 2020	Page 5
Part XIII	Supplemental Information (continued)	

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		·

Schedule D (Form 990) 2020

	IEDULE J	Comp	ensation Information	1	OMB No.	1545-0	0047
(Fori	m 990)	For certain Officers, Dir	ectors, Trustees, Key Employees, and ompensated Employees	Highest	20	20	<u> </u>
_		Complete if the organiza	tion answered "Yes" on Form 990, Par	t IV, line 23.			
Depart Interna	ment of the Treasury I Revenue Service	► Go to www.irs.gov/For	Attach to Form 990. m990 for instructions and the latest inf	formation.	Open t		
	of the organization			Employer identificatio			<u>è la c</u>
		iation For Music Educati	.on	52-6045043			
Par	Questio	ns Regarding Compensation			<u>.</u>		
1a	Check the app 990, Part VII, Se	ropriate box(es) if the organization p ection A, line 1a. Complete Part III to	rovided any of the following to or for provide any relevant information regar	a person listed on Fol	m 🔤	Yes	No
	First-class of Travel for co	or charter travel ompanions ification and gross-up payments	 Housing allowance or residenc Payments for business use of p Health or social club dues or in 	e for personal use personal residence itiation fees			
		y spending account	Personal services (such as mai	•			
b	If any of the b or reimbursem explain	oxes on line 1a are checked, did nent or provision of all of the ex-	the organization follow a written po penses described above? If "No,	licy regarding payme " complete Part III	nt to		
					1.00		
2	Did the organ directors, trust 1a?	ees, and officers, including the CE	or to reimbursing or allowing exp O/Executive Director, regarding the	enses incurred by a items checked on lir	all ne 2		
3	organization's (related organiz: —	CEO/Executive Director. Check all t ation to establish compensation of	tion used to establish the compensa hat apply. Do not check any boxes f he CEO/Executive Director, but exp 	or methods used by a			
		on committee compensation consultant other organizations	 ☑ Written employment contract □ Compensation survey or study ☑ Approval by the board or comp 	ensation committee			
4	During the year organization or	, did any person listed on Form 990 a related organization:	, Part VII, Section A, line 1a, with rea	spect to the filing			
a b	Participate in or	r receive payment from a suppleme	l payment?		4a 4b	Alatalitika A	×
c	Participate in or If "Yes" to any o	r receive payment from an equity-ba of lines 4a-c, list the persons and p	ased compensation arrangement? . rovide the applicable amounts for ea	ach item in Part III.	4c		×
5	For persons lis	01(c)(3), 501(c)(4), and 501(c)(29) c sted on Form 990, Part VII, Sect contingent on the revenues of:	rganizations must complete lines ion A, line 1a, did the organizatio	5-9. on pay or accrue an	у		
а	The organizatio	n?			5a		×
b	Any related orga If "Yes" on line	anization? 5a or 5b, describe in Part III.	· · · · · · · · · · · · · ·	· · · · <i>· · · ·</i>	5b		×
6	compensation o	contingent on the net earnings of:	on A, line 1a, did the organizatic		y		
a b	Any related orga	anization?	· · · · · · · · · · · · · · · ·	· · · · · · · ·	<u>6a</u> 6b		× ×
7		6a or 6b, describe in Part III. ted on Form 990, Part VII. Sectic	n A, line 1a, did the organization	provide ppy pontive			
8	payments not d	escribed on lines 5 and 6? If "Yes,"	describe in Part III		7		x
~	to the initial c	contract exception described in I	Regulations section 53.4958-4(a)(3	 if "Yes," describ · · · · · · · · · · 	8		<u>×</u>
9	If "Yes" on line Regulations sec		ow the rebuttable presumption pr		n 9		
	perwork Reductio	on Act Notice, see the Instructions for	Form 990.		dule J (For	m 990)	2020
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Instructions, or row (ii). Do not use any market or rounes on rounes or rounes or rounes on rounds for the total and the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.	r eac	building that aren t	ist equal the total amo	rart vii. ount of Form 990, Pa	rt VII, Section A, line	1a, applicable colurr	n (D) and (E) amount	s for that individual.
		(B) Breakdown c	of W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontavahla	(E) Total of achimen	(E) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	(U) Nontaxable benefits	<pre>(E) lotal of columns (B)(I)-(D)</pre>	 (r) Compensation in column (B) reported as deferred on prior Form 990
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1 Executive Director	€	0.	0.	0.	0.		0.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Chaudlier Moore	€	173,989.	0.	0.	0.		173,989.	
2 Chief Financial Officer	E	0.	0	0.	.0	0.	0	0.
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Schedule J (Form 990) 2020

REV 02/17/22 PRO

16 BAA

Schedule J (Form 990) 2020 Part III Supplemental Information	Page 3
Provide the information, explanation, or descriptions required for any additional information.	Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
BAA REV 02/17	REV 02/17/22 PRO Schedule J (Form 990) 2020

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

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



OMB No, 1545-0047

Employer identification number

52-6045043

National Association For Music Education

Pt VI, Line 6: Explanation of classes of members or shareholders: NAFME has

45000 active voting members.

