aan

PUBLIC DISCLOSURE COPY **

Return of Organization Exempt From Income Tax

| - 01 | | | Do not enter social security numbers on this form as | - | | .10115) | Open to Public | | | |
|--------------|----------------------|---------------------------------|--|---------------|--------------------------|------------|-----------------------------|--|--|--|
| Depa | artment nal Rev | of the Treasury enue Service | Go to www.irs.gov/Form990 for instructions and t | the latest ir | nformation. | | Inspection | | | |
| Α | For th | e 2022 calend | ar year, or tax year beginning SEP 1, 2022 and | ending A | UG 31, 2023 | | | | | |
| В | Check if applicat | C Name of | organization | | D Employer iden | tifica | tion number | | | |
| | Addr chan | ess ge ACADEM | Y OF MUSIC OF PHILADELPHIA, INC. | | | | | | | |
| F | Name chan | 9 | usiness as | | 23-15011 | 1159 | | | | |
| | Initia returi | | E Telephone num | ber | | | | | | |
| | Final returi | ONE SO | (215) 893- | | 1 | | | | | |
| | termi ated | n- City or to | G Gross receipts \$ | | 5,504,710. | | | | | |
| | Amer returi | nded DUTT AD | ELPHIA, PA 19107 | | H(a) Is this a group | o retu | ırn | | | |
| | Appli tion | F Name at | nd address of principal officer: MATIAS TARNOPOLSKY | | for subordina | tes? | Yes X No | | | |
| | pend | SAME AS | C ABOVE | | H(b) Are all subordinate | es inclu | ded? Yes No | | | |
| <u>1</u> | Tax-ex | cempt status: | X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) | or 527 | If "No," attach | n a lis | t. See instructions | | | |
| | Webs | 101 | SEMBLEARTSPHILLY.ORG | | H(c) Group exemp | tion r | number | | | |
| | | f organization: | X Corporation Trust Association Other | L Year | of formation: 1956 | MS | State of legal domicile: FL | | | |
| P | art I | Summary | | | | | | | | |
| ø | 1 | | e the organization's mission or most significant activities: TO RAI | SE FUNDS | TO RESTORE AND | | | | | |
| & Governance | | | HE 166-YEAR-OLD ACADEMY OF MUSIC. | | | | | | | |
| ern | 2 | Check this box | | sed of more | 1 | - 1 | | | | |
| Š | 3 | | | | | 3 | 18 | | | |
| <u>«</u> | 4 | | ependent voting members of the governing body (Part VI, line 1b) | | | 4 | 15 | | | |
| ies | 5 | | of individuals employed in calendar year 2022 (Part V, line 2a) | | 5 | 55 | | | | |
| Activities | 6 | Total number | of volunteers (estimate if necessary) | | | 6 | 0. | | | |
| Ğ | / a | | d business revenue from Part VIII, column (C), line 12 | | | 7a 7b | 0. | | | |
| | " | Net unrelated | business taxable income from Form 990-T, Part I, line 11 | | Prior Year | ' b | Current Year | | | |
| | 8 | Contributions | and grants (Part VIII, line 1h) | | 2,417,14 | 5. | 5,221,433. | | | |
| Revenue | 9 | | and grants (Part VIII, line 1h) ce revenue (Part VIII, line 2g) | | | 0.1 | 0. | | | |
| š | 10 | | come (Part VIII, column (A), lines 3, 4, and 7d) | | 1 | 0. | 0. | | | |
| æ | 11 | | (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | | 14,86 | 7. | -342,929. | | | |
| | 12 | | - add lines 8 through 11 (must equal Part VIII, column (A), line 12) | | 2,432,01 | 2. | 4,878,504. | | | |
| | 13 | | nilar amounts paid (Part IX, column (A), lines 1-3) | | 20,00 | 0. | 20,000. | | | |
| | 14 | | o or for members (Part IX, column (A), line 4) | | | 0. | 0. | | | |
| ý | 15 | Salaries, other | compensation, employee benefits (Part IX, column (A), lines 5-10) | | 561,21 | 2. | 561,369. | | | |
| nse | 16a | Professional fu | undraising fees (Part IX, column (A), line 11e) | | ı | 0. | 0. | | | |
| Expenses | . b | | ng expenses (Part IX, column (D), line 25) | 926. | | | | | | |
| ш | 17 | Other expense | es (Part IX, column (A), lines 11a-11d, 11f-24e) | | 3,422,16 | | 2,951,556. | | | |
| | 18 | Total expense | s. Add lines 13-17 (must equal Part IX, column (A), line 25) | | 4,003,37 | _ | 3,532,925. | | | |
| | 19 | Revenue less | expenses. Subtract line 18 from line 12 | | -1,571,36 | _ | 1,345,579. | | | |
| s or | 3 | | | Ве | ginning of Current Yea | _ | End of Year | | | |
| sets | | Total assets (F | | | 29,102,89 | | 27,513,081. | | | |
| As | 1 21 | Total liabilities | (Part X line 26) | 1 | 196.59 | 0.1 | 274 281. | | | |

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.

| , | reg arria oomiprocor . | book and or proparer (earler aran errice | in jud bacca on an information of information propare | or mad amy m | | | |
|------------|------------------------|--|---|--------------|-----------------|-----------|----|
| | | | | | | | |
| Sign | Signature of offi | icer | | | Date | | |
| - | MARIO MESTI | CHELLI, BD MEMBER/TREASURE | R | | | | |
| | Type or print na | me and title | | | | | |
| | Print/Type prepa | arer's name | Preparer's signature | Date | Check | PTIN | |
| Paid | RUSSLEE ARM | STRONG | | | self-employed | ₽00288383 | |
| Preparer | Firm's name | GRANT THORNTON ADVISORS LI | LC | | Firm's EIN 99- | 1856619 | |
| Use Only | Firm's address | 2001 MARKET STREET, SUITE | 700 | | | | |
| | | PHILADELPHIA, PA 19103 | | | Phone no. (215) | 561-4200 | |
| May the If | RS discuss this | return with the preparer shown abo | ve? See instructions | | | X Yes | No |

27,238,800.

28,906,305.

22 Net assets or fund balances. Subtract line 21 from line 20

Part II | Signature Block

Form **8868**

(Rev. January 2022)

Department of the Treasury Internal Revenue Service

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

File a separate application for each return.

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

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Type or Name of exempt organization or other filer, see instructions. Taxpayer identification number (TIN) print ACADEMY OF MUSIC OF PHILADELPHIA, INC. 23-1501159 File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date for filing your ONE SOUTH BROAD STREET, 14TH FLOOR return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions. PHILADELPHIA, PA 19107 Enter the Return Code for the return that this application is for (file a separate application for each return) **Application** Return **Application** Return Is For Is For Code Code Form 990 or Form 990-EZ Form 1041-A 01 08 Form 4720 (individual) 03 Form 4720 (other than individual) 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) Form 6069 05 11 Form 990-T (trust other than above) 06 Form 8870 12 Form 990-T (corporation) MARIO MESTICHELLI Telephone No. ▶ 215-893-1900 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this If it is for part of the group, check this box JULY 15, 2024 I request an automatic 6-month extension of time until , to file the exempt organization return for the organization named above. The extension is for the organization's return for: calendar year , and ending AUG 31, 2023 ► X tax year beginning SEP 1, 2022 Final return If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Change in accounting period 3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and 0. estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions

223841 04-01-22

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

Form 8868 (Rev. 1-2022)

| | 1990 (2022) ACADEMY OF MUSIC OF PHILADELPHIA, INC. | 23-1501159 | Page 2 |
|----|--|--------------------------|-------------|
| Pa | rt III Statement of Program Service Accomplishments | | |
| | Check if Schedule O contains a response or note to any line in this Part III | | Х |
| 1 | Briefly describe the organization's mission: | | |
| | THE ACADEMY'S PRIMARY EXEMPT PURPOSE IS TO RAISE FUNDS THROUGH THE | | |
| | RESTORATION AND PRESERVATION FUND TO RESTORE AND MAINTAIN THE | | |
| | 166-YEAR-OLD ACADEMY OF MUSIC, THE OLDEST KNOWN CONTINUOUSLY OPERATING | | |
| | OPERA HOUSE IN THE UNITED STATES. | | |
| 2 | Did the organization undertake any significant program services during the year which were not listed on the | | |
| | prior Form 990 or 990-EZ? | Yes | X No |
| | If "Yes," describe these new services on Schedule O. | | |
| 3 | Did the organization cease conducting, or make significant changes in how it conducts, any program services? | Yes | X No |
| | If "Yes," describe these changes on Schedule O. | | |
| 4 | Describe the organization's program service accomplishments for each of its three largest program services, as m | easured by expenses. | |
| | Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, | , the total expenses, ar | nd |
| | revenue, if any, for each program service reported. | | |
| 4a | (Code:) (Expenses \$235,366. including grants of \$) (Revenue | \$ | <u>0.</u>) |
| | THE ORGANIZATION'S PRIMARY PROGRAM SERVICE ACTIVITY IS TO RAISE FUNDS | | |
| | FOR THE RESTORATION OF THE ACADEMY OF MUSIC BUILDING THROUGH SPECIAL | | |
| | EVENTS AND A CAPITAL CAMPAIGN PROGRAM. COMBINED PROCEEDS ARE USED TO | | |
| | FUND NUMEROUS RESTORATION PROJECTS AS APPROVED BY THE ACADEMY BOARD. | | |
| | THE ACADEMY OF MUSIC BUILDING HAS BEEN DESIGNATED AS A NATIONAL | | |
| | HISTORIC LANDMARK AND THEREFORE ITS UPKEEP AND MAINTENANCE IS THE | | |
| | ORGANIZATION'S PRIMARY CONCERN. FOR THE YEAR ENDED AUGUST 31, 2023, THE | | |
| | RESTORATION PROJECTS INCLUDED RESTORATION OF THE BALCONY, AND FACADE | | |
| | LIGHTING UPGRADES. IN ADDITION, THE ACADEMY CONTINUED ITS MULTI-YEAR | | |
| | CAPITAL RENOVATIONS PROJECT VIA THE PILOT PROGRAM WHICH CONSISTED OF | | |
| | EVALUATION, ASSESSMENT AND DESIGN WORK. (CONTINUED IN SCH 0) | | |
| | | | |
| 4b | (Code:) (Expenses \$ | \$ |) |
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| 4c | (Code:) (Expenses \$ including grants of \$) (Revenue | \$ |) |
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| 4d | Other program services (Describe on Schedule O.) | | |
| | (Expenses \$ including grants of \$) (Revenue \$ |) | |
| 4e | Total program service expenses 235,366. | | 00 (|
| | | | |

Part IV Checklist of Required Schedules

| | | | Yes | No |
|-----|---|---|-----|--|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? | | | |
| | If "Yes," complete Schedule A | 1 | Х | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? See instructions | 2 | Х | |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for | | | |
| | public office? If "Yes," complete Schedule C, Part I | 3 | | х |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect | | | |
| - | during the tax year? If "Yes," complete Schedule C, Part II | 4 | | x |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or | | | |
| Ŭ | similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III | 5 | | x |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to | ٣ | | |
| U | provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I | 6 | | x |
| 7 | \cdot | - | | |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, | _ | | x |
| _ | 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 | | | x |
| | 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? | | | |
| | If "Yes," complete Schedule D, Part IV | 9 | | X |
| 10 | Did the organization, directly or through a related organization, hold assets in donor-restricted endowments | | | |
| | or in quasi endowments? If "Yes," complete Schedule D, Part V | 10 | X | |
| 11 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, | | | |
| | as applicable. | | | |
| а | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, | | | |
| | Part VI | 11a | Х | |
| b | Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total | | | |
| | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII | 11b | | Х |
| С | Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total | | | |
| | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII | 11c | | Х |
| d | Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in | | | |
| | Part X, line 16? If "Yes," complete Schedule D, Part IX | 11d | | Х |
| е | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | 11e | Х | |
| f | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses | | | |
| | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X | 11f | Х | |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes." complete | | | |
| | Schedule D, Parts XI and XII | 12a | Х | |
| b | Was the organization included in consolidated, independent audited financial statements for the tax year? | | | |
| | If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional | 12b | Х | |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | Х |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | | Х |
| b | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, | | | |
| | investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 | | | |
| | or more? If "Yes," complete Schedule F, Parts I and IV | 14b | | х |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any | | | |
| | foreign organization? If "Yes," complete Schedule F, Parts II and IV | 15 | | х |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to | <u> </u> | | |
| | or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV | 16 | | x |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, | <u>. </u> | | |
| •• | column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions | 17 | | x |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines | - ''- | | |
| 13 | | 18 | х | |
| 10 | 1c and 8a? If "Yes," complete Schedule G, Part II | 10 | | \vdash |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," | 40 | | x |
| 20- | complete Schedule G, Part III | 19 | | X |
| 20a | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H | 20a | | |
| b | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | | |
| 21 | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or | | v | |
| | domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II | 21 | Х | |

Form 990 (2022)

ACADEMY OF MUSIC OF PHILADE

Part IV Checklist of Required Schedules (continued)

| | · (continued) | | Yes | No |
|------------|---|------------|-----|-------------|
| 22 | Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on | | 100 | 110 |
| | Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III | 22 | | x |
| 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current | | | |
| | and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete | | | |
| | Schedule J | 23 | Х | |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the | | | |
| | last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete | | | |
| | Schedule K. If "No," go to line 25a | 24a | | Х |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| С | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease | | | |
| | any tax-exempt bonds? | 24c | | |
| 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 | | Х |
| b | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and | | | |
| | that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete | | | |
| | Schedule L, Part I | 25b | | X |
| 26 | Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current | | | |
| | or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% | | | |
| | controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II | 26 | | X |
| 27 | Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, | | | |
| | creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled | | | |
| | entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III | 27 | | X |
| 28 | Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, | | | |
| _ | 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 | 00- | | x |
| L | "Yes," complete Schedule L, Part IV | 28a 28b | | X |
| | A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV | 200 | | <u> </u> |
| C | A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If | 28c | | x |
| 29 | "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M | 29 | Х | |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation | _23 | | |
| 00 | contributions? If "Yes," complete Schedule M | 30 | | x |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I | 31 | | х |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete</i> | | | |
| - | Schedule N, Part II | 32 | | x |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations | | | |
| | sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I | 33 | | х |
| 34 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and | | | |
| | Part V, line 1 | 34 | Х | L |
| 35a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | Х | |
| | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity | | | |
| | within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 | 35b | Х | |
| 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 | | х |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization | | | |
| | and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI | 37 | | Х |
| 38 | Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? | | | |
| D - | Note: All Form 990 filers are required to complete Schedule O | 38 | Х | <u> </u> |
| Pai | | | | |
| | Check if Schedule O contains a response or note to any line in this Part V | | | X |
| | | | Yes | No |
| _ | Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 0 | | | |
| b | Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable | | | |
| С | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming | | | |
| | (gambling) winnings to prize winners? | 1c | gan | (2022) |
| 232004 | l 12-13-22 | rorm | 550 | (2022) |

| | 990 (2022) ACADEMY OF MUSIC OF PHILADELPHIA, INC. 23-150115 | 59 | Р | age 5 |
|-----|---|-----------|-----|----------|
| Par | Statements Regarding Other IRS Filings and Tax Compliance (continued) | | 1 | |
| | | | Yes | No |
| | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, | | | |
| | filed for the calendar year ending with or within the year covered by this return | | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | 2b | | |
| | Did the organization have unrelated business gross income of \$1,000 or more during the year? | 3a | | Х |
| 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 | | Х |
| | If "Yes," enter the name of the foreign country | | | |
| | See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). | | | |
| | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | <u>5a</u> | | X |
| | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | Х |
| | If "Yes" to line 5a or 5b, did the organization file Form 8886-T? | 5c | | <u> </u> |
| | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit | | | |
| | any contributions that were not tax deductible as charitable contributions? | <u>6a</u> | | Х |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts | | | |
| | were not tax deductible? | 6b | | |
| | Organizations that may receive deductible contributions under section 170(c). | | | |
| | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? | 7a | Х | |
| | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | Х | |
| | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required | | | |
| | to file Form 8282? | 7c | | Х |
| | If "Yes," indicate the number of Forms 8282 filed during the year | - | | |
| | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | | X |
| | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | | Х |
| _ | 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? | 7h | | |
| | Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the | | | |
| | sponsoring organization have excess business holdings at any time during the year? | 8 | | |
| | Sponsoring organizations maintaining donor advised funds. | | | |
| | Did the sponsoring organization make any taxable distributions under section 4966? | 9a | | |
| | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | 9b | | |
| | Section 501(c)(7) organizations. Enter: | | | |
| | 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 | - | | |
| | Section 501(c)(12) organizations. Enter: | | | |
| | Gross income from members or shareholders | | | |
| | | | | |
| | amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12a | | |
| | If "Yes," enter the amount of tax-exempt interest received or accrued during the year | IZa | | |
| | Section 501(c)(29) qualified nonprofit health insurance issuers. | | | |
| | Is the organization licensed to issue qualified health plans in more than one state? | 13a | | |
| | Note: See the instructions for additional information the organization must report on Schedule O. | 100 | | |
| | Enter the amount of reserves the organization is required to maintain by the states in which the | | | |
| | organization is licensed to issue qualified health plans | | | |
| | Enter the amount of reserves on hand | 1 | | |
| | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | | Х |
| | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O | 14b | | |
| | Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or | | | |
| | excess parachute payment(s) during the year? | 15 | | x |
| | If "Yes," see the instructions and file Form 4720, Schedule N. | | | |
| | Is the organization an educational institution subject to the section 4968 excise tax on net investment income? | 16 | | х |
| | If "Yes," complete Form 4720, Schedule O. | | | |
| | Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities | | | |
| | that would result in the imposition of an excise tax under section 4951, 4952 or 4953? | 17 | | |
| | | | | |

Form **990** (2022)

If "Yes," complete Form 6069.

