2022 Exempt Organization Business Tax Return prepared for:

NATIONAL ASSOCIATION FOR MUSIC EDUCATION 1806 ROBERT FULTON DRIVE RESTON, VA 20191-5482

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

990 **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2022

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

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

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

Open to Public Inspection

Α	For the	2022 calend	dar year, or tax year beginning	Jul 1 ,202	2, and endi	ng Ju	ın 30	, 20 23		
В	Check if	applicable:	C Name of organization NATION	AL ASSOCIATION FOR	MUSIC E	DUCATION	D Empl	oyer identification number		
	Address	change	Doing business as				52-6	045043		
	Name ch	nange	Number and street (or P.O. box if	mail is not delivered to street address	ss)	Room/suite	E Telepl	none number		
	Initial ret	urn	1806 ROBERT FULTOR	N DRIVE			(703)860-4000		
	Final retu	ırn/terminated	City or town, state or province, co	ountry, and ZIP or foreign postal code	e					
	Amende	d return	RESTON, VA 20191-5	5482			G Gross	receipts \$8,000,130.		
	Applicati	on pending	F Name and address of principal offi	icer:		H(a) Is this a gro	oup return fo	or subordinates? Yes X No		
			CHAUDLIER MOORE, 1806 R	obert FultonDrive, Resto	on, VA 20	191 H(b) Are all su	ubordinat	es included? Yes No		
ī	Tax-exe	mpt status:	X 501(c)(3)) (insert no.) 4947(a)(1)				st. See instructions.		
J	Website	: N/A				H(c) Group ex	xemption	number		
K	Form of o	organization:	Corporation Trust Associate	tion Other	L Year of form	nation: 1907	M State	of legal domicile: VA		
Р	art I	Summa	ry							
	1		cribe the organization's missi	ion or most significant activit	ies: NAFME'S	mission is to advan	ce music	education by encouraging the		
é			ing of music by all							
Activities & Governance				<u> </u>						
ern	2	Check this	box if the organization di	scontinued its operations or	disposed	of more than 25	% of it	s net assets.		
Š	3		voting members of the gove	•	•		3	15		
ૐ	4		independent voting member				4	14		
es	5		per of individuals employed in				5	18		
Σ	6		per of volunteers (estimate if r				6	75		
Act	7a		ated business revenue from F	• •			7a	0.		
•	b		ted business taxable income				7b	0.		
		110t amola	ted basiness taxable incerne	Prior Year	_	Current Year				
Revenue	8	Contributio	ons and grants (Part VIII, line	4,715,		5,111,170.				
	9		ervice revenue (Part VIII, line		863.	324,044.				
Vel	10	_	t income (Part VIII, column (A	-690,		529,546.				
æ	11		nue (Part VIII, column (A), line	1,151,		2,035,370.				
	12		nue-add lines 8 through 11 (m							
	13		d similar amounts paid (Part I)			5,413,	816.	8,000,130.		
	14		aid to or for members (Part IX							
	4-	-	ther compensation, employee the			2 225	F 6 7	2 (20 (10		
ses	160		al fundraising fees (Part IX, co			2,235,	567.	2,630,610.		
Expenses	16a		• • • • • • • • • • • • • • • • • • • •							
Ä	b		raising expenses (Part IX, colu	umn (D), line 25)	2,773.	2 550	C11	4 026 001		
	17		enses (Part IX, column (A), line	•		3,570,		4,936,091.		
	18		nses. Add lines 13–17 (must			5,806,		7,566,701.		
. 0	19	Revenue ie	ess expenses. Subtract line 1	8 from line 12		-392,		433,429.		
Net Assets or Fund Balances		-	. (D. L.)(!: . 40)			Beginning of Curr		End of Year		
sse	20		ts (Part X, line 16)			8,810,		9,138,514.		
et A	21		ties (Part X, line 26)			3,502,		3,397,398.		
			or fund balances. Subtract li	ne 21 from line 20		5,307,	743.	5,741,116.		
	art II		re Block							
			, I declare that I have examined this r e. Declaration of preparer (other than					my knowledge and belief, it is		
		1								
Qi,	an	0:	- ##: · ·							
Siç	_	Signature of				Date				
Here CHAUDLIER MOORE, CHIEF FINANCIAL & ADMINISTRATOR OFFICER										
		1 · · · ·	name and title							
Pa	iid		rint/Type preparer's name Preparer's signature Date Check if PTIN							
	epare	r	W. Tyler			03/22/2024	self-emp	P02385825		
	se Onl		me F S TAYLOR & AS	SOCIATES P C		Firm's	EIN .	52-1196225		
		Firm's add		,		C 20005 Phone	e no. (2	02)898-0008		
Ma	v tha IE	29 discuss t	thic raturn with the preparer c	chown above? See instruction	ne			▼ Voc □ No		

Page **2**

Part	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	NAFME'S mission is to advance music education by encouraging the
	and making of music by all.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 634,794. including grants of \$ 0.) (Revenue \$ 4,834,895.)
	Membership growth and development:
	Activites undertaken to promote membership in the association includes
	print and digital marketing campaigns to active, retired, and future music
	educators for membership and for programs of the association available to
	members, such as professional development, events, publications, digital community voting, special offers, and state affiliations. Also includes development
	and promotion of new benefits for members.
	wind promotion of hen penerico for members.
4b	(Code:) (Expenses \$ 1,685,808. including grants of \$ 0.) (Revenue \$ 759,525.)
TU	Member and student experiences:
	Activities undertaken for both in-person and virtual performance and educational
	opportunities for middle, high school, and collegiate students. Includes print
	and digital marketing campaigns to membes and non-members of the association
	highlighting programs available to their students. Program include the International Tri-M
	Music Honor Society, All-national Honor Ensembles, Composition Conpetitions,
	Music in our Schools Month, and Research Assisstance Programs.
4c	(Code:) (Expenses \$ 1,075,229. including grants of \$ 0.) (Revenue \$ 555,257.)
	Capacity Building:
	- Ensure data-driven fiscal practices and decision making to advance our association an the profession we serve
	- Build and maintainrelationships and technological capacity that enable
	the association and state committees, and individual members to
	accomplish differentiated goals with a unified national structure
	- Increase membership in existing and new categories
	- Develop nationla and state leadership
	- Ensure a fiscally sound association
	- Secure funding to conduct NAFME projects
	- Exemplify our mission, vision, and values
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ 1,305,962. including grants of \$ 0.) (Revenue \$ 1,437.) See Statement
4e	Total program service expenses 4,701,793.