Pt VI, Line 7a: How members or shareholders elect governing body: Members use

an electric voting system to govern actions.

Pt VI, Line 7b: Decisions of governing body approval by members or shareholders:

Changes in NAFME bylaws require voting by active members.

Pt VI, Line 11b: Process for review of Form 990: The Form 990 is first reviewed

by the Chief Financial Officer along with the preparer (CPA Firm). The Form 990

is then reviewed by the Executive Director. The Form 990 is then made available

to the Finance Committee for review. The Form 990 is then made available to the

National Executive Board for review. After all reviews are completed and no changes

are necessary, the Form 990 is filed with the Internal Revenue Service.

Pt VI, Line 12c: Process for annually monitoring conflict of interest policy:

All board members agree to declare conflicts of interest between their personal

their advantage or that of their friends, relatives or other third parties, and

or professional life and their position on the board, avoid using their board

membership or NAFME's staff, services, equipment, resources, or property for

abstain from voting or discussion when appropriate, all in accordance with NAFME's

conflict of interest policy. Pocedures for monitoring and enforcing conflict

on interest policy: The Board of Directors are responsible for self-governance including the investigation of any claims of misconduct made about a director

and disciplinary action for any claims of misconduct found to be valid. The board

may modify these procedures for reviewing board member conduct from time to time.

All members of the board consent to the implementation of the then current procedures

if any claims of misconduct are made against them. 1) Complaints: Complaints

Schedule O (Form 990 or 990-EZ) 2020	Page 2
Name of the organization National Association For Music Education	Employer identification number 52-6045043
about any officer or director may be made to the President or a	ny other officer
or director of NAFME. Anyone receiving a complaint shall promtl	y forward it to
the President for investigation. Complaints about the President	shall be promtly
forwarded to the immediate Past President or, in the absence of	the immediate
past president, to any other past president on the board. 2) Con	nfidentiality:
All complaints of misconduct will be kept confidential except to	o the necessary
to conduct a thorough investigation. 3) Material violation: A ma	aterial violation
of the code of conduct is one that results in harm to NAFME or i	its affiliates.
4) Retaliation prohibited: Direct or indirect retaliation of any	y kind by NAFME
or its officers, directors, employees, members, or agents agains	st any individual
who makes, initiates or is involved in making of a complaint is	strictly prohibited.
This prohibition on retaliation shall be strictly enforced by th	ne board. Complaints
made with knowledge that they are false are strictly prohibited.	This prohibition
on making of knowingly false complaints shall be strictly enforce	ed by the board.
5) Initial determination: Upon receipt and priliminary review of	each complaint,
the president may conclude, in the President's sole discretion,	that the complaint:
(A) contains factually unreliable or insufficient information, o	or (B) is patently
frivolous or trivial. In such cases, the President may determine	that the complaint
does not constitute a potentially actionable complaint that woul	d justify bringing
it before the committee for determination of whether there has b	een a material
violation of the code of conduct. If so, such commplaint shall be	e dismissed without
prejudice by the President, and the President shall provide writ	ten notice to
the person who submitted the complaint of its disposition. All so	uch preliminary
dispositions of complaints by the President shall be immediately	reported in
writting to all members of the committee. 6) Notice of investigat	tion: If a complaint
is deemed by the President on a preliminary basis to be a potent:	ially actionable
complaint, the President shall provide a written notice to the d	irector whose