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

| | Check if Schedule O contains a response or note to any line in this Part VI | | | | | X | | | | | |
|-----|---|----------|------------------------|---------|---------|-----|--|--|--|--|--|
| Sec | tion A. Governing Body and Management | | | | | | | | | | |
| | | | | | Yes | No | | | | | |
| 1a | Enter the number of voting members of the governing body at the end of the tax year | 1a | 1 | 3 | | | | | | | |
| | If there are material differences in voting rights among members of the governing body, or if the governing | | | | | | | | | | |
| | body delegated broad authority to an executive committee or similar committee, explain on Schedule O. | | | | | | | | | | |
| b | Enter the number of voting members included on line 1a, above, who are independent | 1b | 1 | 5 | | | | | | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship | with | any other | | | | | | | | |
| | officer, director, trustee, or key employee? | | | 2 | | х | | | | | |
| 3 | Did the organization delegate control over management duties customarily performed by or under the | | | | | | | | | | |
| | | | | 3 | | х | | | | | |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 99 | | | 4 | | Х | | | | | |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's asset | | | 5 | | Х | | | | | |
| 6 | | | | | | | | | | | |
| 7a | Did the organization have members, stockholders, or other persons who had the power to elect or app | | | | | | | | | | |
| | more members of the governing body? | | | 7a | х | | | | | | |
| b | Are any governance decisions of the organization reserved to (or subject to approval by) members, sto | | | | | | | | | | |
| | persons other than the governing body? | | * | 7b | х | | | | | | |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year | | | | | | | | | | |
| а | The governing body? | , | ŭ | 8a | х | | | | | | |
| b | Each committee with authority to act on behalf of the governing body? | | | 8b | Х | | | | | | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read | | | | | | | | | | |
| • | organization's mailing address? <i>If</i> "Yes," <i>provide the names and addresses on Schedule O</i> | | | 9 | | x | | | | | |
| Sec | tion B. Policies (This Section B requests information about policies not required by the Internal Rev | /enije | Code) | 1 - | l | | | | | | |
| | (This occuping reguests information about policies not required by the internal new | renae | Oodc./ | | Yes | No | | | | | |
| 10a | Did the organization have local chapters, branches, or affiliates? | | | 10a | | Х | | | | | |
| | If "Yes," did the organization have written policies and procedures governing the activities of such cha | | | | | | | | | | |
| | | • | , , | 10b | | | | | | | |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body | | | 11a | | х | | | | | |
| b | Describe on Schedule O the process, if any, used by the organization to review this Form 990. | | Ü | | | | | | | | |
| 12a | Did the organization have a written conflict of interest policy? If "No," go to line 13 | | | 12a | х | | | | | | |
| b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise | | | 12b | Х | | | | | | |
| С | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yo | | | | | | | | | | |
| | on Schedule O how this was done | , | | 12c | Х | | | | | | |
| 13 | Did the organization have a written whistleblower policy? | | | 13 | Х | | | | | | |
| 14 | Did the organization have a written document retention and destruction policy? | | | 14 | Х | | | | | | |
| 15 | Did the process for determining compensation of the following persons include a review and approval | | | | | | | | | | |
| | persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | - | • | | | | | | | | |
| а | The organization's CEO, Executive Director, or top management official | | | 15a | | х | | | | | |
| | Other officers or key employees of the organization | | | 15b | | Х | | | | | |
| | If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. | | | | | | | | | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement | nent w | rith a | | | | | | | | |
| | taxable entity during the year? | | | 16a | | Х | | | | | |
| b | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate | | | | | | | | | | |
| | in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organi | izatior | ı's | | | | | | | | |
| | exempt status with respect to such arrangements? | | | 16b | | | | | | | |
| Sec | tion C. Disclosure | | | | | | | | | | |
| 17 | List the states with which a copy of this Form 990 is required to be filedAL , AK , AZ , AR , CA , CT , DO | C,FL | ,IL,KS,KY,LA | | | | | | | | |
| 18 | Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and | d 990 | 9-T (section 501(c)(3) | s only) | availal | ole | | | | | |
| | for public inspection. Indicate how you made these available. Check all that apply. | | | | | | | | | | |
| | Own website X Another's website X Upon request Other (explain | | , | | | | | | | | |
| 19 | Describe on Schedule O whether (and if so, how) the organization made its governing documents, cor | nflict (| of interest policy, an | d finan | cial | | | | | | |
| | statements available to the public during the tax year. | | | | | | | | | | |
| 20 | State the name, address, and telephone number of the person who possesses the organization's boo | ks an | d records | | | | | | | | |
| | MARIO MESTICHELLI - 215-893-1900 | | | | | | | | | | |
| | ONE SOUTH BROAD STREET, 14TH FLOOR, PHILADELPHIA, PA 19107 | | | | | | | | | | |

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

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

X

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

| | Average hours per week | Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | | | | Reportable compensation from | (E) Reportable compensation from related | (F) Estimated amount of other |
|--|--|--|-----------------------|---------|--------------|---------------------------------|--------|---|---|--|
| | (list any hours for related organizations below line) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | the organization (W-2/1099-MISC/ 1099-NEC) | organizations (W-2/1099-MISC/ 1099-NEC) | compensation from the organization and related organizations |
| (1) MATIAS TARNOPOLSKY | 5.00 | 1 | | | | | | | | |
| BD MEMBER (PRESIDENT-POA) | 45.00 | Х | | Х | | | | 0. | 910,907. | 67,456. |
| (2) RYAN FLEUR | 5.00 | 1 | | | | | | | | |
| BD MEMBER/SECRETARY (EXEC-DIR POA) | 45.00 | Х | | Х | | | | 0. | 383,765. | 54,416. |
| (3) MARIO MESTICHELLI | 5.00 | l | | | | | | | | |
| BD MEMBER/TREASURER (CFO-POA) | 45.00 | Х | | Х | | | | 0. | 319,970. | 53,116. |
| (4) CAROLINE B. ROGERS | 10.00 | ∤ | | | | | | | _ | • |
| CHAIR (5) ADDITE K GGWARRERD | 6.00 | Х | | Х | | | | 0. | 0. | 0. |
| (5) ADELE K. SCHAEFFER CHAIR EMERITUS | 2.00 | ١,, | | ,, | | | | | _ | 0 |
| | 2.00 | Х | | Х | | | | 0. | 0. | 0. |
| (6) RALPH W. MULLER BOARD MEMBER (CO-CHAIR POA) | 15.00 | x | | х | | | | 0. | 0. | 0 |
| (7) MICHAEL ZISMAN | 5.00 | ^ | | ^ | | | | 0. | ٠. | 0. |
| BOARD MEMBER (CO-CHAIR POA) | 15.00 | x | | x | | | | 0. | 0. | 0. |
| (8) KATE ALLISON | 2.00 | | | | | | | 0. | · · | <u>.</u> |
| BOARD MEMBER | 0.00 | x | | | | | | 0. | 0. | 0. |
| (9) JAMES P. BRANDAU | 2.00 | | | | | | | • | • | <u>·</u> |
| BOARD MEMBER | 2.00 | x | | | | | | 0. | 0. | 0. |
| (10) LISA BETTINGER-BUCKINGHAM | 2.00 | | | | | | | | | |
| BOARD MEMBER | 0.00 | х | | | | | | 0. | 0. | 0. |
| (11) HARRY EDWARD HILL III | 2.00 | | | | | | | - | | |
| BOARD MEMBER | 0.00 | х | | | | | | 0. | 0. | 0. |
| (12) LINDA FYNES SIEGFRIED | 2.00 | | | | | | | | | |
| BOARD MEMBER | 0.00 | х | | | | | | 0. | 0. | 0. |
| (13) ANNE F. HAMILTON | 2.00 | | | | | | | | | |
| BOARD MEMBER | 0.00 | х | | | | | | 0. | 0. | 0. |
| (14) SCOTT S. JOHNSON | 2.00 | | | | | | | | | |
| BOARD MEMBER | 0.00 | х | | | | | | 0. | 0. | 0. |
| (15) TERESA C. KENNY | 2.00 | | | | | | | | | |
| BOARD MEMBER | 0.00 | х | | | | L | | 0. | 0. | 0. |
| (16) BRUCE G. LETO | 2.00 | | | | | | | | | |
| BOARD MEMBER | 2.00 | х | | | | L | | 0. | 0. | 0. |
| (17) JOHN H. MCFADDEN | 2.00 | | | | | | | | | |
| BOARD MEMBER | 2.00 | Х | | | | | | 0. | 0. | 0. |

232007 12-13-22 Form **990** (2022)

| ı aı | Section A. Officers, Directors, Trus | | oloy | ees, | | | ghes | st C | | , , | $\overline{}$ | | | |
|------|--|------------------------|--------------------------------|-----------------------|----------|--------------|---------------------------------|----------|---------------------------|-------------------------|-----------------|-------|--------------------|----------|
| | (A) | (B) Average | (C) Position | | | า | | (D) | (E) | | _ | (F) | 1 | |
| | Name and title | hours per | | not c | heck | more | than | | Reportable compensation | Reportable compensation | | | stimate nount (| |
| | | week | | | | | or/trus | | from | from related | | | other | |
| | | (list any | ctor | | | | | | the | organization | | | pensa | |
| | | hours for | or dire | ۵ | | | ted | | organization | (W-2/1099-MIS | | fr | om the | е |
| | | related | steec | ruste | | | ensa | | (W-2/1099-MISC/ | 1099-NEC) | · | _ | anizati | |
| | | organizations below | ıal tru | onal t | | oloyee | l wo a | | 1099-NEC) | | | | d relate | |
| | | line) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | | | | orga | anizatio | ons |
| (18) | JOHN R. SALER | 2.00 | = | = | 0 | × | Ξ ω | <u> </u> | | | | | | |
| BOAF | OARD MEMBER 0.00 | | | | | | | | 0. | | 0. | | | 0. |
| | | | | | | | | | | | | | | |
| | | | | | | | | - | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | _ | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | - | - | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| 1b | Subtotal | | | | <u> </u> | <u> </u> | | | 0. | 1,614, | 642. | | 174, | 988. |
| | Total from continuation sheets to Part VI | | | | | | | | 0. | | 0. | | | 0. |
| | Total (add lines 1b and 1c) | | | | | | | | 0. | 1,614, | 642. | | 174, | 988. |
| 2 | Total number of individuals (including but n | ot limited to th | ose | liste | ed at | oove | e) wh | no re | eceived more than \$100, | ,000 of reportable | е | | | |
| | compensation from the organization | | | | | | | | | | | — | Vaa | 0 |
| • | Did the average time list any favore office. | di 4 4 4 | 1 | | ! | | | . - : - | | la | | | Yes | No |
| 3 | Did the organization list any former officer, | - | | • | • | • | | _ | | • | | | | х |
| 4 | line 1a? If "Yes," complete Schedule J for s For any individual listed on line 1a, is the su | | | | | | | | | | | 3 | | |
| 4 | , | • | | | | | | | • | J | | 4 | х | |
| 5 | and related organizations greater than \$150 Did any person listed on line 1a receive or a | | | | | | | | | | | - | | |
| 3 | | • | | | | • | | | • | dual for services | | 5 | | х |
| Sec | rendered to the organization? If "Yes." comtion B. Independent Contractors | ipiete Schedule | 9 <i>J T</i> | or st | ıcn i | bers | son | | | | | 3 | | |
| 1 | Complete this table for your five highest co | mpensated inc | lepe | nde | nt co | ontra | acto | rs th | nat received more than \$ | S100,000 of comp | ——— pensatio | n frc | om | |
| | the organization. Report compensation for | the calendar ye | ear e | endir | ng w | ith o | or wi | ithin | the organization's tax y | ear. | | | | |
| | (A) | | | | | | | | (B) | _ | _ | (C | | |
| | Name and business | | | | | | | _ | Description of s | services | Cor | nper | nsatior | <u>n</u> |
| | ERSTICK-BORTHWICK COMPANY, 400 ST | ENTON | | | | | | | GONGEDIGET ON | | | | 266 | 721 |
| AVEN | UE, PLYMOUTH MEETING, PA 19462 | | | | | | | - 1 | CONSTRUCTION | | i | | 266, | /3I. |

ELLIOTT-LEWIS CORPORATION, 2900 BLACK LAKE PLACE, PHILADELPHIA, PA 19154 CONSTRUCTION 184,698.