	90 (2022)		F	age
Part	IV Checklist of Required Schedules		V	N
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	Yes	No
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2		×
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		×
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4	×	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		×
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		×
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		×
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," complete Schedule D, Part III	8		×
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9		×
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10	×	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, 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	×	
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		×
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? <i>If "Yes," complete Schedule D, Part VIII </i>	11c		×
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d	×	
e f	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> 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)? <i>If "Yes," complete Schedule D, Part X</i>	11e	×	×
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	×	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	×	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		×
14a b	Did the organization maintain an office, employees, or agents outside of the United States? 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	14a		×
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	14b		×
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If</i> "Yes," complete Schedule F, Parts III and IV.	15 16		×
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		_^ ×
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		_^ ×
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		×
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?	20h		

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

Part l	Checklist of Required Schedules (continued)			
rait	Checklist of Required Schedules (Continued)		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		×
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	×	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		×
b c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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? <i>If "Yes," complete Schedule L, Part I</i>	24d 25a		×
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		×
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		×
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		×
28	Was the organization a party to a business transaction with one of the following parties (see 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? <i>If</i> "Yes," complete Schedule L, Part IV	28a		×
	A family member of any individual described in line 28a? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	28b 28c		×
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	29 30		×
31 32	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	31		×
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? <i>If "Yes," complete Schedule R, Part I</i>	33	×	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		×
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		×
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		×
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		×
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	×	
Part	V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
b	Enter the number reported in box 3 of Form 1096. 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?	10	×	

Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 18			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	×	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	×	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O .	3b	×	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		×
b	If "Yes," enter the name of the foreign country			
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	_		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		×
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		×
c 6a	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с		
Va	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		×
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	oa		^
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and sonitions provided to the payor?	_		
	and services provided to the payor?	7a		×
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7b		
С	required to file Form 8282?	7c		×
ч	If "Yes," indicate the number of Forms 8282 filed during the year	76		_
d e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		×
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.	7f		×
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:			
a b	Gross income from members or shareholders			
b	against amounts due or received from them.)			
12a	,	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		×
_b	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i> .	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	4-		×
		15		
16	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		×
10	If "Yes," complete Form 4720, Schedule O.	16		
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
	If "Yes," complete Form 6069.			

Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. Check if Schedule O contains a response or note to any line in this Part VI	See in	struc	tions.
Secti	on A. Governing Body and Management			
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		Yes	No
b 2	Enter the number of voting members included on line 1a, above, who are independent . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		×
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? .	3		×
4 5 6 7a	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	4 5 6	×	×
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	×	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		. •	
a b	The governing body?	8a 8b	×	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses on Schedule O</i>	9		×
Secti	ion B. Policies (This Section B requests information about policies not required by the Internal Rever	_	ode.)	
			Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	10a		<u>×</u>
11a b 12a	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe on Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	10b 11a 12a	×	
b c	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If</i> "Yes," describe on Schedule O how this was done.	12b	×	
13 14 15	Did the organization have a written whistleblower policy?	13 14	×	
a b	The organization's CEO, Executive Director, or top management official	15a 15b	×	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		×
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Secti	on C. Disclosure			
17 18 19	List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990- (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website			
20	and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and re THE ORGANIZATION, 1806 ROBERT FULTON DRIVE, RESTON, VA 20191-5482 (703)860	cords.		- 1

Form 990 (2022)

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

Officer this box if ficialities the organization i					C)					
(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box, office Individua	unles er and	neck ss pe	rson	e than control Highest compensated employee	an	(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) Mackie V Spradley	3.00									
President		×		×				0.	0.	0.
(2) Scott R Sheehan President-Elect	3.00	×		×				0.	0.	0.
(3) Kathleen D Sanz Immediate Past President	3.00	×		×				0.	0.	0.
(4) Susan Barre Member	1.00	×						0.	0.	0.
(5) Karen Salvador Member	1.00	×						0.	0.	0.
(6) Tom Muller Member	1.00	×						0.	0.	0.
(7) Sonja Z M Williams Member	1.00	×						0.	0.	0.
(8) Anne Dawson Member	1.00	×						0.	0.	0.
(9) Renee Shane-Boyd Member	1.00	×						0.	0.	0.
(10) Keith Hodgson Member	1.00	×						0.	0.	0.
(11) Judith Bush Member	1.00	×						0.	0.	0.
(12) Scott Barnes Member	1.00	×						0.	0.	0.
(13) Dian P Eddleman Member	1.00	×						0.	0.	0.
(14) Michael Raiber Member	1.00	×						0.	0.	0.