Schedule O (Form 990 or 990-EZ) 2020	Page 2
Name of the organization	Employer identification number
National Association For Music Education	52-6045043
conduct has been called into question, advising the director that a	an investigation
is been initiated. The President shall also provide written notice	to the person
who submitted the complaint that the complaint is being reviewed by	y the committee.
7) Review of complaint: For each complaint that the President belie	eves is potentially
actionable, the President shall authorize an investigation into its	s specific
facts or circumstances to whatever extent is necessary in order to	clarify, expand
or corrobarate the information provided in the complaint and in ord	der to assist
the committee in determining whether charges should be brought agai	inst the director.
The committee may be assisted by NAFME staff, legal counsel and out	side experts,
as needed, so long as all persons involved in the investigation ag	ree to maintain
the complete confidentially of the investigation. The committee or	its agents
may contact the person who submitted the complaint, the director wh	no is the subject
of the charge, or any other other persons who may have knowledge of	f the facts
and circumstances surrounding the complaint. 8) The committee deter	mination:
The committee shall either dismiss the complaint with prejudice or	prepare written
charges against the director. Written charges shall explain the all	leged conduct
and expalin why the conduct constitutes grounds for disciplinary ac	ction. The
committee shall also produce a written report with the results of i	ts investigation.
The person who made the complaint shall be notified of the committe	ee's determination
but shall not be provided with a copy of any written charges or the	e report. The
director in question shall be notified of the committee's determina	ation. Copies
of written charges and the comiittee's report shall be provided to	the President,
the committee members, the director against whom the charges were f	iled. 9) Hearing:
If the committee recommends charges be brought, it shall hold a hea	aring, in person,
by telephone or video conference. The President shall present the c	committee's
report with the assistance of NAFME's legal counsel. The charged of	lirector may
present a defense and may be represented by legal counsel, at his c	or her own

Schedule O (Form 990 or 990-EZ) 2020	Page 2
Name of the organization National Association For Music Education	Employer identification number 52-6045043
expense. The President shall determine the rules of evidence that	shall apply
to the hearing and may limit the presentation of oral or written to	estimony by
witnesses. The charged director may waive the right to a hearing in	n which case
the committee may deliberate based on its report. 10) Determination	n of violation:
Upon completion of its investation and the hearing, the committee s	shall determine
by majority vote, upon a prepoderance of the evidence, whether orb	not there
has been a violation of the code of conduct and whether the board	impose sanctions.
If the committee find there has been a violation, the committee sha	all recommend
an appropriate sanction. The committee's written recommendation sha	all be presented
to the board. 11) Imposition of sanctions: The board shall determin	ne, by majority
vote, the appropriate sanction to be imposed on any director found	to have violated
the NAFME code of conduct. Sanctions may include a written reprimar	d, censure,
suspension from board membership for a period of time, or permanent	expulsion
from the board (if the bylaws give the board the authority to remov	e a director).
12) Resignation: If a board member who is the subject of a complain	t voluntarily
resigns in writing his or her position on the board during the pend	ency of a
complaint, the complaint shall be dismissed without prejudice and w	ithout any
further action by the committee or the board. In the event of a res	ignation,
the person who made the complaint shall be notified in writing of t	he fact and
date of the resignation and that the board has dismissed the compla	int without
prejudice.	
Pt VI, Line 15a: Process for determining compensation of officers:	The National
Executive Board reviews and approves compensation of the Executive	Director.
Salary increase is linked to an appraisal conducted by the Executiv	e Committee
with input from and consultation with the National Executive Board.	
Pt VI, Line 19: Governing documents and the conflict of interest po	licy are
made available upon request. Annual audited financial statements an	d tax returns

Schedule O (Form 990 or 990-EZ) 2020	Page 2
Name of the organization	Employer identification number
National Association For Music Education	52-6045043
are on NAFME's website.	
Pt VI, Line 15b: Process for determining compensation of officers:	The National
Executive Board reviews and approves compensation of the Executive	Director.
Salary increase is linked to an appraisal conducted by the Executiv	ve Committee
with input from and consultation with the National Executive Board	·····
Pt III, Line 4d:	
Expenses: \$1,061,097 including grants of: \$0 Revenue: \$0	
Description: Publications:	
Other Programs: Governance:	
Strategic relationship development:	
	`