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

Form **990** (2022)

Form 990 (2022) ACADEMY OF Part VIII Statement of Revenue

| | | | Check if Schedule O contains a | response o | or note to any lin | e in this Part VIII | | | |
|--|----|----------|---|--------------|-----------------------|---------------------|-------------------|------------------|---------------------------------|
| | | | | | , | (A) | (B) | (C) | (D) |
| | | | | | | Total revenue | Related or exempt | Unrelated | Revenuè excluded from tax under |
| | | | | | | | function revenue | business revenue | sections 512 - 514 |
| SS | 1 | _ | Federated campaigns | 1a | | | | | |
| Contributions, Gifts, Grants and Other Similar Amounts | | | Membership dues | 1b | | | | | |
| S S | | | Fundraising events | 1c | 599,846. | | | | |
| fts, | | | | 1d | 1,059,897. | | | | |
| ij gi | | | Related organizations | | 1,000,007. | | | | |
| ons, | | | Government grants (contributions) | 1e | | | | | |
| utic | | T | All other contributions, gifts, grants, and | 1 1 | 3 561 690 | | | | |
| ĕ | | | similar amounts not included above \dots | 1f | 3,561,690. 91,992. | | | | |
| ont | | _ | Noncash contributions included in lines 1a-1f | 1g \$ | , | E 221 422 | | | |
| O g | | n | Total. Add lines 1a-1f | | | 5,221,433. | | | |
| | | | | | Business Code | | | | |
| ce | 2 | а | | | | | | | |
| ervi | | b | | | | | | | |
| S | | С | | | | | | | _ |
| ran Sev | | d | | | | | | | _ |
| Program Service Revenue | | е | | | | | | | |
| <u>-</u> | | f | All other program service revenue . | | | | | | |
| | | g | Total. Add lines 2a-2f | | | | | | |
| | 3 | | Investment income (including divide | ends, intere | st, and | | | | |
| | | | other similar amounts) | | | | | | |
| | 4 | | Income from investment of tax-exer | | | | | | |
| | 5 | | Royalties | | | | | | |
| | | | | (i) Real | (ii) Personal | | | | |
| | 6 | а | Gross rents 6a | | | | | | |
| | | | Less: rental expenses 6b | | | | | | |
| | | | Rental income or (loss) 6c | | | | | | |
| | | | Not rental income or (less) | | | | | | |
| | | | ` ' | Securities | (ii) Other | | | | |
| | - | _ | assets other than inventory 7a | | | | | | |
| | | h | Less: cost or other basis | | | | | | |
| Φ | | ~ | and sales expenses | | | | | | |
| her Revenue | | c | Gain or (loss) 7c | | | | | | |
| eve | | | Net gain or (loss) | | | | | | |
| <u>~</u> | | | Gross income from fundraising events (| | | | | | |
| Oth | 0 | а | including \$ 599,846 | | | | | | |
| | | | contributions reported on line 1c). S | - | | | | | |
| | | | Part IV, line 18 | I . | 283,277. | | | | |
| | | h | | | 626,206. | | | | |
| | | | Less: direct expenses Net income or (loss) from fundraisin | | | -342,929. | | | -342,929. |
| | | | Gross income from gaming activitie | | | 212,525. | | | 312,323. |
| | 9 | a | • • | I . | | | | | |
| | | L | Part IV, line 19 | | | | | | |
| | | | Less: direct expenses | | | | | | |
| | | | Net income or (loss) from gaming ac | | | | | | |
| | 10 | а | Gross sales of inventory, less return | | | | | | |
| | | | and allowances | | | | | | |
| | | | Less: cost of goods sold | | | | | | |
| \rightarrow | | С | Net income or (loss) from sales of ir | ventory | | | | | |
| <u>v</u> | | | | | Business Code | | | | |
| e e | 11 | а | | | | | | | |
| Miscellaneous Revenue | | b | | | | | | | |
| cell Sev | | С | | | | | | | |
| Ais | | d | All other revenue | | | | | | |
| | | е | Total. Add lines 11a-11d | | | | | | |
| | 12 | | Total revenue. See instructions | | | 4,878,504. | 0. | 0. | -342,929. |

23-1501159

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

| Do . | Check if Schedule O contains a respons | (A) | (B) | (C) | (D) |
|----------|--|----------------|-----------------------------|---------------------------------|----------------------|
| | not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII. | Total expenses | Program service expenses | Management and general expenses | Fundraising expenses |
| 1 | Grants and other assistance to domestic organizations | | | | |
| | and domestic governments. See Part IV, line 21 | 20,000. | 20,000. | | |
| 2 | Grants and other assistance to domestic | | | | |
| | individuals. See Part IV, line 22 | | | | |
| 3 | Grants and other assistance to foreign | | | | |
| | organizations, foreign governments, and foreign | | | | |
| | individuals. See Part IV, lines 15 and 16 | | | | |
| 4 | Benefits paid to or for members | | | | |
| 5 | Compensation of current officers, directors, | | | | |
| | trustees, and key employees | | | | |
| 6 | Compensation not included above to disqualified | | | | |
| | persons (as defined under section 4958(f)(1)) and | | | | |
| | persons described in section 4958(c)(3)(B) | | | | |
| 7 | Other salaries and wages | 559,780. | | 330,000. | 229,780 |
| 8 | Pension plan accruals and contributions (include | | | | |
| | section 401(k) and 403(b) employer contributions) | | | | |
| 9 | Other employee benefits | 1,589. | | 1,589. | |
| 10 | Payroll taxes | | | | |
| 11 | Fees for services (nonemployees): | | | | |
| а | Management | | | | |
| b | Legal | 550. | | | 550 |
| С | Accounting | 30,539. | | 30,539. | |
| d | Lobbying | | | | |
| е | Professional fundraising services. See Part IV, line 17 | | | | |
| f | Investment management fees | | | | |
| g | Other. (If line 11g amount exceeds 10% of line 25, | | | | |
| _ | column (A), amount, list line 11g expenses on Sch O.) | 61,590. | | 54,090. | 7,500 |
| 12 | Advertising and promotion | | | | |
| 13 | Office expenses | 9,452. | | | 9,452 |
| 14 | Information technology | · | | | · |
| 15 | Royalties | | | | |
| 16 | Occupancy | | | | |
| 17 | Travel | | | | |
| 18 | Payments of travel or entertainment expenses | | | | |
| .0 | for any federal, state, or local public officials | | | | |
| 19 | Conferences, conventions, and meetings | | | | |
| 20 | Internal | | | | |
| 20 21 | Payments to affiliates | 383,297. | 212,036. | 171,261. | |
| 22 | Depreciation, depletion, and amortization | 2,413,663. | , | 2,413,663. | |
| 23 | In | 1,491. | | 1,491. | |
| 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.) | | | | |
| а | FUNDRAISING CAMPAIGN | 39,994. | | | 39,994 |
| a b | MISCELLANEOUS EXPENSE | 7,650. | | | 7,650 |
| C | BAD DEBT EXPENSE | 3,330. | 3,330. | | .,,,,, |
| d | | 5,550. | 2,230. | | |
| e | All other expenses | | | | |
| 25 | Total functional expenses. Add lines 1 through 24e | 3,532,925. | 235,366. | 3,002,633. | 294,926 |
| 25 26 | Joint costs. Complete this line only if the organization | -,, | | -,, | ,-2 |
| _0 | reported in column (B) joint costs from a combined | | | | |
| | . , , , | | | | |
| | educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720) | | | | |

Form **990** (2022)

Form 990 (2022) Part X | Balance Sheet

| | | Check if Schedule O contains a response or not | te to an | y line in this Part X | | <u></u> | |
|-----------------------------|-----|--|---|-----------------------|---------------------------------|---------|---------------------------|
| | | | | | (A) Beginning of year | | (B) End of year |
| | 1 | Cash - non-interest-bearing | | | | 1 | |
| | 2 | Savings and temporary cash investments | | | 2,694,910. | 2 | 3,262,994. |
| | 3 | Pledges and grants receivable, net | | | 570,029. | 3 | 181,972. |
| | 4 | Accounts receivable, net | | | 4,762. | 4 | 5,100. |
| | 5 | Loans and other receivables from any current of | | | | | |
| | | trustee, key employee, creator or founder, subs | tantial c | contributor, or 35% | | | |
| | | controlled entity or family member of any of the | se pers | ons | | 5 | |
| | 6 | Loans and other receivables from other disquali | Loans and other receivables from other disqualified persons (as defined | | | | |
| | | under section 4958(f)(1)), and persons described | | 6 | | | |
| S | 7 | Notes and loans receivable, net | | 7 | | | |
| Assets | 8 | Inventories for sale or use | | | | 8 | |
| As | 9 | B | | | | 9 | |
| | 10a | Land, buildings, and equipment: cost or other | | | | | |
| | | basis. Complete Part VI of Schedule D | 10a | 88,337,477. | | | |
| | b | Less: accumulated depreciation | | 64,274,462. | 25,833,194. | 10c | 24,063,015. |
| | 11 | | | | | 11 | |
| | 12 | Investments - other securities. See Part IV, line | | | | 12 | |
| | 13 | Investments - program-related. See Part IV, line | | 13 | | | |
| | 14 | Intangible assets | | 14 | | | |
| | 15 | Other assets. See Part IV, line 11 | | 15 | | | |
| | 16 | Total assets. Add lines 1 through 15 (must equ | | | 29,102,895. | 16 | 27,513,081. |
| | 17 | Accounts payable and accrued expenses | | | 50,462. | 17 | 88,018. |
| | 18 | Grants payable | | 18 | | | |
| | 19 | Deferred revenue | | 19 | | | |
| | 20 | Tax-exempt bond liabilities | | 20 | | | |
| | 21 | Escrow or custodial account liability. Complete | | | | 21 | |
| " | 22 | Loans and other payables to any current or forn | | | | | |
| Liabilities | | trustee, key employee, creator or founder, subs | | | | | |
| ij | | controlled entity or family member of any of the | | · | | 22 | |
| Ë | 23 | Secured mortgages and notes payable to unrela | - | | | 23 | |
| | 24 | Unsecured notes and loans payable to unrelate | | | | 24 | |
| | 25 | Other liabilities (including federal income tax, pa | | | | | |
| | | parties, and other liabilities not included on lines | | | | | |
| | | of Schedule D | | | 146,128. | 25 | 186,263. |
| | 26 | Total liabilities. Add lines 17 through 25 | | | 196,590. | 26 | 274,281. |
| | | Organizations that follow FASB ASC 958, che | eck her | e X | | | |
| es | | and complete lines 27, 28, 32, and 33. | | | | | |
| auc | 27 | | | | 28,364,305. | 27 | 27,096,800. |
| Bal | 28 | Net assets with donor restrictions | | | 542,000. | 28 | 142,000. |
| P | | Organizations that do not follow FASB ASC 9 | | | | | |
| Ξ | | and complete lines 29 through 33. | ŕ | | | | |
| ٥ | 29 | Capital stock or trust principal, or current funds | | | 29 | | |
| ets | 30 | Paid-in or capital surplus, or land, building, or ed | | | | 30 | |
| Ass | 31 | Retained earnings, endowment, accumulated in | | | | 31 | |
| Net Assets or Fund Balances | 32 | Total net assets or fund balances | | | 28,906,305. | 32 | 27,238,800. |
| ~ | 33 | Total liabilities and net assets/fund balances | | | 29,102,895. | 33 | 27,513,081. |
| | _ | | | | | | |

Form **990** (2022)

| Pai | rt XI Reconciliation of Net Assets | | | | |
|-----|---|----------|------|-------|--------|
| | Check if Schedule O contains a response or note to any line in this Part XI | | | | X |
| | | | | | |
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | 4 | ,878, | 504. |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 3 | ,532, | 925. |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | 1 | ,345, | 579. |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) | 4 | 28 | ,906, | 305. |
| 5 | Net unrealized gains (losses) on investments | 5 | | | |
| 6 | Donated services and use of facilities | 6 | | | |
| 7 | Investment expenses | 7 | | | |
| 8 | Prior period adjustments | 8 | | | |
| 9 | Other changes in net assets or fund balances (explain on Schedule O) | 9 | -3 | ,013, | 084. |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, | | | | |
| | column (B)) 10 | | | | 800. |
| Pai | rt XII Financial Statements and Reporting | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XII | | | | X |
| | | | | Yes | No |
| 1 | Accounting method used to prepare the Form 990: Cash X Accrual Other | | | | |
| | If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule | Ο. | | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | | 2a | | Х |
| | If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed | on a | | | |
| | separate basis, consolidated basis, or both: | | | | |
| | Separate basis Consolidated basis Both consolidated and separate basis | | | | |
| b | Were the organization's financial statements audited by an independent accountant? | | 2b | Х | |
| | If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate | basis, | | | |
| | consolidated basis, or both: | | | | |
| | Separate basis Consolidated basis X Both consolidated and separate basis | | | | |
| С | c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, | | | | |
| | review, or compilation of its financial statements and selection of an independent accountant? | | 2c | Х | |
| | If the organization changed either its oversight process or selection process during the tax year, explain on Sche | edule O. | | | |
| За | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the | | | | |
| | Uniform Guidance, 2 C.F.R. Part 200, Subpart F? | | 3a | | Х |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required | | | | |
| | or audits, explain why on Schedule O and describe any steps taken to undergo such audits | | 3b | 225 | |
| | | | Form | 990 | (2022) |

(2022

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

Attach to Form 990 or Form 990-EZ.

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

Open to Publinspection

OMB No. 1545-0047

Employer identification number

Open to Public

ACADEMY OF MUSIC OF PHILADELPHIA INC. 23-1501159 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations

| g Provide the following information | ahout the supporte | nd organization(s) | | | | • |
|--|--------------------|---|---|---------------------------------|---|---|
| (i) Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1-10 above (see instructions)) | (iv) Is the orga in your governi Yes | nization listed ng document? | (v) Amount of monetary support (see instructions) | (vi) Amount of other support (see instructions) |
| THE PHILADELPHIA ORCHESTRA | | | | | | |
| ASSOCIATION | 23-1352289 | 10 | x | | 297,667. | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Total | | | | | 297,667. | 0. |

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

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

| Sec | ction A. Public Support | | | | | | |
|------|--|-----------------------|---------------------|------------------------|----------------------|---------------------|-----------------|
| Cale | ndar year (or fiscal year beginning in) | (a) 2018 | (b) 2019 | (c) 2020 | (d) 2021 | (e) 2022 | (f) Total |
| 1 | Gifts, grants, contributions, and | | | | | | |
| | membership fees received. (Do not | | | | | | |
| | include any "unusual grants.") | | | | | | |
| 2 | Tax revenues levied for the organ- | | | | | | |
| | ization's benefit and either paid to | | | | | | |
| | or expended on its behalf | | | | | | |
| 3 | The value of services or facilities | | | | | | |
| | furnished by a governmental unit to | | | | | | |
| | the organization without charge | | | | | | |
| 4 | Total. Add lines 1 through 3 | | | | | | |
| 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. | | | | | | |
| Sec | ction B. Total Support | | | | | | |
| Cale | ndar year (or fiscal year beginning in) | (a) 2018 | (b) 2019 | (c) 2020 | (d) 2021 | (e) 2022 | (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 | | | | | | |
| 12 | Gross receipts from related activities, | etc. (see instruction | ons) | | | 12 | |
| 13 | First 5 years. If the Form 990 is for the | ne organization's fi | rst, second, third, | fourth, or fifth tax y | year as a section 5 | 01(c)(3) | |
| _ | organization, check this box and stor | | | | | | |
| | ction C. Computation of Publi | | | | | Г | |
| | Public support percentage for 2022 (I | | | column (f)) | | 14 | <u>%</u> |
| | Public support percentage from 2021 | • | | | | 15 | % |
| 16a | 33 1/3% support test - 2022. If the o | - | | | 14 is 33 1/3% or m | ore, check this box | < and |
| | stop here. The organization qualifies | | • | | | | |
| b | 33 1/3% support test - 2021. If the contract the state of | | | | | | |
| | and stop here. The organization qual | | | | | | |
| 17a | 10% -facts-and-circumstances test | | | | | | |
| | and if the organization meets the fact | | • | • | | · · | |
| | meets the facts-and-circumstances te | - | | | - | 7 | |
| b | 10% -facts-and-circumstances test | | | | | | 10% or |
| | more, and if the organization meets the | | | | - | | |
| 40 | organization meets the facts-and-circu | | - | • | • • • | | H |
| 18 | Private foundation. If the organization | in did not check a | box on line 13, 16a | a, 100, 17a, 0r 17b | o, check this box ai | | |
| | | | | | | ochedule A | (Form 990) 2022 |