Page 8

Part VII Section A. Officers, Directors,	Trustees,	Key	Emı	plo	yee	s, ar	ıd F	lighest Compe	ensated Emplo	yees (contir	nuea
				(C)							
(A)	(B)				sition			(D)	(E)		(F)	
Name and title	Average	(do not check more than one box, unless person is both an						Reportable	Reportable	Estima	ated am	nount
	hours	office	er and			or/trus		compensation	compensation from related		of other	
	per week (list any	Individual trustee or director	Ins	읔	₩ e	em Hig	For	from the organization (W-2/	organizations (W-2/		pensation the	
	hours for	dire	titut	Officer	y en	hes	Former	1099-MISC/	1099-MISC/		nization	
	related organizations	ct a	ions		Key employee	èe t co	~	1099-NEC)	1099-NEC)	related	organiz	ations
	below	irus	출		yee	mpe						
	dotted line)	ee	Institutional trustee			Highest compensated employee						
						ed						
(15) Samuel Tsugawa	1.00											•
Member	1 00	×						0.	0.			0
(16) Michael Brownell	1.00	×										0
Member	1 00							0.	0.			0
(17) Richard Tengowski Member	1.00	×						0.	0.			0
(18) Dusty Molyneaux	1.00							0.	0.			
Member Molylleaux		×						0.	0.			0
(19) James Daugherty	1.00							· · ·	0.			
Member		×						0.	0.			0
(20) Martha Gabel	1.00											
Member		×						0.	0.			0
(21) Scott Hedgecock	1.00											
Member		×						0.	0.			0
(22) Christopher Woodside	37.50											
Executive Director					×	×		258,662.	0.			0
(23) Amanda Karhuse	37.50											
Assistant Exec Director					×	×		170,248.	0.			0
(24) Chaudlier Moore	37.50				l							
Chief Financial Officer					×	×		228,968.	0.			0
(25) John Donaldson	37.50					.,			_			
Asst Exec Director						×		134,642.	0.			0
1b Subtotal		٠.						792,520.	0.			0
c Total from continuation sheets to Par	-		•		•			130,750.	0.			0
							•	923,270.	0.			0
2 Total number of individuals (including bureportable compensation from the organ		ז נט נו	1056) IIS	tea		e) w	no received mor	e than \$100,000	OT		
- Teportable compensation from the organ	iizatioi i					5					Yes	No
3 Did the organization list any former	officer dire	ector	tru	ıcta	ا م	(ev e	mnl	lovee or higher	st compensated		163	NO
employee on line 1a? If "Yes," complete									=	3		×
4 For any individual listed on line 1a, is th										_		É
organization and related organizations												
individual										4	×	
5 Did any person listed on line 1a receive	or accrue co	ompe	nsat	tion	fro	m an	/ un	related organiza	tion or individual			
for services rendered to the organization										5		×
Section B. Independent Contractors											1	
1 Complete this table for your five hig												00 c
componentian from the organization Dor	ant compan	ootio	n fo	r +h-		ممما		ar andina with a	within the areas	izotion	'a +av	

compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
Aplusify, 7250 Standish Pl #265, Rockville, MD 20855	CMS- member processing	971,328.
Gaylord National Resort, 201 Waterfront St, National Harbor, MD 20745	Conference event	715,061.
Fonteva LLC, 4420 Fairfax DR, Arlington, VA 22203	CMS- data management	171,619.
Walsworth, 306 N Kansas, Marceline, MO 64658	Printing/distribution	147,141.
Anthem Blue Cross & Blue Shield, P.O.Box 11792, Newark, NJ 07101		179,598.
2 Total number of independent contractors (including but not limited to		
received more than \$100,000 of compensation from the organization	5	

Part VIII Statement of Revenue

		Check if Schedule	O co	ntains a re	spon	se or note to ar	າy line in this Pa	art VIII		🗌
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
Contributions, Gifts, Grants, and Other Similar Amounts	1a b c d	Federated campaign Membership dues Fundraising events Related organization	 ns .		1a 1b 1c 1d	4,813,795.				
butions, G ther Simil	e f g	Government grants All other contribution and similar amounts no Noncash contribution	ns, git ot incli	fts, grants, uded above	1e	297,375.				
ontri Ind O		lines 1a–1f 1g				\$				
O "	h	Total. Add lines 1a-	-11 .				5,111,170.			
o l	0-	Dublication				Business Code 900099	1 427	1 427	^	
<u> </u>	2a	Publication re Sponsorships	evei	iue		900099	1,437. 47,150.	1,437. 47,150.	0.	0.
yram Ser Revenue	b	Advertising r				541800	163,180.	163,180.	0.	
E E	c d					900099	112,277.	112,277.	0.	0.
Re		Royalty incom				900099	112,2//.	112,2//.	0.	0.
Program Service Revenue	e f	All other program se	ervice	erevenue						
	g					324,044.				
	3	other similar amoun	ts) .				529,546.	529,546.	0.	0.
	4	Income from investr	nent o			•				
	5	Royalties								
	_	_	_	(i) Rea	l	(ii) Personal				
	6a	Gross rents	6a							
	b	Less: rental expenses	6b							
	C	Rental income or (loss)		_\						
	_d	Net rental income o	r (los	r'		(ii) Other				
	7a	Gross amount from sales of assets other than inventory	_	(i) Securit	lies	(ii) Other				
Revenue	b	Less: cost or other basis and sales expenses .	7a 7b							
Ş	С	Gain or (loss)	7c							
		Net gain or (loss)	10							
Other		Gross income from		ndraising						
0		events (not including of contributions rep 1c). See Part IV, line	oorte	d on line						
	L	•			8a 8b					
	b	Less: direct expense Net income or (loss)				nto.				
	c 9a	Gross income f activities. See Part I	rom	gaming	<u> </u>					
					9a					
		Less: direct expens			9b					
	с 10а	Net income or (loss) Gross sales of ir	nvent	ory, less						
	h	returns and allowan Less: cost of goods			10a 10b	505,379.				
	C	Net income or (loss)				Drv .	505,379.	505,379.	0.	0.
(0		. 101 111001110 01 (1035)	, 11011	. JUIOJ OI II		Business Code	505,519.	505,319.	0.	0.
Miscellaneous Revenue	11a	Meetings and	cons	ventions	3	900099	759,525.	759,525.	0.	0.
scellaneo Revenue	b	Miscellaneous				900099	215,169.	215,169.	0.	0.
ele ye	c						-,	.,		<u> </u>
<u> </u> 8	d	All other revenue					555,297.	555,297.	0.	0.
Σ		Total. Add lines 11a	a–11c	1			1,529,991.			
	12	Total revenue. See						2,888,960.	0.	0.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX . . . (**D**) Fundraising expenses (B) Program service expenses Do not include amounts reported on lines 6b. 7b. (A) Total expenses Management and general expenses 8b, 9b, and 10b of Part VIII. Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic 2 individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 923,270. 480,100. 415,471. 27,699. 6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . Other salaries and wages 1,707,340. 884,110. 765,297. 57,933. Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 9 10 Payroll taxes 11 Fees for services (nonemployees): Management 472,541. 248,441. 25,502. 198,598. Legal Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.) . 12 Advertising and promotion 13 Office expenses 14 Information technology 15 Royalties Occupancy 16 1,036,822. 996,845. 3,367. 36,610. 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings . 488,965. 458,428. 15,193. 15,344. 20 21 Payments to affiliates 22 Depreciation, depletion, and amortization . 23 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) 1,519,447. a Professional services 513,802. 974,712. 30,933. Production and printing 397,425. 393,276. 0. 4,149. Postage and mailing 104,306. 0. 110,677. 6,371. Other 703,745. 475,760. 223,283. 4,702. All other expenses 206,469. 196,568. 9,901. 0. 25 **Total functional expenses.** Add lines 1 through 24e 7,566,701. 4,701,793. 2,652,135. 212,773. Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here [if following SOP 98-2 (ASC 958-720)