SCHEDULE R (Form 990)	Related Organizations and Unrelated Partnerships ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.	izations and n answered "Yes"	d Unrelated on Form 990, Part	I Partnership t IV, line 33, 34, 35b, 3	S 6, or 37.	<u> </u>	OMB No. 1545-0047 20 20
Department of the Treasury Internal Revenue Service	 Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information. 	Attach to Form 990. vv/Form990 for instructions a	Form 990. tructions and the	latest information.		U	Open to Public Inspection
Name of the organization National Assoc	ization Association For Music Education					Employer ic 5260	Employer identification number 52–6045043
Part I Identific	Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.	e organization a	"nswered "Yes	on Form 990, Par	t IV, line 33.		
Name, 4	(a) Name, address, and EIN (if applicable) of disregarded entity	Primar	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
<pre>(1) Solution Music 1806 Robert Fulto (2)</pre>	Ausic Group LLC 46-5187533 Fulton Drive Reston VA 20191	Consultin	Consulting services V	VA	0.	0.	NAFME
(3)							
.(4)							
(5)							
(9)							
Part I Identific	Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.	Complete if the letax year.	e organization a	answered "Yes" or	Term 990, Par	t IV, line 34, bea	cause it had
Name, a	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	s Direct controlling	g Section 512(b)(13) controlled entity?
(1)							Yes No
(2)							
(3)							
(4)							
(5)							
(9)							
(2)							
For Paperwork Reducti	For Paperwork Reduction Act Notice, see the Instructions for Form 990. BAA	REV 02/17/22 PRO	2 PRO			Schedule	Schedule R (Form 990) 2020

Schedule R (F	Schedule R (Form 990) 2020													Page 2
Part III	Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.	Related Organiz	ations Taxable organizations	e as a Partne treated as a p	rship. Co partnersh	omplete if the ip during the	e organizati tax year.	on answe	red "Y	es" on F	orm 990	, Part IV,	line 34	
Name, relƙ	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity		Predominant Predominant income (related, unrelated, excluded from tax under tax under sections 512 – 514)	() Share of total income	(g) Share of end-of- year assets		(h) Dispreportionate C arr	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	() General or 20 managing -1 partner?		(k) Percentage ownership
(1)									Yes	Ŷ		Yes	2	
(2)										-				
(3)														
(4)													-	
(5)														
(9)								ţ.		_				
(2)														
Part IV	Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization ar line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.	Related Organize had one or more	itions Taxable related organi	ble as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, anizations treated as a corporation or trust during the tax year.	ation or d as a co	Trust. Comp	lete if the c trust durin	organizati g the tax y	on ans /ear.	vered "\	Yes" on F	orm 990	, Part	, ∠
Name	(a) Name, address, and EIN of related organization	d organization	(b) Primary activity	(c) Legal domicile (state or foreign country)		(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)		(f) Share of total income		(g) Share of end-of-year assets	(h) Percentage ownership		(i) Section 512(b)(13) controlled entity?
(1)				_	_								Yes	°N N
(2)									-					
(3)														
(4)														
(5)					_									
(9)											- 			
(2)														
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Schedule R Part V	Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.	ed "Yes" on Form	090, Part IV, line	34, 35b, or 36.		Page 3
edcba de	Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. 1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	more related orgar	iizations listed in Par	ts II–IV?	Yes 1a 1c 1c 1e	2
ע סב	Dividends from related organization(s)	· · · · · · · · · · · · · · · · · · ·		$\begin{array}{cccccccccccccccccccccccccccccccccccc$	÷ ÷ ÷ ÷	
×_ E c o o t	Lease of facilities, equipment, or other assets from related organization(s) Performance of services or membership or fundraising solicitations by related organization(s) . Performance of services or membership or fundraising solicitations by related organization(s)	· · · · · · · ·			· · · · · · · · · · · · · · · · · · ·	
	Other transfer of cash or property to related organization(s)	Plete this line, inclu Transaction	Amount involved	1q 1r 1r 1r 1r 1s 1s 1s	19 1r 1s ion threshol	ved ds.
(1)		type (a-s)				
(5) (4) (3)						
(6) BAA	REV 02/17/22 PRO			Schedule F	Schedule R (Form 990) 2020	2020

Schedule R (Form 990) 2020 Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.	Taxable as a	Partnership.	Complete if t	he organiza	ation answered	l "Yes" on Fol	m 990, Pe	urt IV, line 37.		Page 4
Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.	l entity taxed as rganization. See	a partnership t instructions re	through which the second se	he organizati ion for certai	ion conducted r in investment pa	nore than five p utnerships.	ercent of it	s activities (mea	sured by to	tal assets
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (retated, unrelated, excluded from tax under sections 512514)	(e) Are all partners section organizations?	(f) Share of total income	(g) Share of end-of-year assets		(I) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene Mana partu	(k) Percentage ownership
(1)				Yes No			Yes No		Yes No	
(2)					-					
(3)										
(4)										
(5)				-						
(6)										
(7)										
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(16)										
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	Supplemental Information	Page 5
Part VII	Provide additional information for responses to questions on Schedule R. See instructions.	
	designs on Schedule R. See Instructions.	
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Schedule R (Form 990) 2020