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

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

| Se | ction A. Public Support | elow, please comp | Diete Fait II.) | | | | |
|------|--|---------------------------|----------------------------|-----------------------|--------------------|--------------------|---------------|
| Cale | ndar year (or fiscal year beginning in) | (a) 2018 | (b) 2019 | (c) 2020 | (d) 2021 | (e) 2022 | (f) Total |
| | Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | (1) | (12) | (5)==== | (-7 | (5) = 5 = 5 | χ, |
| 2 | Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | | | | | | |
| 3 | Gross receipts from activities that are not an unrelated trade or business under section 513 | | | | | | |
| 4 | Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf | | | | | | |
| 5 | The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 6 | Total. Add lines 1 through 5 | | | | | | |
| 78 | Amounts included on lines 1, 2, and 3 received from disqualified persons | | | | | | |
| ŀ | Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year | | | | | | |
| (| Add lines 7a and 7b | | | | | | |
| | Public support. (Subtract line 7c from line 6.) | | | | | | |
| Cale | ndar year (or fiscal year beginning in) | (a) 2018 | (b) 2019 | (c) 2020 | (d) 2021 | (e) 2022 | (f) Total |
| | Amounts from line 6 | (4,) = 0.10 | (2) 20:0 | (0) = 0 = 0 | (4) = 5 = 1 | (0) = 0 = 0 | (1) |
| | Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources | | | | | | |
| k | Unrelated business taxable income (less section 511 taxes) from businesses | | | | | | |
| | acquired after June 30, 1975 | | | | | + | |
| | Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on | | | | | | |
| | Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) | | | | | | |
| | Total support. (Add lines 9, 10c, 11, and 12.) | | | | | | <u> </u> |
| 14 | First 5 years. If the Form 990 is for the | · · | | • | • | | . — |
| | check this box and stop here | - O 1 D - | | | | | |
| | ction C. Computation of Publi | | | | | | |
| | Public support percentage for 2022 (I | | • | column (f)) | | 15 | % |
| | Public support percentage from 2021 ction D. Computation of Inves | | | | | 16 | % |
| | • | | | : 10!···-· (f) | | 147 | 0/ |
| | Investment income percentage for 20 | | | | | 17 | % |
| | Investment income percentage from | | | | | 18 | % 7 is not |
| 198 | a 33 1/3% support tests - 2022. If the | | | | | -41 | |
| k | more than 33 1/3%, check this box ar 33 1/3% support tests - 2021. If the | = | - | • | • • | | |
| | line 18 is not more than 33 1/3%, che | ck this box and st | t op here. The orga | anization qualifies a | as a publicly supp | orted organization | |
| 20 | Private foundation. If the organization | n did not check a | box on line 14 19 | a or 10h check th | nis hox and see in | structions | |

232023 12-09-22

Schedule A (Form 990) 2022

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

| | | Yes | No |
|-------|---------|--------|------|
| | | | |
| | 1 | Х | |
| | | | |
| | | | Х |
| | 2 | | X |
| | 2- | | Х |
| | 3a | | 21 |
| | | | |
| | 3b | | |
| | | | |
| | 3c | | |
| | _ | | 77 |
| | 4a | | Х |
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| | 4b | | |
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| | 4c | | |
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| | 5a | | Х |
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| | 5b | | |
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| | 7 | | Х |
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| | 8 | | Х |
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| | 9a | | Х |
| | Ju | | |
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| | | | |
| | 9с | | Х |
| | | | |
| | 10a | | Х |
| | | | |
| | 10b | | |
| ٠.١.۵ | A (Form | ~ 000) | 2022 |

| Pa | rt IV Supporting Organizations (continued) | | | |
|-----|--|-----------|-------|----|
| | | | Yes | No |
| 11 | Has the organization accepted a gift or contribution from any of the following persons? | | | |
| а | A person who directly or indirectly controls, either alone or together with persons described on lines 11b and | | | |
| | 11c below, the governing body of a supported organization? | 11a | | Х |
| b | A family member of a person described on line 11a above? | 11b | | Х |
| | A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide | | | |
| | detail in Part VI. | 11c | | Х |
| Sec | etion B. Type I Supporting Organizations | | | |
| | | | Yes | No |
| 1 | Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the | | х | |
| • | supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. | 1 | | |
| 2 | Did the organization operate for the benefit of any supported organization other than the supported | | | |
| | organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in | | | |
| | Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, | | | v |
| 800 | supervised, or controlled the supporting organization. etion C. Type II Supporting Organizations | 2 | | Х |
| 360 | Tion C. Type it Supporting Organizations | | T., 1 | |
| | | | Yes | No |
| 1 | Were a majority of the organization's directors or trustees during the tax year also a majority of the directors | | | |
| | or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control | | | |
| | or management of the supporting organization was vested in the same persons that controlled or managed | | | |
| 0 | the supported organization(s). | 1 | | |
| Sec | tion D. All Type III Supporting Organizations | | | |
| | | | Yes | No |
| 1 | Did the organization provide to each of its supported organizations, by the last day of the fifth month of the | | | |
| | organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax | | | |
| | year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the | | | |
| | organization's governing documents in effect on the date of notification, to the extent not previously provided? | 1 | | |
| 2 | Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported | | | |
| | organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how | | | |
| | the organization maintained a close and continuous working relationship with the supported organization(s). | 2 | | |
| 3 | By reason of the relationship described on line 2, above, did the organization's supported organizations have a | | | |
| | significant voice in the organization's investment policies and in directing the use of the organization's | | | |
| | income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's | | | |
| | supported organizations played in this regard. | 3 | | |
| Sec | tion E. Type III Functionally Integrated Supporting Organizations | | | |
| 1 | Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions) |)_ | | |
| а | The organization satisfied the Activities Test. Complete line 2 below. | | | |
| b | The organization is the parent of each of its supported organizations. Complete line 3 below. | | | |
| С | The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in | structior | ıs). | |
| 2 | Activities Test. Answer lines 2a and 2b below. | | Yes | No |
| а | Did substantially all of the organization's activities during the tax year directly further the exempt purposes of | | | |
| | the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify | | | |
| | those supported organizations and explain how these activities directly furthered their exempt purposes, | | | |
| | how the organization was responsive to those supported organizations, and how the organization determined | | | |
| | that these activities constituted substantially all of its activities. | 2a | | |
| h | Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, | | | |
| | one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in | | | |
| | | | | |
| | Part VI the reasons for the organization's position that its supported organization(s) would have engaged in | 2b | | |
| 9 | these activities but for the organization's involvement. Parent of Supported Organizations. Answer lines 3a and 3b below. | 20 | | |
| 3 | Parent of Supported Organizations. Answer lines 3a and 3b below. Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or | | | |
| а | | 2- | | |
| L | trustees of each of the supported organizations? <i>If</i> "Yes" or "No" provide details in Part VI. | 3a | | |
| O | Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each | 3h | | |

| Pa | rt V Type III Non-Functionally Integrated 509(a)(3) Supporting | ng Organi | izations | |
|------|---|----------------|------------------------------|--------------------------------|
| 1 | Check here if the organization satisfied the Integral Part Test as a qualifying | ng trust on N | Nov. 20, 1970 (explain in I | Part VI). See instructions. |
| | All other Type III non-functionally integrated supporting organizations must | st complete | Sections A through E. | |
| Sect | ion A - Adjusted Net Income | | (A) Prior Year | (B) Current Year (optional) |
| 1 | Net short-term capital gain | 1 | | |
| 2 | Recoveries of prior-year distributions | 2 | | |
| 3 | Other gross income (see instructions) | 3 | | |
| 4 | Add lines 1 through 3. | 4 | | |
| 5 | Depreciation and depletion | 5 | | |
| 6 | Portion of operating expenses paid or incurred for production or | | | |
| | collection of gross income or for management, conservation, or | | | |
| | maintenance of property held for production of income (see instructions) | 6 | | |
| 7 | Other expenses (see instructions) | 7 | | |
| 8 | Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) | 8 | | |
| Sect | ion B - Minimum Asset Amount | | (A) Prior Year | (B) Current Year (optional) |
| 1 | Aggregate fair market value of all non-exempt-use assets (see | | | |
| | instructions for short tax year or assets held for part of year): | | | |
| а | Average monthly value of securities | 1a | | |
| b | Average monthly cash balances | 1b | | |
| С | Fair market value of other non-exempt-use assets | 1c | | |
| d | Total (add lines 1a, 1b, and 1c) | 1d | | |
| е | Discount claimed for blockage or other factors | | | |
| | (explain in detail in Part VI): | | | |
| 2 | Acquisition indebtedness applicable to non-exempt-use assets | 2 | | |
| 3 | Subtract line 2 from line 1d. | 3 | | |
| 4 | Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, | | | |
| | see instructions). | 4 | | |
| _5 | Net value of non-exempt-use assets (subtract line 4 from line 3) | 5 | | |
| _6 | Multiply line 5 by 0.035. | 6 | | |
| _7_ | Recoveries of prior-year distributions | 7 | | |
| 8 | Minimum Asset Amount (add line 7 to line 6) | 8 | | |
| Sect | ion C - Distributable Amount | | | Current Year |
| 1 | Adjusted net income for prior year (from Section A, line 8, column A) | 1 | | |
| 2 | Enter 0.85 of line 1. | 2 | | |
| 3 | Minimum asset amount for prior year (from Section B, line 8, column A) | 3 | | |
| 4 | Enter greater of line 2 or line 3. | 4 | | |
| 5 | Income tax imposed in prior year | 5 | | |
| 6 | Distributable Amount. Subtract line 5 from line 4, unless subject to | | | |
| | emergency temporary reduction (see instructions). | 6 | | |
| 7 | Check here if the current year is the organization's first as a non-functional | ally integrate | d Type III supporting orga | nization (see |
| | instructions). | | | |

Schedule A (Form 990) 2022

| Par | Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) | | | | | |
|-----------|--|------------------------------|----------------------------|----|------------------------|--|
| Secti | on D - Distributions | | · | | Current Year | |
| 1 | Amounts paid to supported organizations to accomplish exer | mpt purposes | | 1 | | |
| 2 | Amounts paid to perform activity that directly furthers exemp | t purposes of supported | | | | |
| | organizations, in excess of income from activity | | | 2 | | |
| _3_ | Administrative expenses paid to accomplish exempt purpose | s of supported organizations | 3 | 3 | | |
| 4 | Amounts paid to acquire exempt-use assets | | | 4 | | |
| 5 | Qualified set-aside amounts (prior IRS approval required - pro | ovide details in Part VI) | | 5 | | |
| 6 | Other distributions (describe in Part VI). See instructions. | | | 6 | | |
| _7_ | Total annual distributions. Add lines 1 through 6. | | | 7 | | |
| 8 | Distributions to attentive supported organizations to which the | e organization is responsive | | | | |
| | (provide details in Part VI). See instructions. | | | 8 | | |
| _9_ | Distributable amount for 2022 from Section C, line 6 | | | 9 | | |
| 10 | Line 8 amount divided by line 9 amount | | | 10 | | |
| Secti | on E - Distribution Allocations (see instructions) | (i) Excess Distributions | (ii) Underdistributions | , | (iii) Distributable | |
| | | | Pre-2022 | | Amount for 2022 | |
| 1 | Distributable amount for 2022 from Section C, line 6 | | | | | |
| 2 | Underdistributions, if any, for years prior to 2022 (reason- | | | | | |
| | able cause required - explain in Part VI). See instructions. | | | | | |
| _3_ | Excess distributions carryover, if any, to 2022 | | | | | |
| a | From 2017 | | | | | |
| b | From 2018 | | | | | |
| с | From 2019 | | | | | |
| d | From 2020 | | | | | |
| <u>e</u> | From 2021 | | | | | |
| f | Total of lines 3a through 3e | | | | | |
| <u>g</u> | Applied to underdistributions of prior years | | | | | |
| <u>h</u> | Applied to 2022 distributable amount | | | | | |
| <u>i</u> | Carryover from 2017 not applied (see instructions) | | | | | |
| <u>j_</u> | Remainder. Subtract lines 3g, 3h, and 3i from line 3f. | | | | | |
| 4 | Distributions for 2022 from Section D, | | | | | |
| | line 7: \$ | | | | | |
| <u>a</u> | Applied to underdistributions of prior years | | | | | |
| <u> </u> | Applied to 2022 distributable amount | | | | | |
| | Remainder. Subtract lines 4a and 4b from line 4. | | | | | |
| 5 | Remaining underdistributions for years prior to 2022, if | | | | | |
| | any. Subtract lines 3g and 4a from line 2. For result greater | | | | | |
| | than zero, explain in Part VI. See instructions. | | | | | |
| 6 | Remaining underdistributions for 2022. Subtract lines 3h | | | | | |
| | and 4b from line 1. For result greater than zero, explain in | | | | | |
| | Part VI. See instructions. | | | | | |
| 7 | Excess distributions carryover to 2023. Add lines 3j | | | | | |
| | and 4c. | | | | | |
| _8_ | Breakdown of line 7: | | | | | |
| | Excess from 2018 | | | | | |
| | Excess from 2019 | | | | | |
| | Excess from 2020 | | | | | |
| | Excess from 2021 | | | | | |
| <u>e</u> | Excess from 2022 | | | | | |

Schedule A (Form 990) 2022

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

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No. 1545-0047

Employer identification number

2022

| AC | ADEMY OF MUSIC OF PHILADELPHIA, INC. | 23-1501159 |
|--|---|---|
| Organization type (check | one): | |
| Filers of: | Section: | |
| Form 990 or 990-EZ | X 501(c)(3) (enter number) organization | |
| | 4947(a)(1) nonexempt charitable trust not treated as a private foundation | |
| | 527 political organization | |
| Form 990-PF | 501(c)(3) exempt private foundation | |
| | 4947(a)(1) nonexempt charitable trust treated as a private foundation | |
| | 501(c)(3) taxable private foundation | |
| Note: Only a section 501(c | is covered by the General Rule or a Special Rule . (2)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule | e. See instructions. |
| General Rule | | |
| - | on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling yone contributor. Complete Parts I and II. See instructions for determining a contributor's | |
| Special Rules | | |
| sections 509(a)(1) contributor, durin | on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support in and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and g the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) IZ, line 1. Complete Parts I and II. | d that received from any one |
| For an organization | on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a | any one |
| literary, or educat | g the year, total contributions of more than \$1,000 exclusively for religious, charitable, sc ional purposes, or for the prevention of cruelty to children or animals. Complete Parts I (e b) instead of the contributor name and address), II, and III. | · |
| year, contribution is checked, enter purpose. Don't co | on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a sexclusively for religious, charitable, etc., purposes, but no such contributions totaled mere the total contributions that were received during the year for an exclusively religious omplete any of the parts unless the General Rule applies to this organization because it ole, etc., contributions totaling \$5,000 or more during the year | ore than \$1,000. If this box s, charitable, etc., received <i>nonexclusively</i> |
| _ | hat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Fo | • • |
| | e 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, ng requirements of Schedule B (Form 990). | Part I, line 2, to certify |
| LHA For Paperwork Reduc | tion Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. | Schedule B (Form 990) (2022) |