P	art X	Balance Sheet			. ago 1
		Check if Schedule O contains a response or note to any line in this Pal	rt X		
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	1,429,487.	1	1,279,559.
	2	Savings and temporary cash investments	112,932.	2	210,500.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	140,164.	4	130,474.
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
S	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
As	9	Prepaid expenses and deferred charges	209,006.	9	259,739.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 1,318,821.	200,000.		235,735.
	b	Less: accumulated depreciation	342,047.	10c	292,937.
	11	Investments—publicly traded securities	6,577,016.	11	6,867,081.
	12	Investments – other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	98,224.
	16	Total assets. Add lines 1 through 15 (must equal line 33)	8,810,652.	16	9,138,514.
	17	Accounts payable and accrued expenses	1,243,093.	17	1,213,850.
	18	Grants payable		18	
	19	Deferred revenue	1,870,553.	19	1,889,691.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	
Liabilities	22	Loans and other 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			
iak	00			22	
_	23	Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties	0.	23	
	25	Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X	0.	24	
		of Schedule D	389,263.	25	293,857.
	26	Total liabilities. Add lines 17 through 25	3,502,909.	26	3,397,398.
nces		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.			
ala	27	Net assets without donor restrictions	5,162,888.	27	5,492,692.
Ä	28	Net assets with donor restrictions	144,855.	28	248,424.
Net Assets or Fund Balances		Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.			
ō	29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
ASS	31	Retained earnings, endowment, accumulated income, or other funds .		31	
et'	32	Total net assets or fund balances	5,307,743.	32	5,741,116.
z	33	Total liabilities and net assets/fund balances	8,810,652.	33	9,138,514.
					Form 990 (2022

Form 990 (2022) Page **12**

Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	8	,00	0,1	30.
2	Total expenses (must equal Part IX, column (A), line 25)	2	7	,56	6,7	01.
3	Revenue less expenses. Subtract line 2 from line 1	3		433,429.		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	5	5,307,743		
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				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	10	5	,74	1,1	72.
Part	XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII			٠.		
				`	f es	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O.	cpiain	on			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a	×	
	If "Yes," check a box below to indicate whether the financial statements for the year were cor	npiled	l 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		×
	If "Yes," check a box below to indicate whether the financial statements for the year were audi	ted o	n a			
	separate basis, consolidated basis, or both:					
_	Separate basis Consolidated basis Both consolidated and separate basis	ماند ! منام				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for ow the audit, review, or compilation of its financial statements and selection of an independent accounts			.	.	
	·			2c	×	
	If the organization changed either its oversight process or selection process during the tax year, e Schedule O.	λριαιΠ	OII			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set for	rth in	the			
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		. 3	a		×
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und					
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such a	udits	. 3	b		

REV 05/17/23 PRO Form **990** (2022)

Form 990: Return of Organization Exempt from Income Tax

Part III: Line 4d (continued)

Continuation Statement

(Code:) (Expenses \$522,897 including grants of \$0) (Revenue \$1,437)	
Publications	
(Code:) (Expenses \$217,843 including grants of \$0) (Revenue \$0)	
Governance	
(Code:) (Expenses \$184,711 including grants of \$0) (Revenue \$0)	
Strategic Relationship Development	
(Code:) (Expenses \$380,511 including grants of \$0) (Revenue \$0)	
Other programs	

Form 990: Return of Organization Exempt from Income Tax

Part VII: Section A (continued)

Continuation Statement

Name and title	Average hours per week (list any hours for related organizations on the right)	Position C1 - Individual trustee or director C2 - Institutional trustee C3 - Officer C4 - Key employee C5 - Highest compensated employee C6 - Former		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations				
		C1	C2	C3	C4	C5	C6			
Mei Lin Strein Director of Finance	37.50					Х		130,750.	0.	0.
								130,750.	0.	0.

SCHEDULE A (Form 990)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

OMB No. 1545-0047

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

Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Name	ame of the organization Employer identification number								
	ATIONAL ASSOCIATION FOR MUSIC EDUCATION 52-6045043								
Par		Reason for Public Char	<u> </u>					ons.	
	The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1								
1							U(D)(1)(A)(I).		
2		A school described in section A hospital or a cooperative hos		·	-	-	\/A\/;;;\		
4		A medical research organization ospital's name, city, and state	n operated in co					(iii). Enter the	
5		An organization operated for tection 170(b)(1)(A)(iv). (Comp	the benefit of a	college or university	owned o	r operate	ed by a government	al unit described ir	
6 7		A federal, state, or local govern An organization that normally described in section 170(b)(1)	nment or governi receives a subs	tantial part of its sup				n the general public	
8		A community trust described in		•	Part II.)				
9	☐ A 0	An agricultural research organi or university or a non-land-gra university:	zation described	in section 170(b)(1)	(A)(ix) op				
10	ros	An organization that normally receipts from activities related support from gross investment acquired by the organization a	to its exempt fur income and unr	nctions, subject to ce related business taxal	rtain exce ble incom	eptions; a le (less se	and (2) no more than ection 511 tax) from	33 ¹ /3% of its	
11		An organization organized and	operated exclus	sively to test for public	c safety.	See sect i	ion 509(a)(4).		
12		An organization organized and							
		one or more publicly supported he box on lines 12a through 12	•				` '` '	` '` '	
а		Type I. A supporting organ the supported organization supporting organization. You	(s) the power to	regularly appoint or e	lect a ma	jority of t			
b		Type II. A supporting organ control or management of to organization(s). You must o	the supporting o	rganization vested in	the same				
С		Type III functionally integrits supported organization(ally integrated with,	
d		Type III non-functionally i that is not functionally integrequirement (see instruction	grated. The orga	nization generally mus	st satisfy	a distribu	ıtion requirement an		
е		Check this box if the organ functionally integrated, or T						e II, Type III	
f		ter the number of supported o	•						
g	Pro	ovide the following information	about the supp	orted organization(s).					
	(i) Na	ame of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in you	rganization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)	
					Yes	No			
(A)									
(B)									
(C)									
(D)									
(E)									
Tota	l								