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

| Part I | Contributors (see instructions). Use duplicate copies of Part I if additional | al space is needed. | |
|------------|---|---------------------------------|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 7 | | \$\$ | Person X Payroll Noncash X (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 8 | | \$ | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 9 | | \$ | Person X Payroll |
| (a) | (b) | (c) | (d) |
| No. 10 | Name, address, and ZIP + 4 | Total contributions \$ 25,836. | Person X Payroll X Noncash X (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 11 | | \$\$ | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 12 | | \$\$ | Person X Payroll |

| Part I | Contributors (see instructions). Use duplicate copies of Part I if addition | nal space is needed. | |
|------------|---|----------------------------|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 13 | | - - \$\$000. | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 14 | | \$ | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 15 | | - - \$\$ | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 16 | Name, address, and ZIP + 4 | \$ 25,000. | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 17 | | - - \$\$22,000. | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 18 | | \$ 20,000. | Person X Payroll |

| Part I | Contributors (see instructions). Use duplicate copies of Part I if a | dditional space is needed. | |
|------------|--|----------------------------|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 19 | | \$\$ | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 20 | | \$\$ | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 21 | | \$\$ | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 22 | Name, address, and ZIP + 4 | \$ \$ 12,000. | Person X Payroll Noncash X (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 23 | | \$\$ | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 24 | | \$ | Person X Payroll |

| Part I | Contributors (see instructions). Use duplicate copies of Part I if add | ditional space is needed. | |
|------------|--|----------------------------|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 25 | | \$\$ | Person X Payroll |
| (a) | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) |
| No. 26 | Name, address, and ZIP + 4 | \$\$ | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 27 | - Hame, dada eee, and En 1 1 | \$\$ | Person X Payroll |
| (a) | (b) | (c) | (d) |
| No. 28 | Name, address, and ZIP + 4 | * \$ 7,500. | Person X Payroll |
| (a) | (b) | (c) Total contributions | (d) |
| No. 29 | Name, address, and ZIP + 4 | \$\$. | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 30 | Humo, audi voo, and En TT | \$\$5,600. | Person X Payroll Noncash (Complete Part II for noncash contributions.) |

| Part I | Contributors (see instructions). Use duplicate copies of Part I if addition | onal space is needed. | |
|------------|---|-----------------------------|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 31 | | \$5,183 | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 32 | | \$ | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 33 | | \$5,000. | Person X Payroll |
| (a) | (b) | (c) | (d) |
| No. 34 | Name, address, and ZIP + 4 | Total contributions 5,000. | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 35 | | \$5,000. | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 36 | | \$5,000. | Person X Payroll |

| Part I | Contributors (see instructions). Use duplicate copies of Part I if addition | onal space is needed. | |
|------------|---|----------------------------|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 37 | | \$5,000 | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 38 | | \$5,000. | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 39 | | \$5,000. | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 40 | Name, audress, and ZIP + 4 | - \$ 5,000. | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 41 | | \$5,000. | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 42 | | \$5,000. | Person X Payroll |

| Part I | Contributors (see instructions). Use duplicate copies of Part I if additional additional contributors. | tional space is needed. | |
|------------|--|----------------------------|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 43 | | \$5,000. | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 44 | | \$5,000. | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 45 | | \$\$ | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 46 | Name, address, and ZIF + + | \$\$ | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 47 | | \$\$ | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 48 | | \$5,000. | Person X Payroll |

Name of organization

Employer identification number

ACADEMY OF MUSIC OF PHILADELPHIA, INC.

23-1501159

| Part I | Contributors (see instructions). Use duplicate copies of Part I if add | itional space is needed. | |
|------------|--|----------------------------|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 49 | | | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 50 | Name, address, and ZiP + 4 | \$5,000. | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 51 | - Nume, address, and 2n + 4 | \$ 5,000. | Person X Payroll |
| (a) | (b) | (c) | (d) |
| No. 52 | Name, address, and ZIP + 4 | | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| No. 53 | Name, auuress, anu ZIF + 4 | \$5,000. | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 54 | | \$5,000. | Person X Payroll Noncash (Complete Part II for noncash contributions.) |

Name of organization

Employer identification number

ACADEMY OF MUSIC OF PHILADELPHIA, INC.

23-1501159

| Part I | Contributors (see instructions). Use duplicate copies of Part I if addition | onal space is needed. | |
|---------------|---|-----------------------------|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 55 | | \$5,000. | Person X Payroll |
| (a) | (b) | (c) | (d) |
| No. 56 | Name, address, and ZIP + 4 | Total contributions 5,000. | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 57 | | - \$\$ | Person X Payroll |
| (a) | (b) | (c) | (d) |
| No. 58 | Name, address, and ZIP + 4 | Total contributions 5,000. | Person X Payroll |
| (a) | (b) | (c) | (d) |
| No. 59 | Name, address, and ZIP + 4 | Total contributions | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 60 | Humo, addi 655, and ZiF T T | \$ | Person X Payroll Noncash (Complete Part II for noncash contributions.) |

Name of organization

Employer identification number

ACADEMY OF MUSIC OF PHILADELPHIA, INC.

23-1501159

| Part I | Contributors (see instructions). Use duplicate copies of Part I if | additional space is needed. | |
|------------|---|--------------------------------|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 61 | | \$ | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 62 | - Trumo, addresse, and En 111 | \$\$5,000. | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) | (b) | (c) | (d) |
| No. 63 | Name, address, and ZIP + 4 | Total contributions \$ 5,000. | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 64 | Name, address, and ZIP + 4 | \$ \$ 5,000. | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 65 | | \$\$,000. | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 66_ | Name, audress, and ZiF + 4 | \$\$5,000. | Person X Payroll Noncash (Complete Part II for noncash contributions.) |

| Part I | Contributors (see instructions). Use duplicate copies of Part I if ac | dditional space is needed. | |
|------------|---|----------------------------|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 67 | | \$\$ | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 68 | | \$\$ | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 69 | | \$\$ | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 70 | Name, address, and ZIF + 4 | \$\$ 1,059,897. | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |

Name of organization

ACADEMY OF MUSIC OF PHILADELPHIA, INC.

23-1501159

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. (a) No. (d) (b) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I SECURITIES PUBLICLY TRADED 7 48,974. 11/18/22 (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given **Date received** (See instructions.) Part I SECURITIES PUBLICLY TRADED 10 25,836. 05/26/23 (a) (c) No. (d) FMV (or estimate) from Description of noncash property given **Date received** (See instructions.) Part I FOOD INVENTORY 22 08/31/23 12,000. (a) (c) No. (d) (b) FMV (or estimate) from Description of noncash property given **Date received** (See instructions.) Part I SECURITIES PUBLICLY TRADED 31 05/04/23 (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I (a) No. (b) (d) FMV (or estimate) from Description of noncash property given **Date received** (See instructions.) Part I

Page 4

Name of organization **Employer identification number** ACADEMY OF MUSIC OF PHILADELPHIA, INC. 23-1501159 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0047 Inspection

Name of the organization

ACADEMY OF MUSIC OF PHILADELPHIA, INC.

Employer identification number

23-1501159

| 1 Total number at end of year 2 Aggregate value of parts from (during year) 3 Aggregate value of parts from (during year) 4 Aggregate value of parts from (during year) 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization inform all donors and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring imperimentable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring imperimentable protects benefit of the donor or donor advisor, or for any other purpose conferring imperimentable protects benefit of the donor or donor advisor, or for any other purpose conferring imperimentable protects on the purpose of the purpose conferring imperimentation of land for public use (for example, recreation or reducation) Preservation of all distortically important land area Preservation of land for public use (for example, recreation or reducation) Preservation of a certified historic structure Preservation of open space 2 Complete image 2 through 5 of if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. 1 Total number of conservation easements assembly a | Par | | | or Accounts. Complete if the |
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| 1 Total number at end of year 2 Aggregate value of contributions to (during year) 3 Aggregate value of and of year 4 Aggregate value of and of year 5 Did the organization in form all donors and donor advisors in writing that the assets held in donor advised funds are the organization is property, subject to the organization's exclusive legal control? No | | organization answered "Yes" on Form 990, Part IV, lin | 1 | (b) Funds and other accounts |
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| 5 Did the organization informal idonors and donor advisors in writing that the assets held in donor advised funds are the organization inform, subject to the organizations recursive, subject to the organizations included in control of the donor or donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisors, or for any other purpose conferring impermissible purvate benefits of the benefit of the donor or donor advisors, or for any other purposes conferring membranes are assembled to the benefit of the organization answered "Yes" on Form 990, Part IV, line 7. 1 Purpose(s) of conservation easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. 1 Purpose(s) of conservation of land for public use (for example, recreation or education) Preservation of a historically important land area Preservation of a land for public use (for example, recreation or education) Preservation of a certified historic structure Preservation of a certified historic structure in the form of a conservation easement on the last day of the tax year. 2 Total number of conservation easements and a certified historic structure included in (a) 2 Cc do this preservation easements in conservation easements and a certified historic structure included in (a) 2 Cc do this preservation easements included in (c) acquired after July 25.2006, and not on a historic structure listed in the National Register and the preservation easements in conservation easements in the variance of public violations, and enforcing conservation easements during the year 2 Amount of expenses incurred in monitoring, inspecting, handling of vi | | | | |
| are the organization's property, subject to the organization's exclusive legal control? | | | writing that the assets held in donor advis | ed funds |
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| for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impoernisable private benefit? Part Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(§) of conservation easements held by the organization (check all that apply). Preservation of a first for public use (for example, recreation or education) Preservation of a historically important land area Protection or natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements Total acreage restricted by conservation easements Total acreage restricted by conservation easements Total acreage restricted by conservation easements included in (c) acquired after July 25,2006, and not on a historic structure listed in the National Register Number of conservation easements michael (c) acquired after July 25,2006, and not on a historic structure instead in the National Register | 6 | | | |
| Impermissible private benefit? | | | | |
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| Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year | d | | | |
| year | | | | |
| Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Monitor of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Monitor of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Monitor of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Monitor of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Monitor of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Monitor of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Monitor of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Monitorical fresures incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Monitorical fresures incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Monitorical fresures incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Monitorical fresures incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Monitorical fresures incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Monitorical fresures incurred in monitoring, inspec | 3 | | eased, extinguished, or terminated by the | e organization during the tax |
| Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ii) and section 170(h)(4)(B)(iii)? Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. Ia If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part X | | - | | |
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| Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. Ia If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part X B Assets included in Form 990, Part X S B Assets included in Form 990, Part X | 5 | | | □ Voc □ No |
| Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Boes each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ii) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part X \$ If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part XIII, line 1 \$ b Assets included in Form 990, Part XIII, line 1 \$ b Assets included in Form 990, Part XIII, line 1 \$ c Assets included in Form 990, Part XIII, line 1 \$ c Assets included in Form 990, Part XIII, line 1 \$ c Assets included in Form 990, Part XIII, line 1 \$ c Assets included in Form 990 | 6 | • | | |
| Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ii) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1 \$ B Assets included in Form 990, Part X \$ B Assets included in Form 990, Part X \$ B Assets included in Form 990, Part X | Ū | Ctan and volunteer riedre develor to morntening, inspecting, | Training of Violations, and emoroning con- | servation deserments during the year |
| Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ii) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1 \$ B Assets included in Form 990, Part X \$ B Assets included in Form 990, Part X \$ B Assets included in Form 990, Part X | 7 | Amount of expenses incurred in monitoring, inspecting, hand | dling of violations, and enforcing conserva | tion easements during the year |
| and section 170(h)(4)(B)(ii)? Yes No 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part XIII, line 1 \$ | | 3, 1 3, | , , | 3 , |
| 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 \$ (ii) Assets included in Form 990, Part X \$ 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1 \$ b Assets included in Form 990, Part X VIII, line 1 \$ c Assets included in Form 990, Part X III, line 1 \$ b Assets included in Form 990, Part X III, line 1 \$ c Assets included in Form 990, Part X III, line 1 \$ c Assets included in Form 990, Part X III, line 1 \$ c Assets included in Form 990, Part X III, line 1 \$ c Assets included in Form 990, Part X III, line 1 \$ c Assets included in Form 990, Part X III III III III III III III III III | 8 | Does each conservation easement reported on line 2(d) above | re satisfy the requirements of section 170 | (h)(4)(B)(i) |
| 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 \$ (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1 \$ Assets included in Form 990, Part X \$ Assets included in Form 990, Part X \$ Assets included in Form 990, Part X | | and section 170(h)(4)(B)(ii)? | | Yes No |
| organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ | 9 | | | |
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| Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 15 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part X III, line 1 b Assets included in Form 990, Part X | | | | |
| If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1 \$ Assets included in Form 990, Part VIII, line 1 \$ Assets included in Form 990, Part X | Par | | | ther Similar Assets. |
| of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X \$ 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1 \$ b Assets included in Form 990, Part X \$ | | Complete if the organization answered "Yes" on Form | 990, Part IV, line 8. | |
| service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X \$ 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X | 1a | If the organization elected, as permitted under FASB ASC 95 | 8, not to report in its revenue statement a | and balance sheet works |
| b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X \$ 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1 b Assets included in Form 990, Part X | | of art, historical treasures, or other similar assets held for pub | olic exhibition, education, or research in fu | urtherance of public |
| art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ | | service, provide in Part XIII the text of the footnote to its finar | ncial statements that describes these item | ns. |
| provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 \$ | b | | | |
| (i) Revenue included on Form 990, Part VIII, line 1 \$ | | art, historical treasures, or other similar assets held for public | exhibition, education, or research in furtl | nerance of public service, |
| (ii) Assets included in Form 990, Part X \$ 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1 \$ b Assets included in Form 990, Part X \$ | | | | |
| 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1 \$ b Assets included in Form 990, Part X \$ | | | | |
| the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1 \$ b Assets included in Form 990, Part X \$ | _ | , | | |
| a Revenue included on Form 990, Part VIII, line 1 \$ | 2 | - | | ıl gaın, provide |
| b Assets included in Form 990, Part X \$ | | | · | • |
| | | | | |
| | | | | т |

| Description of property | (a) Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value | |
|---|--------------------------------------|---------------------------------|------------------------------|----------------|--|
| 1a Land | | 629,610. | | 629,610. | |
| b Buildings | | 86,712,405. | 63,281,197. | 23,431,208. | |
| c Leasehold improvements | | | | | |
| d Equipment | | 995,462. | 993,265. | 2,197. | |
| e Other | | | | | |
| Total. Add lines 1a through 1e. (Column (d) must equal Form 990. Part X. column (B), line 10c.) | | | | | |

Schedule D (Form 990) 2022

| Schedule D (Form 990) 2022 ACADEMY OF MUSIC | OF PHILADELPHIA, IN | IC. | 23-1501159 | Page 3 |
|--|----------------------------|--|--------------------|----------|
| Part VII Investments - Other Securities. | · | | | |
| Complete if the organization answered "Yes" | on Form 990, Part IV, line | 11b. See Form 990, Part X, line 12. | | |
| (a) Description of security or category (including name of security) | (b) Book value | (c) Method of valuation: Cost or | end-of-year market | value |
| 1) Financial derivatives | | | | |
| 2) Closely held equity interests | | | | |
| 3) Other | | | | |
| (A) | | | | |
| (B) | | | | |
| (C) | | | | |
| (D) | | | | |
| (E) | | | | |
| (F) | | | | |
| (G) | | | | |
| (H) | | | | |
| otal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) | | | | |
| Part VIII Investments - Program Related. | • | | | |
| Complete if the organization answered "Yes" | on Form 990, Part IV, line | 11c. See Form 990, Part X, line 13. | | |
| (a) Description of investment | (b) Book value | (c) Method of valuation: Cost or | end-of-year market | t value |
| (1) | | | • | |
| (2) | | | | |
| (3) | | | | |
| (4) | | | | |
| (5) | | | | |
| (6) | | | | |
| (7) | | | | |
| (8) | | | | |
| (9) | | | | |
| Total . (Col. (b) must equal Form 990, Part X, col. (B) line 13.) | | | | |
| Part IX Other Assets. | I | | | |
| Complete if the organization answered "Yes" | on Form 990, Part IV, line | 11d. See Form 990, Part X, line 15. | | |
| | Description | , , | (b) Book | value |
| (1) | · | | | |
| (2) | | | | |
| (3) | | | | |
| (4) | | | | |
| (5) | | | | |
| (6) | | | | |
| (7) | | | | |
| (8) | | | | |
| (9) | | | | |
| Fotal. (Column (b) must equal Form 990, Part X, col. (B) lin | o 15) | | | |
| Part X Other Liabilities. | 0 10.) | | 1 | |
| Complete if the organization answered "Yes" | on Form 990. Part IV. line | 11e or 11f. See Form 990. Part X. line | e 25. | |
| (a) Description of liability | | | (b) Book | value |
| (1) Federal income taxes | | | (-, | |
| (2) DUE TO AFFILIATE | | | | 139,144. |
| (3) POSTRETIREMENT BENEFIT OBLIGATION | | | | 47,119. |
| (0) | | | | |
| (4) | | | | |
| (5) | | | | |
| (6) | | | | |
| (7) | | | + | |
| (8) | | | + | |
| rus | | | 1 | |

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

Schedule D (Form 990) 2022

186,263.