Schedule A (Form 990) 2022 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

Part II

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2018 **(b)** 2019 (c) 2020 (d) 2021 **(e)** 2022 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge **Total.** Add lines 1 through 3 . . . 4 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) **Public support.** Subtract line 5 from line 4 Section B. Total Support Calendar 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 Net income from unrelated business 9 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.) **Total support.** Add lines 7 through 10 11 Gross receipts from related activities, etc. (see instructions) 12 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage 14 Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f)) % Public support percentage from 2021 Schedule A, Part II, line 14 15 331/3% support test - 2022. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this 331/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check this box and **stop here**. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see 18

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.)

	on A. Public Support						
Calen	dar 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.")	5,513,331.	4,824,331.	4,200,411.	4,342,514.		18,880,587.
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	1,808,150.	2,646,798.	582,786.	631,182.		5,668,916.
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5	7,321,481.	7,471,129.	4,783,197.	4,973,696.		24,549,503.
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .						
b	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						
8	Public support. (Subtract line 7c from						
01:	line 6.)						24,549,503.
	on B. Total Support	(-) 0010	(I-) 0040	(-) 0000	(-I) 000d	(-) 0000	(6) T-+-1
	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6	7,321,481.	7,4/1,129.	4,783,197.	4,9/3,696.		24,549,503.
10a	Gross income from interest, dividends, payments received on securities loans, rents,						
	royalties, and income from similar sources.	305,121.	202 071	1,439,601.	0.		2 126 702
b	Unrelated business taxable income (less	305,121.	302,071.	1,439,601.	0.		2,126,793.
b	section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b	305,121.	382 071	1,439,601.	0.		2,126,793.
11	Net income from unrelated business	303,121.	302,071.	1,130,001.	<u> </u>		2,120,755.
••	activities not included on line 10b, whether						
	or not the business is regularly carried on	0.	21,734.	0.	0.		21,734.
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
13	(Explain in Part VI.)						
. •	(Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11,	7,626,602.	7,874,934.	6,222,798.	4,973,696.		26,698,030.
14	Total support. (Add lines 9, 10c, 11, and 12.)	organization'	s first, second	, third, fourth,	or fifth tax ye		on 501(c)(3)
14	Total support. (Add lines 9, 10c, 11, and 12.)	e organization's	s first, second	, third, fourth,			on 501(c)(3)
14	Total support. (Add lines 9, 10c, 11, and 12.)	e organization' ere rt Percentag	s first, second	, third, fourth,	or fifth tax ye		on 501(c)(3)
14 Section 15	Total support. (Add lines 9, 10c, 11, and 12.)	e organization' ere rt Percentag 8, column (f), d	s first, second e livided by line	, third, fourth,	or fifth tax ye	15	on 501(c)(3)
14 Section 15 16	Total support. (Add lines 9, 10c, 11, and 12.)	e organization' ere rt Percentag 8, column (f), d hedule A, Part	s first, second c e livided by line III, line 15	, third, fourth,	or fifth tax ye		on 501(c)(3)
14 Section 15 16 Section	Total support. (Add lines 9, 10c, 11, and 12.)	e organization' ere	s first, second e livided by line III, line 15 ntage	, third, fourth, 13, column (f)) 	or fifth tax ye	15 16	91.95 % 93.02 %
14 Section 15 16 Section 17	Total support. (Add lines 9, 10c, 11, and 12.)	e organization's rt Percentag 8, column (f), d hedule A, Part come Perce (line 10c, colum	s first, second e livided by line III, line 15 ntage nn (f), divided by	third, fourth, 13, column (f)) by line 13, column	or fifth tax ye	15 16	91.95 % 93.02 %
14 Section 15 16 Section 17	Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the organization, check this box and stop he on C. Computation of Public Suppo Public support percentage for 2022 (line Public support percentage from 2021 Scon D. Computation of Investment In Investment income percentage from 2022 Investment income percentage from 2022	ere organization's ere ert Percentag 8, column (f), dhedule A, Part ecome Perce (line 10c, colum 1 Schedule A, l	s first, second e livided by line III, line 15 ntage nn (f), divided b	third, fourth, 13, column (f)) y line 13, colu	or fifth tax ye	15 16 17 18	91.95 % 93.02 % 7.97 % 6.87 %
14 Section 15 16 Section 17	Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the organization, check this box and stop he on C. Computation of Public Support Public support percentage for 2022 (line Public support percentage from 2021 Scon D. Computation of Investment In Investment income percentage from 2022 Investment income percentage from 202 331/3% support tests—2022. If the organ	e organization's ere rt Percentag 8, column (f), d hedule A, Part come Perce (line 10c, colum 1 Schedule A, l hization did not	s first, second e livided by line III, line 15 ntage nn (f), divided by Part III, line 17 check the box	third, fourth, 13, column (f)) y line 13, column on line 14, an	or fifth tax ye	15 16 17 18 ore than 331/3	91.95 % 93.02 % 7.97 % 6.87 % 3%, and line
14 Section 15 16 Section 17 18 19a	Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the organization, check this box and stop he on C. Computation of Public Support Public support percentage for 2022 (line Public support percentage from 2021 Scon D. Computation of Investment In Investment income percentage from 2022 Investment income percentage from 202 33¹/3% support tests—2022. If the organ 17 is not more than 33¹/3%, check this box	er organization's ere rt Percentag 8, column (f), d hedule A, Part come Perce (line 10c, colun 1 Schedule A, l nization did not and stop here	s first, second e livided by line III, line 15 ntage nn (f), divided by Part III, line 17 check the box The organization	third, fourth, 13, column (f)) by line 13, column on line 14, and an qualifies as	mn (f))	15 16 17 18 ore than 331/2 orted organiza	91.95 % 93.02 % 7.97 % 6.87 % 8%, and line tion
14 Section 15 16 Section 17	Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the organization, check this box and stop he on C. Computation of Public Support Public support percentage for 2022 (line Public support percentage from 2021 Scon D. Computation of Investment Interestment income percentage from 2022 Investment income percentage from 202 33¹/3% support tests—2022. If the organ 17 is not more than 33¹/3%, check this box 33¹/3% support tests—2021. If the organic	e organization's ere rt Percentag 8, column (f), d hedule A, Part come Perce (line 10c, colun 1 Schedule A, l nization did not and stop here zation did not c	s first, second e livided by line III, line 15 ntage nn (f), divided by Part III, line 17 check the box The organization	third, fourth, 13, column (f)) by line 13, colu c on line 14, ar on qualifies as a line 14 or line	mn (f))	15 16 17 18 orted organizations more than	91.95 % 93.02 % 7.97 % 6.87 % 9%, and line tion × 331/3%, and
14 Section 15 16 Section 17 18 19a	Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the organization, check this box and stop he on C. Computation of Public Support Public support percentage for 2022 (line Public support percentage from 2021 Scon D. Computation of Investment In Investment income percentage from 2022 Investment income percentage from 202 33¹/3% support tests—2022. If the organ 17 is not more than 33¹/3%, check this box	er organization's ere	s first, second e livided by line III, line 15 ntage nn (f), divided by Part III, line 17 check the box The organization heck a box on lere. The organization	third, fourth, 13, column (f)) y line 13, column on line 14, and on qualifies as a line 14 or line ization qualifies	mn (f))	15 16 17 18 ore than 331/3 orted organizatis is more than upported organizations.	91.95 % 93.02 % 7.97 % 6.87 % 8%, and line tion 331/3%, and nization

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.)

Se

Secti	on A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5а	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).	5a		
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?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5с		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or			
	benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with record to a substantial contributor.			
8	with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i> Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line	7		
0	7? If "Yes," complete Part I of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>	9b		
С	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 .	9c		
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.	10a		
h	Did the organization have any excess business holdings in the tay year? (I se Schedule C. Form 1720, to			

determine whether the organization had excess business holdings.)

Part	Supporting Organizations (continued)			
			Yes	No
11 a	Has the organization accepted a gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
a	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
	A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c,</i>	110		
	provide detail in Part VI .	11c		
Secti	on B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Secti	on 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		
Secti	on 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	instru	ction	s).
a b c 2	 ☐ The organization satisfied the Activities Test. Complete line 2 below. ☐ The organization is the parent of each of its supported organizations. Complete line 3 below. ☐ The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity Activities Test. Answer lines 2a and 2b below. 	(see in	struct Yes	
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.	2 a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3 a	Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No," provide details in Part VI.</i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

				•
Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	gani	izations	
1	☐ Check here if the organization satisfied the Integral Part Test as a qualifying	g tru	st on Nov. 20, 1970 (expl	ain in Part VI). See
	instructions. All other Type III non-functionally integrated supporting organ	nizat	ions must complete Sect	ions 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 (see instructions)	ally i	ntegrated Type III suppor	rting organization

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

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service For Organizations Exempt From Income Tax Under section 501(c) and section 527 Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

• Se	ection 501(c)(4), (5), or (6) orga	nizations: Complete Part III.				
	of organization			Employer ider	ntification number	
		FOR MUSIC EDUCATION		52-60450		
Part		e organization is exempt unde	er section 501(d			
1		the organization's direct and inc				ons for
2	Political campaign activit	y expenditures. See instructions .		\$		
3		cal campaign activities. See instruc				
Part		e organization is exempt unde				
1 2 3 4a b Part 1	Enter the amount of any of the organization incurred Was a correction made? If "Yes," describe in Part I-C Complete if the Enter the amount direct activities	e organization is exempt under ly expended by the filing organiz	managers under m 4720 for this year er section 501(a ation for section	ear?	Yes	No No
2		filing organization's funds contributies				
3 4 5	line 17b	expenditures. Add lines 1 and 2	· · · · · · · · · · · · · · · · · · ·			No
	organization made payme the amount of political co	ents. For each organization listed, entributions received that were profund or a political action committee	enter the amount mptly and directly	paid from the filing organi delivered to a separate p	zation's funds. Alsolitical organization	o entei n, such
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of politicontributions receive promptly and directive delivered to a sepa political organizatif none, enter -0	ed and ctly arate ion.
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						

						•
Par	II-A Complete if the organization section 501(h)).	on is exempt	under section 5	01(c)(3) and filed	d Form 5768 (ele	ection under
A (heck if the filing organization belongs EIN, expenses, and share of exceptions.	art IV each affiliate	d group member's	name, address,		
В	heck \square if the filing organization checked	box A and "lin	nited control" provi	sions apply.		
	Limits on Lob (The term "expenditures" r	bying Expendineans amount)	(a) Filing organization's totals	(b) Affiliated group totals
1a					5,200.	
b	Total lobbying expenditures to influence			•	0.	
c	Total lobbying expenditures (add lines	•	• •	•	5,200.	
c	Other exempt purpose expenditures .	•			0.	
e	Total exempt purpose expenditures (ac				5,200.	
f	Lobbying nontaxable amount. Enter columns.		•			
		. 71 1. 1. 1			1,040.	
	If the amount on line 1e, column (a) or (b) i		g nontaxable amoun	IT IS:		
	Not over \$500,000		amount on line 1e.	Φ500.000		
	Over \$500,000 but not over \$1,000,000		us 15% of the excess	· · · · · · · · · · · · · · · · · · ·		
	Over \$1,000,000 but not over \$1,500,000		us 10% of the excess			
	Over \$1,500,000 but not over \$17,000,000		us 5% of the excess of	over \$1,500,000.		
	Over \$17,000,000 Grassroots nontaxable amount (enter 2	\$1,000,000.			260	
g h					260.	
:	Subtract line 1g from line 1a. If zero or I				4,940.	
:	If there is an amount other than zero	•	 . 1h or line 1i did	· · · · · · · · · · · · · · · · · · ·	4,160.	
,	reporting section 4911 tax for this year	_		•	Г	Yes X No
			Period Under Sec			
	(Some organizations that made a se See th	ection 501(h) e e separate ins	lection do not hav tructions for lines	re to complete all 2a through 2f.)	of the five columi	ns below.
	Lobbyin	g Expenditure	s During 4-Year A	veraging Period		
	Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) Total
2 a	, ,					
b	Lobbying ceiling amount (150% of line 2a, column (e))					
c	Total lobbying expenditures					
c						
e	Grassroots ceiling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					