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

| Sche | dule D | (Form 990) 2022 ACADEMY OF MUSIC OF PHILA | DELPHIA, INC. | | | 23-1501159 | Page 4 |
|---------|---------|--|-------------------------|------------|------------------|-------------------|------------|
| Par | t XI | Reconciliation of Revenue per Audited Fina | ncial Statemen | ts With | Revenue per Ret | turn. | |
| | | Complete if the organization answered "Yes" on Form 990 | 0, Part IV, line 12a. | | | | |
| 1 | Total r | evenue, gains, and other support per audited financial stat | ements | | | 1 | 6,703,137. |
| 2 | Amou | nts included on line 1 but not on Form 990, Part VIII, line 12 | 2: | | | | |
| а | Net ur | realized gains (losses) on investments | | 2a | | | |
| b | Donat | ed services and use of facilities | | 2b | 22,500. | | |
| С | Recov | eries of prior year grants | | 2c | | | |
| d | | (Describe in Part XIII.) | | 2d | 1,173,387. | | |
| е | Add lii | nes 2a through 2d | | | | 2e | 1,195,887. |
| 3 | Subtra | act line 2e from line 1 | | | | 3 | 5,507,250. |
| 4 | Amou | nts included on Form 990, Part VIII, line 12, but not on line | 1: | | | | |
| а | Invest | ment expenses not included on Form 990, Part VIII, line 7b | | 4a | | | |
| b | Other | (Describe in Part XIII.) | | 4b | -628,746. | | |
| С | Add lii | nes 4a and 4b | | | | 4c | -628,746. |
| 5 | Total r | evenue. Add lines 3 and 4c. (This must equal Form 990. Pa | art I, line 12.) | | | | 4,878,504. |
| Par | t XII | Reconciliation of Expenses per Audited Fina | | nts Witl | h Expenses per R | leturn. | |
| | | Complete if the organization answered "Yes" on Form 990 | 0, Part IV, line 12a. | | | <u> </u> | |
| 1 | Total e | expenses and losses per audited financial statements | | | | 1 | 4,181,631. |
| 2 | | nts included on line 1 but not on Form 990, Part IX, line 25: | | | | | |
| а | Donat | ed services and use of facilities | | 2a | 22,500. | | |
| b | Prior y | rear adjustments | | 2b | | | |
| С | Other | losses | | 2c | | | |
| d | Other | (Describe in Part XIII.) | | 2d | 626,206. | | |
| е | | nes 2a through 2d | | | | 2e | 648,706. |
| 3 | Subtra | act line 2e from line 1 | | | | 3 | 3,532,925. |
| 4 | Amou | nts included on Form 990, Part IX, line 25, but not on line 1 | : | | | | |
| | | ment expenses not included on Form 990, Part VIII, line 7b | | 4a | | | |
| b | Other | (Describe in Part XIII.) | | 4b | | | |
| | | nes 4a and 4b | | | | 4c | 0. |
| 5 | Total | expenses. Add lines 3 and 4c. (This must equal Form 990.) | Part I, line 18.) ····· | | | 5 | 3,532,925. |
| | | Supplemental Information. | | | | | |
| | | descriptions required for Part II, lines 3, 5, and 9; Part III, lines 4, and 9 | | • | | Part X, line 2; P | art XI, |
| lines | 2d and | 4b; and Part XII, lines 2d and 4b. Also complete this part t | o provide any additi | onal infor | mation. | | |
| | | | | | | | |
| D 3 D M | 37 T | TMT 2 | | | | | |
| PART | Х, Ь | INE 2: | | | | | |
| пты | 40 / 3 | GG 740) ECOMNOME | | | | | |
| FIN | 40 (A | SC 740) FOOTNOTE | | | | | |
| שרואודי | ם ספס | VICTONG OF THE INTERNAL DEVENUE CORE SECTI | ON 501/C\/3\ 7 | מנות מואי | | | |
| OMDE | K FKO | VISIONS OF THE INTERNAL REVENUE CODE, SECTI | ON 301(C)(3), A | MD INE | | | |
| ADDT. | TCART. | E INCOME TAX REGULATIONS OF PENNSYLVANIA, T | HE VGGUCTYMTUN | TC | | | |
| 7111 | ICADII | E INCOME TAX REGULATIONS OF TENNISTEVANIA, I | HE ADDOCIATION | 15 | | | |
| FYFM | מת הם | OM TAXES ON INCOME OTHER THAN UNRELATED BUS | TNESS TNCOME T | ישני | | | |
| CALIM | II IK | ON TAKES ON INCOME OTHER THAN UNRELATED BOS | INESS INCOME. I | .1115 | | | |
| ממאמ | EMY R | ECOGNIZES OR DERECOGNIZES A TAX POSITION BA | SED ON A "MORE | I.TKEI.Y | | | |
| ich | | DECOMIZED ON DENECOCNIZED IN TIME TODITION DI | DED ON IT HORE | DIRDDI | | | |
| THAN | пот" | THRESHOLD. THIS APPLIES TO POSITIONS TAKEN | OR EXPECTED TO |) BE | | | |
| | | | 011 211 201 20 10 | | | | |
| TAKE | N IN | A TAX RETURN. THE ACADEMY DOES NOT BELIEVE | ITS CONSOLIDATE | ED | | | |
| | | | | | | | |
| FINA | NCIAL | STATEMENTS INCLUDE ANY MATERIAL UNCERTAIN | TAX POSITIONS. | | | | |
| | | | | | | | |
| TMTF | DNAT. | REVENUE SERVICE RECULATIONS STIPULATE TAX V | EARS ARE OPEN E | TOR | | | |

Schedule D (Form 990) 2022

THREE YEARS FROM THE DATE OF FILING AND REMAIN SUBJECT TO EXAMINATION.

Schedule D (Form 990) 2022

SCHEDULE G (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public Inspection

| Name of the organization | MUGICIO DE DUITADELDUITA INC | | | | | 23-150115 | ntification number |
|--|--|--|-------------------|-----------------------------------|---------|---|---|
| | MUSIC OF PHILADELPHIA, INC. Complete if the organization answer | | es" or | Form 990 Part IV li | ne 17 | | |
| required to complete this part | | icu i | C3 O1 | 11 01111 330, 1 art 14, 111 | 110 17 | . 1 01111 330 LZ | mers are not |
| Indicate whether the organization rais Mail solicitations Internet and email solicitations Phone solicitations In-person solicitations | e Solicita | tion of tion of | non-g gover | overnment grants nment grants | | | |
| 2 a Did the organization have a written of key employees listed in Form 990, Paragraph b. If "Yes," list the 10 highest paid individual compensated at least \$5,000 by the | art VII) or entity in connection with prividuals or entities (fundraisers) pursu | rofessi | onal fu | undraising services? | · | Yes | |
| (i) Name and address of individual or entity (fundraiser) | (ii) Activity | (iii) fundr have con or con contribu | ustody trol of | (iv) Gross receipts from activity | to (c | Amount paid or retained by) fundraiser red in col. (i) | (vi) Amount paid to (or retained by) organization |
| | | Yes | No | | | | |
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| 3 List all states in which the organizatio or licensing. | n is registered or licensed to solicit o | ontrib | utions | or has been notified | it is e | exempt from re | gistration |
| AL,AK,AZ,AR,CA,CT,DC,FL,IL,KS,K | | H,NJ, | NY,N | C,ND,OH | | | |
| OK,OR,PA,RI,SC,TN,UT,VA,WA,WV,W | I | | | | | | |
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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule G (Form 990) 2022

| Pa | rt I | | _ | | | | |
|-----------------|--------|--|--|------------------------------------|----------------|--------------------|--|
| | | of fundraising event contributions and gro | | | | | · · · · · · · · · · · · · · · · · · · |
| | | | (a) Event #1 | (b) E∨ | ent #2 | (c) Other events | (d) Lotal events |
| | | | GREAT STAGES GALA | | | NONE | (add col. (a) through |
| | | | (event type) | (even | t type) | (total number) | col. (c)) |
| ηne | | | (= = = = = = = = = = = = = = = = = = = | (2.2 | | (| |
| Revenue | 1 | Gross receipts | 883,123. | | | | 883,123. |
| æ | | | | | | | |
| | 2 | Less: Contributions | 599,846. | | | | 599,846. |
| | | | | | | | |
| _ | 3 | Gross income (line 1 minus line 2) | 283,277. | | | | 283,277. |
| | 1 | Cash prizes | | | | | |
| | 7 | Odsii piizes | | | | | |
| | 5 | Noncash prizes | | | | | |
| ses | | | | | | | |
| Sens | 6 | Rent/facility costs | | | | | |
| Direct Expenses | | | | | | | |
| rect | 7 | Food and beverages | 153,105. | | | | 153,105. |
| Ö | | Entortoinment | 216,931. | | | | 216,931. |
| | 8 9 | Entertainment Other direct expenses | | | | | 256,170. |
| | 10 | Direct expense summary. Add lines 4 through | | ı | | | 505 005 |
| | 11 | Net income summary. Subtract line 10 from li | | | | | 242 020 |
| Pa | rt I | | answered "Yes" on Form | 990, Part I\ | /, line 19, or | reported more than | |
| _ | | \$15,000 on Form 990-EZ, line 6a. | T | | | r | |
| ē | | | (a) Bingo | (b) Pull ta bingo/progr | ibs/instant | (c) Other gaming | (d) Total gaming (add col. (a) through col. (c)) |
| Revenue | | | | billgo/progi | oooivo biiigo | | (c) |
| Re | 1 | Gross revenue | | | | | |
| | | | | | | | |
| S | 2 | Cash prizes | | | | | |
| Direct Expenses | | | | | | | |
| жbе | 3 | Noncash prizes | | | | | |
| oct E | | Dont/facility acets | | | | | |
| Dire | 4 | Rent/facility costs | | | | | |
| | 5 | Other direct expenses | | | | | |
| | | 1 | Yes % | Yes | % | Yes | % |
| | 6 | Volunteer labor | No No | ☐ No | | No No | |
| | | | | | | | |
| | 7 | Direct expense summary. Add lines 2 through | n 5 in column (d) | | | | |
| | | Not gaming income aumman. Cultimat line 7 | from line 1 column (d) | | | | |
| | 8 | Net gaming income summary. Subtract line 7 | from line 1, column (d) | | | | |
| 9 | Ent | ter the state(s) in which the organization condu | cts gaming activities: | | | | |
| | | the organization licensed to conduct gaming ac | _ | states? | | | Yes No |
| b | If " | No," explain: | | | | | |
| | _ | | | | | | |
| | | | | | | | |
| | | ere any of the organization's gaming licenses re | | | ring the tax y | /ear'? | Yes No |
| i) | 11 | Yes," explain: | | | | | |
| | _ | | | | | | |
| 2200 | 20 10 | h-27-22 | | | | | Schedule G (Form 990) 2022 |
| /.J/UR | · IU | | | | | | |

| Sch | edule G (Form 990) 2022 ACADEMY OF MUSIC OF PHILADELPHIA, INC. | -1201123 | Page 3 |
|-----|--|------------------|------------|
| 11 | | Yes | No No |
| 12 | Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed | | |
| | to administer charitable gaming? | Yes | No |
| 13 | Indicate the percentage of gaming activity conducted in: | | |
| а | The organization's facility | 13a | <u>%</u> |
| | o An outside facility | 13b | <u>%</u> |
| 14 | Enter the name and address of the person who prepares the organization's gaming/special events books and records: | | |
| | Name | | |
| | Address | | |
| 15a | Does the organization have a contract with a third party from whom the organization receives gaming revenue? | Yes | ☐ No |
| b | olf "Yes," enter the amount of gaming revenue received by the organization \$ and the amount | | |
| | of gaming revenue retained by the third party \$ | | |
| С | If "Yes," enter name and address of the third party: | | |
| | Nome | | |
| | Name | | |
| | Address | | |
| 16 | Gaming manager information: | | |
| | Name | | |
| | | | |
| | Gaming manager compensation \$ | | |
| | | | |
| | Description of services provided | | |
| | | | |
| | | | |
| | Director/officer Employee Independent contractor | | |
| 17 | Mandatory distributions: | | |
| | I Is the organization required under state law to make charitable distributions from the gaming proceeds to | | |
| a | retain the state gaming license? | Yes | □ No |
| b | • Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the | | |
| | organization's own exempt activities during the tax year \$ | | |
| Pa | IT IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and F | art III, lines 9 | , 9b, 10b, |
| | 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions. | | |
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| Schedule G (Form 990) ACADEMY OF MUSIC OF PHILADELPHIA, INC. | 23-1501159 | Page 4 |
|---|------------|--------|
| Schedule G (Form 990) ACADEMY OF MUSIC OF PHILADELPHIA, INC. Part IV Supplemental Information (continued) | | |
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SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

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

Attach to Form 990.

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

2022
Open to Public

Inspection

Name of the organization **Employer identification number** ACADEMY OF MUSIC OF PHILADELPHIA, INC. 23-1501159 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection X Yes criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of (e) Amount of (g) Description of (h) Purpose of grant valuation (book, or government (if applicable) cash grant noncash noncash assistance or assistance FMV, appraisal, assistance other) THE KIMMEL CENTER INC. 300 SOUTH BROAD STREET SEAT REPLACEMENT PROJECT PHILADELPHIA, PA 19102 23-2865855 501(C)(3) 20,000. 0 1. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 0. Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) 2022

| Schedule I (Form 990) 2022 ACADEMY OF MUSIC OF PI | HILADELPHIA, | INC. | | | 23-1501159 | Page 2 |
|--|--------------------------|--------------------------|---------------------------------------|---|---------------------------|---------------|
| Part III Grants and Other Assistance to Domestic Individuals Part III can be duplicated if additional space is needed. | s. Complete if the | e organization answ | ered "Yes" on Form 9 | 990, Part IV, line 22. | | |
| (a) Type of grant or assistance | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of non- cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of noncas | sh assistance |
| | | | | | | |
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| Part IV Supplemental Information. Provide the information red | quired in Part I, lin | e 2; Part III, column | n (b); and any other ac | dditional information. | | |
| PART I, LINE 2: | | | | | | |
| THE ORGANIZATION DOES NOT USUALLY MAKE GRANTS TO C | THER ORGANIZA | ATIONS. THE | | | | |
| GRANT TO THE KIMMEL CENTER IS A SPECIAL ARRANGEMEN | IT THAT WAS AG | REED TO AND | | | | |
| DOCUMENTED IN A PLEDGE AGREEMENT. THE TOTAL PLEDGE | IS \$100,000 | AND \$20,000 | | | | |
| IS BEING PAID EACH YEAR FOR FIVE YEARS. THE KIMMEI | CENTER IS US | SING THE | | | | |
| GRANT TO PAY FOR NEW SEATS IN THE ACADEMY OF MUSIC | BUILDING. TH | HE MONITORING | | | | |
| OF THIS GRANT WILL BE ACCOMPLISHED BY OBSERVING TH | AT THE ACADEM | MY OF MUSIC | | | | |
| BUILDING HAS NEW SEATS. | | | | | | |
| | | <u> </u> | | | | |

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

2022

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service

Name of the organization

Department of the Treasury

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

ACADEMY OF MUSIC OF PHILADELPHIA, INC.

Employer identification number 23-1501159

Questions Regarding Compensation Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (such as maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? 2 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: Х a Receive a severance payment or change-of-control payment? 4a Х **b** Participate in or receive payment from a supplemental nonqualified retirement plan? 4b Х c Participate in or receive payment from an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation 5 contingent on the revenues of: Х a The organization? 5a х **b** Any related organization? If "Yes" on line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation 6 contingent on the net earnings of: Х a The organization? 6a Х **b** Any related organization? 6b If "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III Х 7 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the Х initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III 8 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

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

Schedule J (Form 990) 2022

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

| (A) Name and Title | | (B) Breakdown of W | /-2 and/or 1099-MIS/ compensation | C and/or 1099-NEC | (C) Retirement and other deferred | (D) Nontaxable benefits | (E) Total of columns (B)(i)-(D) | (F) Compensation in column (B) |
|------------------------------------|------|--------------------------|--------------------------------------|-------------------------------------|-----------------------------------|-------------------------|---------------------------------|---|
| | | (i) Base compensation | (ii) Bonus & incentive compensation | (iii) Other reportable compensation | compensation | | | reported as deferred on prior Form 990 |
| (1) MATIAS TARNOPOLSKY | (i) | 0. | 0. | 0. | 0. | 0. | 0, | 0. |
| BD MEMBER (PRESIDENT-POA) | (ii) | 735,217. | 175,000. | 690. | 37,525. | 29,931. | 978,363. | 0. |
| (2) RYAN FLEUR | (i) | 0. | 0. | 0. | 0. | 0. | 0, | 0. |
| BD MEMBER/SECRETARY (EXEC-DIR POA) | (ii) | 383,075. | 0. | 690. | 24,400. | 30,016. | 438,181. | 0. |
| (3) MARIO MESTICHELLI | (i) | 0. | 0. | 0. | 0. | 0. | 0, | 0. |
| BD MEMBER/TREASURER (CFO-POA) | (ii) | 319,280. | 0. | 690. | 24,400. | 28,716. | 373,086. | 0. |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |
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| | (ii) | | | | | | | |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |

| Part III | Supplemental 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.

PART I, LINE 3:

THE ACADEMY DOES NOT HAVE ANY PAID EMPLOYEES: ALL COMPENSATION TO THE

OFFICERS REPORTED ON PART VII OF THE FORM 990 WAS PAID BY A RELATED

ORGANIZATION THE PHILADELPHIA ORCHESTRA ASSOCIATION (ASSOCIATION).

ASSOCIATION UNDERTAKES A THOROUGH PROCESS TO ENSURE THAT THE EXECUTIVE

COMPENSATION IT PAYS TO ITS TOP MANAGEMENT OFFICIALS AND ALL OF ITS

OFFICERS AND KEY EMPLOYEES OF THE ASSOCIATION IS REASONABLE GIVEN THE

MARKET IN WHICH THE ASSOCIATION OPERATES.

THE ASSOCIATION CHECKS THE FOLLOWING BOXES FOR QUESTION 3 ON ITS FORM 990:

COMPENSATION COMMITTEE

FORM 990 OF OTHER ORGANIZATIONS

WRITTEN EMPLOYMENT CONTRACT

COMPENSATION SURVEY OR STUDY

APPROVAL BY THE BOARD OR COMPENSATION COMMITTEE

IN RELEVANT PART, THE BOARD OF DIRECTORS HAS ESTABLISHED A COMPENSATION

Schedule J (Form 990) 2022

| Part III | Supplemental 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.

COMMITTEE OF INDEPENDENT PERSONS THAT HAVE NO PERSONAL INTEREST IN THE

PROPOSED COMPENSATION AGREEMENT. THE COMPENSATION COMMITTEE OBTAINS A

MARKET ASSESSMENT AND COMPETITIVE POSITION ANALYSIS FOR THE ASSOCIATION'S

TOP EXECUTIVES. THE COMPENSATION COMMITTEE WILL THEN SET THE COMPENSATION

FOR THE RELEVANT EXECUTIVE AND DOCUMENT THE DECISION IN BOARD MINUTES.

PART I, LINE 4B:

ACADEMY OF MUSIC OF PHILADELPHIA BOARD MEMBER, MATIAS TARNOPOLSKY, IS THE

PRESIDENT/CEO OF THE PHILADELPHIA ORCHESTRA ASSOCIATION (POA). AS PART OF

HIS EMPLOYMENT AGREEMENT. MR. TARNOPOLSKY PARTICIPATES IN A NONQUALIFIED

DEFERRED COMPENSATION PLAN. AMOUNTS ARE CREDITED TO THE PLAN EACH YEAR AND

PLAN BALANCES ARE SUBJECT TO FORFEITURE AND/OR PAYMENT IF CERTAIN

CONDITIONS ARE MET. AMOUNTS ACCRUED UNDER THE PLAN IN THE CURRENT YEAR ARE

INCLUDED IN SCHEDULE J. PART II. COLUMN (C). NO PAYMENTS WERE MADE TO MR.

TARNOPOLSKY UNDER THE PLAN IN CALENDAR YEAR 2022.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

Employer identification number

| | ACADEMY OF MUSIC (| OF PHILADE | ELPHIA, INC. | | 23-15 | 01159 | | |
|-----|--|-------------------------------|---|---|--|-------|------|------|
| Pai | rt I Types of Property | | | | <u> </u> | | | |
| | | (a) Check if applicable | (b) Number of contributions or items contributed | (c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g | (d) Method of dei noncash contribu | | • | 5 |
| 1 | Art - Works of art | | | | | | | |
| 2 | Art - Historical treasures | | | | | | | |
| 3 | Art - Fractional interests | | | | | | | |
| 4 | Books and publications | | | | | | | |
| 5 | Clothing and household goods | | | | | | | |
| 6 | Cars and other vehicles | | | | | | | |
| 7 | Boats and planes | | | | | | | |
| 8 | Intellectual property | | | | | | | |
| 9 | Securities - Publicly traded | Х | 3 | 79,992. | FMV | | | |
| 10 | Securities - Closely held stock | | | | | | | |
| 11 | Securities - Partnership, LLC, or | | | | | | | |
| | trust interests | | | | | | | |
| 12 | Securities - Miscellaneous | | | | | | | |
| 13 | Qualified conservation contribution - | | | | | | | |
| | Historic structures | | | | | | | |
| 14 | Qualified conservation contribution - Other | | | | | | | |
| 15 | Real estate - Residential | | | | | | | |
| 16 | Real estate - Commercial | | | | | | | |
| 17 | Real estate - Other | | | | | | | |
| 18 | Collectibles | | | | | | | |
| 19 | Food inventory | Х | 1 | 12,000. | COST | | | |
| 20 | Drugs and medical supplies | | | | | | | |
| 21 | Taxidermy | | | | | | | |
| 22 | Historical artifacts | | | | | | | |
| 23 | Scientific specimens | | | | | | | |
| 24 | Archeological artifacts | | | | | | | |
| 25 | Other () | | | | | | | |
| 26 | Other () | | | | | | | |
| 27 | Other () | | | | | | | |
| 28 | Other () | | | | | | | |
| 29 | Number of Forms 8283 received by the organi | ization during | g the tax year for c | ontributions | | | | |
| | for which the organization completed Form 82 | | | | | | | |
| | | | | | | • | Yes | No |
| 30a | During the year, did the organization receive b | y contributio | n any property rep | orted in Part I, lines 1 throug | h 28, that it | | | |
| | must hold for at least 3 years from the date of | the initial co | ntribution, and whi | ch isn't required to be used | for | | | |
| | exempt purposes for the entire holding period | | | | | 30a | | Х |
| b | If "Yes," describe the arrangement in Part II. | | | | | | | |
| 31 | Does the organization have a gift acceptance | policy that re | equires the review of | of any nonstandard contribut | ions? | 31 | х | |
| 32a | Does the organization hire or use third parties | or related or | ganizations to soli | cit, process, or sell noncash | | | | |
| | contributions? | | | | | 32a | х | ı |
| b | If "Yes," describe in Part II. | | | | | | | |
| 33 | If the organization didn't report an amount in o | column (c) fo | r a type of property | for which column (a) is chec | cked, | | | |
| | describe in Part II. | . , | | | | | | |
| LHA | For Paperwork Reduction Act Notice, see | the Instruc | tions for Form 990 |), | Schedule M | (Form | 990) | 2022 |

Schedule M (Form 990) 2022

| Schedule M (Form 990) 2022 ACADEMY OF MUSIC OF PHILADELPHIA, INC. | 23-1501159 | Page 2 |
|---|--|--------|
| Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 3 is reporting in Part I, column (b), the number of contributions, the number of items received, or a corthis part for any additional information. | 3, and whether the organinbination of both. Also con | zation |
| SCHEDULE M, PART I, COLUMN (B): | | |
| NUMBER OF CONTRIBUTIONS | | |
| THE ORGANIZATION IS REPORTING THE NUMBER OF CONTRIBUTIONS IN COLUMN | | |
| (B). | | |
| CAMEDIU E M. I THE 22B. | | |
| SCHEDULE M, LINE 32B: | | |
| TO THE EXTENT THAT THE ORGANIZATION RECEIVES DONATIONS OF SECURITIES, ITS INVESTMENT BROKER/MANAGER IS TASKED WITH SELLING THOSE SECURITIES | | |
| IN EXCHANGE FOR CASH. | | |
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SCHEDULE 0 (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

Department of the Treasury Inspection Go to www.irs.gov/Form990 for the latest information. Internal Revenue Service **Employer identification number** Name of the organization ACADEMY OF MUSIC OF PHILADELPHIA, INC. 23-1501159 PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: (CONTINUED): THESE PROGRAM SERVICE ACTIVITY EXPENDITURES ARE REPORTED AS PART OF FIXED ASSETS IN SCHEDULE D, PART VI. FORM 990, PART V, LINES 1A AND 2A FORMS 1096/W-3 REPORTING FORM 1096 AND FORM W-3 FOR THE FILING ORGANIZATION IS PROCESSED AND REPORTED BY ITS RELATED ORGANIZATION PHILADELPHIA ORCHESTRA ASSOCIATION (EIN: 23-1352289). FORM 990, PART VI, SECTION A, LINE 6: THE ACADEMY OF MUSIC OF PHILADELPHIA, INC.'S SOLE MEMBER IS THE PHILADELPHIA ORCHESTRA ASSOCIATION. PRIOR TO 12/2/21, THE PHILADELPHIA ORCHESTRA ASSOCIATION'S MEMBERS/STOCKHOLDERS WERE AS FOLLOWS: THE MEMBERSHIP OF THE PHILADELPHIA ORCHESTRA ASSOCIATION SHALL CONSIST OF LIFE AND ANNUAL MEMBERS LIFE MEMBERS SHALL BE THOSE PERSONS WHO ON OR BEFORE SEPTEMBER 22, 1958 PAID INTO THE ENDOWMENT FUND OR ANY OTHER FUND ESTABLISHED BY THE ASSOCIATION NOT LESS THAN THE SUM OF FIVE HUNDRED DOLLARS,

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

Schedule O (Form 990) 2022

Schedule O (Form 990) 2022 Page **2**

| Name of the organization ACADEMY OF MUSIC OF PHILADELPHIA, INC. | Employer identification number 23-1501159 |
|---|---|
| ANNUAL MEMBERS SHALL CONSIST OF THOSE PERSONS (INDIVIDUAL OR CORPORATE) WHO | |
| FROM TIME TO TIME SHALL CONTRIBUTE TO THE PHILADELPHIA ORCHESTRA | |
| ASSOCIATION NOT LESS THAN SUCH AMOUNT AS THE BOARD OF DIRECTORS MAY FROM | |
| TIME TO TIME DESIGNATE AS THE AMOUNT OF THE CONTRIBUTION BY WHICH A PERSON | |
| SHALL BECOME A MEMBER, A MEMBER, BY VIRTUE OF A CONTRIBUTION OF NOT LESS | |
| THAN THE AMOUNT THUS FIXED, SHALL BE A MEMBER UNTIL THE ADJOURNMENT OF THE | |
| ANNUAL MEETING NEXT FOLLOWING THE CLOSE OF THE FISCAL YEAR OF THE | |
| ASSOCIATION TO THE ACCOUNTS OF WHICH THE CONTRIBUTION WAS APPLIED. | |
| IN ALL ELECTIONS AND AT ALL MEETINGS OF THE ASSOCIATION EACH MEMBER OF | |
| RECORD ON THE TENTH DAY PRECEDING THE DATE OF AN ELECTION OR OF A MEETING | |
| SHALL BE ENTITLED TO ONE VOTE AND TO NOTICE OF THE ELECTION OR MEETING. | |
| VOTING BY MEMBERS SHALL BE IN PERSON OR BY PROXY. | |
| THE BOARD OF DIRECTORS MAY FROM TIME TO TIME ESTABLISH CLASSIFICATIONS OF | |
| MEMBERS WHO ARE MEMBERS BY VIRTUE OF CONTRIBUTING TO THE ASSOCIATION AS | |
| PROVIDED FOR IN THIS ARTICLE AND MAKE AVAILABLE TO SUCH MEMBERS SUCH | |
| SPECIAL PRIVILEGES AS THE BOARD MAY DETERMINE, DEPENDING UPON THE | |
| CLASSIFICATION OF MEMBERSHIP. | |
| EFFECTIVE DECEMBER 2, 2021, THE BYLAWS OF THE PHILADELPHIA ORCHESTRA | |
| ASSOCIATION WERE AMENDED AND RESTATED TO REFLECT A NUMBER OF CHANGES | |
| COINCIDENT WITH THE CREATION OF THE PHILADELPHIA ORCHESTRA AND KIMMEL | |
| CENTER INC. (THE "POKC"). THE SOLE MEMBER OF THE ORCHESTRA WITHIN THE | |
| MEANING OF SECTION 5103(A) OF THE PENNSYLVANIA NONPROFIT CORPORATION LAW OF | |
| 1988 (THE NPCL) SHALL BE THE POKC. THE POKC SHALL HAVE THE RIGHT TO VOTE | |
| AND SHALL ACT THROUGH THE EXECUTIVE COMMITTEE OF ITS BOARD OF DIRECTORS." | |