BAA REV 05/17/23 PRO Schedule C (Form 990) 2022

	(election under section 501(h)).	(;	a)		(b)	
	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed ription of the lobbying activity.	Yes	No	_	moun	
		163	NO	^	illouil	
1	During the year, did the filing organization attempt to influence foreign, national, state, or local					
	legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			-		
C	Media advertisements?					
d	Mailings to members, legislators, or the public?					
e	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
j	Total. Add lines 1c through 1i					
2 a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c 501(c)(6).	(5),	or se	ection		
	****				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3 Part	Did the organization agree to carry over lobbying and political campaign activity expenditures from the	•	-			
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" Ol answered "Yes."		Part		line 3	B, is
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	s of				
а	Current year		2a			
b	Carryover from last year		2b			
С	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb					
	and political expenditures next year?		4			
5	Taxable amount of lobbying and political expenditures. See instructions		5			
Par	t IV Supplemental Information			•		
	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gro	oup lis	t); Pa 	ırt II-A, 	lines 1	l and

Part IV	Supplemental Information (continued)

Page 4

Schedule C (Form 990) 2022

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name o	the organization		Employer identification number
NAT	ONAL ASSOCIATION FOR MUSIC EDUCATION		52-6045043
Par	Organizations Maintaining Donor Advi	sed Funds or Other Similar Fund	ds or Accounts.
	Complete if the organization answered "	Yes" on Form 990, Part IV, line 6.	
	·	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year) .		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor		eld in donor advised
•	funds are the organization's property, subject to the		
6	Did the organization inform all grantees, donors, ar		
	only for charitable purposes and not for the benefit		
	conferring impermissible private benefit?		
Par	Conservation Easements.		
ı aı	Complete if the organization answered "	Yes" on Form 990 Part IV line 7	
1	Purpose(s) of conservation easements held by the c		
٠.	Preservation of land for public use (for example, recre		f a historically important land area
	Protection of natural habitat	,	f a certified historic structure
	Preservation of open space	Freservation o	a certified flistoric structure
2	Complete lines 2a through 2d if the organization hel	ld a qualified conservation contribution	n in the form of a conservation
_	easement on the last day of the tax year.	a a quamica concentation continuation	Held at the End of the Tax Year
a	Total acreage restricted by conservation easements		
b	Number of conservation easements on a certified hi		
c d	Number of conservation easements included in (c) a		
u			
3	Number of conservation easements modified, trans		
3	tax year	sierred, released, extiliguished, or terri	illiated by the organization during the
4	Number of states where property subject to conserv	vation essement is located	
5	Does the organization have a written policy reg		pection, handling of
•	violations, and enforcement of the conservation eas		
6	Staff and volunteer hours devoted to monitoring, inspec		
U	otali and volunteer flours devoted to filoritoring, inspec	ing, harding of violations, and emoronic	g conservation easements during the year
7	Amount of expenses incurred in monitoring, inspecting	a handling of violations, and enforcing	conservation easements during the year
•	7 through or expenses incurred in mornioring, inepocing	g, nanding of violations, and emoroting t	consolvation casements daming the year
8	Does each conservation easement reported on line 2	2(d) above satisfy the requirements of	section 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports of		
	balance sheet, and include, if applicable, the text of		
	organization's accounting for conservation easement	nts.	
Part	III Organizations Maintaining Collections	of Art, Historical Treasures, or	Other Similar Assets.
	Complete if the organization answered "		
1a	If the organization elected, as permitted under FAS	B ASC 958, not to report in its revenu	le 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 t	o its financial statements that describe	es these items.
b	If the organization elected, as permitted under FAS	BB ASC 958, to report in its revenue s	statement and balance sheet works of
	art, historical treasures, or other similar assets held		
	provide the following amounts relating to these item		
	(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,		
	following amounts required to be reported under FA		3
а	Revenue included on Form 990, Part VIII, line 1 .		\$