Schedule O (Form 990) 2022 Page 2 Name of the organization **Employer identification number** ACADEMY OF MUSIC OF PHILADELPHIA, INC. 23-1501159 FORM 990, PART VI, SECTION A, LINE 7A: SEE NARRATIVE UNDER FORM 990, PART VI, SECTION A, LINE 6 FORM 990, PART VI, SECTION A, LINE 7B: SEE NARRATIVE UNDER FORM 990, PART VI, SECTION A, LINE 6 FORM 990, PART VI, SECTION B, LINE 11B: THE FORM 990 WAS PREPARED BY AN INTERNATIONAL ACCOUNTING FIRM IN CONJUNCTION WITH THE ORGANIZATION'S FINANCIAL DEPARTMENT. A COPY OF THE FORM 990 IS CIRCULATED TO THE BOARD BEFORE IT IS FILED, HOWEVER, SCHEDULE B IS REDACTED FROM THE FORM 990 BEFORE IT IS CIRCULATED TO THE BOARD TO PROTECT THE IDENTITY OF CERTAIN DONORS WHO WISH TO REMAIN ANONYMOUS. AS SUCH, THE ORGANIZATION HAS CHECKED 'NO' TO PART VI, QUESTION 11A. SCHEDULE B WILL BE MADE AVAILABLE TO THOSE BOARD MEMBERS WHO WISH TO INSPECT IT INDIVIDUALLY. FORM 990, PART VI, SECTION B, LINE 12C: THE ORGANIZATION MONITORS AND ENFORCES COMPLIANCE BY FOLLOWING THESE PROCEDURES: 1. ANY INTERESTED PERSON HAS A DUTY TO DISCLOSE THE TRANSACTION OR ARRANGEMENT; 2. THE INTERESTED PERSON PRESENTS THIS POTENTIAL CONFLICT OF INTEREST TO THE BOARD/COMMITTEE; 3. THE BOARD/COMMITTEE DETERMINES WHETHER THERE IS A CONFLICT OF INTEREST;

ADDRESS THE ISSUE IF ONE EXISTS;

BOARD/COMMITTEE/INTERESTED PERSON FOLLOWS PREDETERMINED PROCEDURES TO

Schedule O (Form 990) 2022 Page 2 Name of the organization **Employer identification number** ACADEMY OF MUSIC OF PHILADELPHIA, INC. 23-1501159 5. THE ABOVE WILL BE RECORDED IN THE MINUTES OF THE MEETINGS OF THE BOARD/COMMITTEE. EACH DIRECTOR, OFFICER AND MEMBER OF A COMMITTEE WITH BOARD-DELEGATED POWERS SHALL ANNUALLY RESPOND TO A QUESTIONNAIRE AND SIGN A STATEMENT WHICH AFFIRMS SUCH PERSON: A. HAS RECEIVED A COPY OF THE CONFLICT OF INTEREST POLICY, B. HAS READ AND UNDERSTANDS THE POLICY, C. HAS AGREED TO COMPLY WITH THE POLICY. D. UNDERSTANDS THE ORGANIZATION IS CHARITABLE AND IN ORDER TO MAINTAIN ITS FEDERAL TAX EXEMPTION IT MUST ENGAGE PRIMARILY IN ACTIVITIES WHICH ACCOMPLISH ONE OR MORE OF ITS TAX-EXEMPT PURPOSES; AND E. PROVIDES SUCH INFORMATION AS THE AOM REQUIRES TO PREPARE THE AOM'S ANNUAL IRS FORM 990. FORM 990, PART VI, LINES 13 AND 14: THE ACADEMY OPERATES UNDER THE WHISTLEBLOWER AND DOCUMENT RETENTION POLICIES OF ITS RELATED ORGANIZATION, PHILADELPHIA ORCHESTRA ASSOCIATION.

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

THE ACADEMY DOES NOT HAVE ANY PAID EMPLOYEES; ALL COMPENSATION TO OFFICERS

REPORTED ON PART VII OF THE FORM 990 WAS PAID BY A RELATED ORGANIZATION,

THE PHILADELPHIA ORCHESTRA ASSOCIATION. THE PROCESS USED TO DETERMINE

COMPENSATION FOR THESE INDIVIDUALS IS REPORTED ON THAT ORGANIZATION'S FORM

990.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

 $\verb|AL,AK,AZ,AR,CA,CT,DC,FL,IL,KS,KY,LA,ME,MD,MA,MI,MN,MO,MS,NH,NJ,NY,NC,ND,OH|\\$

<u>Schedule O (Form 990) 2022</u> Page **2**

Employer identification number Name of the organization ACADEMY OF MUSIC OF PHILADELPHIA, INC. 23-1501159 OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS FORM 990 AVAILABLE TO THE PUBLIC BY RETAINING A COPY AT ITS PLACE OF BUSINESS AND ON ITS WEBSITE AT WWW.PHILORCH.ORG. THE FORM 990 IS LIKEWISE PUBLISHED ON THE INTERNET AT WWW.GUIDESTAR.ORG. THE ORGANIZATION'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE NOT ORDINARILY MADE AVAILABLE TO THE PUBLIC, BUT, IF REQUESTED, WILL BE PROVIDED AT MANAGEMENT'S DISCRETION. THE ACADEMY OF MUSIC'S FINANCIAL OPERATIONS ARE REPORTED IN THE CONSOLIDATED FINANCIAL STATEMENTS OF ITS PARENT ORGANIZATION. THE PHILADELPHIA ORCHESTRA ASSOCIATION. THESE FINANCIAL STATEMENTS ARE, LIKEWISE, PUBLISHED ANNUALLY ON THE ORGANIZATION'S WEBSITE. FORM 990, PART VII: THE ACADEMY SHARES CERTAIN EMPLOYEES WITH RELATED ORGANIZATIONS, THE PHILADELPHIA ORCHESTRA ASSOCIATION, KIMMEL CENTER INC AND PHILADELPHIA ORCHESTRA AND KIMMEL CENTER INC. THE FULL TIME OFFICERS ALLOCATE THEIR TIME BETWEEN THE ORGANIZATIONS. ACCORDINGLY, 5 HOURS PER WEEK ARE REPORTED FOR EACH OF THE OFFICERS. FORM 990, PART IX: LINES 7 & 9: THE SALARY EXPENSES REPORTED ON LINES 7 & 9 REPRESENT AN ALLOCATION OF SALARY EXPENDITURES INCURRED BY PHILADELPHIA ORCHESTRA ASSOCIATION FOR EMPLOYEES PROVIDING SERVICES ON BEHALF OF THE ACADEMY.

Schedule O (Form 990) 2022 Page **2**

| Schedule O (Form 990) 2022 | Page 2 |
|---|---|
| Name of the organization ACADEMY OF MUSIC OF PHILADELPHIA, INC. | Employer identification number 23-1501159 |
| PLEASE NOTE THERE IS ONLY A SMALL AMOUNT OF EXPENSES REFLECTED IN PART | |
| IX, COLUMN B, PROGRAM SERVICE EXPENSES; THE REASON FOR THIS | |
| PRESENTATION IS AS FOLLOWS: THE ORGANIZATION'S PRIMARY PROGRAM SERVICE | |
| ACTIVITY IS TO RAISE FUNDS FOR THE RESTORATION OF THE ACADEMY OF MUSIC | |
| BUILDING. THE EXPENSES ASSOCIATED WITH FUNDRAISING EVENTS ARE REPORTED | |
| ON THE DIRECT EXPENSES FROM FUNDRAISING EVENTS LINE (PART VIII, LINE 8) | |
| AND THE EXPENSES ASSOCIATED WITH BUILDING RESTORATIONS ARE CAPITALIZED | |
| AND REPORTED WITHIN FIXED ASSETS ON PART X, LINE 10. | |
| | |
| FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS: | |
| OTHER -6,509. | |
| ENDOW CONTRIBUTION NOT INCLUDED IN INVESTMENTS -3,006,575. | |
| TOTAL TO FORM 990, PART XI, LINE 9 -3,013,084. | |
| | |
| GENERAL STATEMENT OF INFORMATION: | |
| THE PHILADELPHIA ORCHESTRA ASSOCIATION (POA) AND KIMMEL CENTER INC. | |
| (KCI), AFTER RECEIVING A NO OBJECTION LETTER FROM THE PENNSYLVANIA | |
| ATTORNEY GENERAL DATED OCTOBER 15, 2021, ENTERED INTO A PARTNERSHIP AND | |
| AFFILIATION AGREEMENT ON OCTOBER 21, 2021 THAT WILL ENABLE POA AND KCI | |
| TO OPERATE IN A STRATEGICALLY ALIGNED AND COORDINATED MANNER IN ORDER | |
| TO CREATE A MORE POWERFUL AND EXPANSIVE ARTISTIC FOOTPRINT BY | |
| ESTABLISHING A NEW 501(C)(3) ORGANIZATION - THE PHILADELPHIA ORCHESTRA | |
| AND KIMMEL CENTER, INC. (POKC) - TO SERVE AS THE COMMON CONTROLLING | |
| MEMBER/PARENT OF POA AND KCI, WITH FULL REPRESENTATION FROM THE | |
| EXISTING POA AND KCI BOARDS. THE TRANSACTION WAS CLOSED ON DECEMBER 2, | |
| 2021, AND ASSOCIATED FILINGS WERE MADE ON DECEMBER 3, 2021. | |
| | |

THE POA AND KCI WILL REMAIN SEPARATE LEGAL ENTITIES EACH OPERATING AS

| Schedule O (Form 990) 2022 | Page 2 |
|---|---|
| Name of the organization ACADEMY OF MUSIC OF PHILADELPHIA, INC. | Employer identification number 23-1501159 |
| TAX-EXEMPT ORGANIZATIONS AND SHALL CONTINUE TO OPERATE IN ACCORDANCE | |
| WITH AND TO FURTHER ITS RESPECTIVE TAX-EXEMPT MISSION AND PURPOSES. | |
| EACH WILL MAINTAIN SEPARATE FINANCIAL STATEMENTS AND PERFORM AN ANNUAL | |
| AUDIT, NOTWITHSTANDING THAT THE PARTIES' FINANCIAL STATEMENTS MAY BE | |
| CONSOLIDATED WITH POKC'S. EACH OF THE ORCHESTRA AND THE KIMMEL CENTER | |
| SHALL CONTINUE TO HOLD, MANAGE, AND USE ITS ENDOWED AND OTHERWISE | |
| DONOR-RESTRICTED ASSETS (INCLUDING THOSE HELD BY ITS RESPECTIVE | |
| SUBORDINATE ORGANIZATIONS, INCLUDING THE ACADEMY) CONSISTENT WITH THE | |
| RESTRICTIONS THAT APPLY TO SUCH ASSETS AND PURSUANT TO THE TERMS OF | |
| THEIR RESPECTIVE GIFT INSTRUMENTS. | |
| | |
| THE ACADEMY OF MUSIC OF PHILADELPHIA, INC. WILL CONTINUE TO BE A WHOLLY | |
| OWNED SUBORDINATE ENTITY OF THE POA, AND ITS OPERATIONS WILL BE MANAGED | |
| BY THE SENIOR MANAGEMENT OF POKC AND THEIR DESIGNEES AT THE POA AND KCI | |
| CONSISTENT WITH THE ACADEMY'S MISSION TO OPERATE, MANAGE AND MAINTAIN | |
| THE ACADEMY OF MUSIC BUILDING. | |
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SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number Name of the organization ACADEMY OF MUSIC OF PHILADELPHIA INC. 23-1501159 Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (f) (a) (b) (c) (d) (e) Name, address, and EIN (if applicable) Legal domicile (state or Total income Direct controlling Primary activity End-of-year assets of disregarded entity entity foreign country) 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 Part II organizations during the tax year. (a) (f) (b) (c) (d) (e) (g) Section 512(b)(13) Name, address, and EIN Legal domicile (state or **Exempt Code** Public charity Primary activity Direct controlling controlled of related organization section status (if section entity foreign country) entity? 501(c)(3)) Yes No PHILADELPHIA ORCHESTRA ASSOCIATION 23-1352289 ONE SOUTH BROAD ST 14TH FLOOR PHILADELPHIA, PA 19107 ORCHESTRA PENNSYLVANIA 501(C)(3) LINE 10 POKC Х THE ACADEMY OF MUSIC ENDOWMENT FUND 23-2108123, 1600 MARKET ST, 4TH FLOOR PHILADELPHIA, PA 19103 SUPPORT AOM PENNSYLVANIA LINE 12A, I 501(C)(3) AOM Х KIMMEL CENTER INC. - 23-2865855 300 SOUTH BROAD STREET PHILADELPHIA, PA 19102 PERFORMING ARTS PENNSYLVANIA 501(C)(3) LINE 7 OKC Х THE PHILADLELPHIA ORCHESTRA AND KIMMEL

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

CENTER INC. - 87-4303823 300 SOUTH BROAD

STREET, PHILADELPHIA, PA 19102

Schedule R (Form 990) 2022

PENNSYLVANIA

501(C)(3)

LINE 7

N/A

ORCHESTRA MGMT

| (a) Name, address, and EIN of related organization | (b) Primary activity | Legal domicile (state or foreign country) | (d) Direct controlling entity | (e) Predominant income (related, unrelated, excluded from tax under sections 512-514) | (f) Share of total income | (g) Share of end-of-year assets | Disprop | ortionate tions? | (i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) | (j) General emanaging partner | (k) Percentage ownership |
|--|--------------------------------|---|-------------------------------|---|---------------------------------|--|---------|------------------|---|-------------------------------|--------------------------|
| | | | | | | | | | | | |
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Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

| (a) Name, address, and EIN of related 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 | | tion b)(13) rolled tity? |
|--|--------------------------------|---|-------------------------------|---|--|--|--------------------------------|-----|-----------------------------------|
| | | country | | | | | | Yes | No |
| | | | | | | | | | |
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| Not | e: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. | | | | | Yes | No | | | | |
|------------------|--|---|------------------------------|----------------|--------|-----|----|--|--|--|--|
| 1 | During the tax year, did the organization engage in any of the following transactions with | one or more re | lated organizations listed i | n Parts II-IV? | | | | | | | |
| а | a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity | | | | | | | | | | |
| | | | | | 1b | Х | | | | | |
| С | | | | | 1c | Х | | | | | |
| | | | | | 1d | | Х | | | | |
| | | | | | 1e | | Х | | | | |
| | | | | | | | | | | | |
| f | Dividends from related organization(s) | | | | 1f | | Х | | | | |
| g | Sale of assets to related organization(s) | | | | 1g | | Х | | | | |
| | | | | | 1h | | Х | | | | |
| i | | | | | | | | | | | |
| j | Lease of facilities, equipment, or other assets to related organization(s) | | | | 1j | | Х | | | | |
| | | | | | | | | | | | |
| k | Lease of facilities, equipment, or other assets from related organization(s) | | | | 1k | | Х | | | | |
| | | erformance of services or membership or fundraising solicitations for related organization(s) erformance of services or membership or fundraising solicitations by related organization(s) naring of facilities, equipment, mailing lists, or other assets with related organization(s) 11 12 | | | | | | | | | |
| | Performance of services or membership or fundraising solicitations by related organization(s) Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) | | | | | | | | | | |
| | | | | | 1n | Х | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| р | Reimbursement paid to related organization(s) for expenses | | | | 1p | х | | | | | |
| | | | | | | | | | | | |
| · | , | | | | | | | | | | |
| r | Other transfer of cash or property to related organization(s) | | | | 1r | | х | | | | |
| | · · · · · · · · · · · · · · · · · · · | | | | 1s | | Х | | | | |
| | | | | | | | | | | | |
| | (a) Name of related organization T | (b) Transaction | (c) | (d) | volved | | | | | | |
| (1) ^T | THE ACADEMY OF MUSIC ENDOWMENT FUND | С | 1,059,897. | FMV | | | | | | | |
| (2) | | | | | | | | | | | |
| (3) | | | | | | | | | | | |
| , | | | | | | | | | | | |
| (4) | | | | | | | | | | | |
| (5) | | | | | | | | | | | |
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Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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.

| (a) Name, address, and EIN of entity | (b) Primary activity | (c) Legal domicile (state or foreign country) | Are all partners sec 501(c)(3) orgs.? | (g) Share of end-of-year assets | Disprition allocat | opor- late tions? | General manage partner | (k) Percentage ownership |
|--|-------------------------|---|---------------------------------------|--|--------------------|-------------------------|------------------------|--------------------------|
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