b Assets included in Form 990, Part X

Part	Organizations Maintaining	Collections of A	Art, Historical	Treasures, or	Other Similar Ass	sets (continued)
3	Using the organization's acquisition, a collection items (check all that apply):	accession, and oth	ner records, che	ck any of the foll	owing that make si	gnificant use of its
а	☐ Public exhibition		d Loar	or exchange pro	gram	
b	☐ Scholarly research		e 🗌 Othe	er		
С	☐ Preservation for future generations					
4	Provide a description of the organizat XIII.		and explain how	they further the o	organization's exem	pt purpose in Part
5	During the year, did the organization	solicit or receive	donations of art	. historical treasu	res. or other simila	r
	assets to be sold to raise funds rather					
Part	IV Escrow and Custodial Arra	ingements	· · · · · · · · · · · · · · · · · · ·			
	Complete if the organization 990, Part X, line 21.	answered "Yes'			•	
1a	Is the organization an agent, trustee, included on Form 990, Part X?					t □ Yes □ No
b	If "Yes," explain the arrangement in Pa					
						nount
С	Beginning balance			_	1c	
d	Additions during the year				1d	
е	Distributions during the year				1e	
f	Ending balance			_	1f	
2 a	Did the organization include an amour				,	
b	If "Yes," explain the arrangement in Pa	art XIII. Check here	e if the explanation	on has been prov	ided on Part XIII .	<u> L</u>
Part						
	Complete if the organization					
		(a) Current year	(b) Prior year	(c) Two years back		
1a	Beginning of year balance	89,663.	92,802.	94,942	. 93,457.	92,597.
b	Contributions	100,000.				
С	Net investment earnings, gains, and					
	losses	717.	11.	10	. 1,635.	1,860.
d	Grants or scholarships					
е	Other expenditures for facilities and					
	programs	1,150.	3,150.	2,150	. 150.	1,000.
f	Administrative expenses					
g	End of year balance	189,230.	89,663.	92,802	. 94,942.	93,457.
2	Provide the estimated percentage of t	he current year en	d balance (line 1	g, column (a)) hel	d as:	
а	Board designated or quasi-endowmer	nt9	6			
b	Permanent endowment	%				
С	Term endowment %					
	The percentages on lines 2a, 2b, and	2c should equal 10	00%.			
3a	Are there endowment funds not in the	e possession of th	e organization th	nat are held and	administered for the	Э
	organization by:					Yes No
	(i) Unrelated organizations					3a(i)
	(ii) Related organizations					3a(ii)
b	If "Yes" on line 3a(ii), are the related or	rganizations listed	as required on S	Schedule R?		3b
4	Describe in Part XIII the intended uses	of the organization	n's endowment	funds.		
Part	VI Land, Buildings, and Equip	ment.				
	Complete if the organization	answered "Yes'	on Form 990,	Part IV, line 11a	a. See Form 990,	Part X, line 10.
	Description of property	(a) Cost or oth	ner basis (b) Cost	or other basis (e	c) Accumulated	(d) Book value
		(investme	ent) ((other)	depreciation	
1a	Land		0.			0.
b	Buildings					
С	Leasehold improvements					
d	Equipment			209,971.	1,025,884.	184,087.
е	Other			108,850.		108,850.
Total.	Add lines 1a through 1e. (Column (d) n	nust equal Form 99	90. Part X. colum	n (B), line 10c.) .		292,937.

 $\mathsf{B}\mathsf{A}\mathsf{A}$

Part VII	Investments – Other Securities.			rage C
r are vii	Complete if the organization answered "Yes" on For	m 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) Met	hod of valuation: -of-year market value
(1) Financial	derivatives			
(2) Closely h	neld equity interests			
(3) Other				
(G) (H)				
	mn (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments – Program Related.			
	Complete if the organization answered "Yes" on For	m 990, Part IV, line	11c. See Form	990, Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Met	hod of valuation: -of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	mn (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets.			
i di cix	Complete if the organization answered "Yes" on For	m 990. Part IV. line	11d. See Form	990. Part X. line 15.
	(a) Description	,,		(b) Book value
(1) Operat	ting lease right-of-use assets			98,224.
(2)				,
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	mn (b) must equal Form 990, Part X, col. (B) line 15.)			98,224.
Part X	Other Liabilities.	· · · · · · ·		90,224.
	Complete if the organization answered "Yes" on For line 25.	m 990, Part IV, line	11e or 11f. See	e Form 990, Part X,
1.	(a) Description of liability			(b) Book value
(1) Federal in				. ,
(2) Deferi	red rent			0.
	red gain on sale of building			174,736.
(4) Operat	ting lease liability			119,121.
(5)				
(6)				
(7)				
(8)				
(9)	(1)			
	mn (b) must equal Form 990, Part X, col. (B) line 25.)			293,857.
	s liability for uncertain tax positions under FASB ASC 740. Check			

Part	Reconciliation of Revenue per Audited Financial Statemers Complete if the organization answered "Yes" on Form 990, I			Returr	1.
1	Total revenue, gains, and other support per audited financial statements			1	0 001 000
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			•	8,021,230.
a	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b			
C	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)				
e	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	8,021,230.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				0,022,200,
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	12.)		5	8,021,230.
Part				r Retu	ırn.
	Complete if the organization answered "Yes" on Form 990, I	⊃art IV, line	e 12a.		
1	Total expenses and losses per audited financial statements			1	7,566,761.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)				
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	7,566,761.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)				
_	Add lines 4s and 4b			4.	
C 5	Add lines 4a and 4b			4c	7 566 761
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line			4c 5	7,566,761.
5 Part	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line XIII Supplemental Information.	e 18.)	<u> </u>	5	
5 Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line	e 18.) d 4; Part IV,	lines 1b and 2b	5 ; Part V	, line 4; Part X, line
5 Part Provid	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line XIII Supplemental Information . le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.) d 4; Part IV,	lines 1b and 2b	5 ; Part V	, line 4; Part X, line
5 Part Provid	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line XIII Supplemental Information . le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.) d 4; Part IV,	lines 1b and 2b	5 ; Part V	, line 4; Part X, line
5 Part Provid	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line XIII Supplemental Information . le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.) d 4; Part IV,	lines 1b and 2b	5 ; Part V	, line 4; Part X, line
5 Part Provid	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line XIII Supplemental Information . le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.) d 4; Part IV,	lines 1b and 2b	5 ; Part V	, line 4; Part X, line
5 Part Provid	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line XIII Supplemental Information . le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.) d 4; Part IV,	lines 1b and 2b	5 ; Part V	, line 4; Part X, line
5 Part Provid	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line XIII Supplemental Information . le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.) d 4; Part IV,	lines 1b and 2b	5 ; Part V	, line 4; Part X, line
5 Part Provid	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line XIII Supplemental Information . le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.) d 4; Part IV,	lines 1b and 2b	5 ; Part V	, line 4; Part X, line
5 Part Provid	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line XIII Supplemental Information . le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.) d 4; Part IV,	lines 1b and 2b	5 ; Part V	, line 4; Part X, line
5 Part Provid	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line XIII Supplemental Information . le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.) d 4; Part IV,	lines 1b and 2b	5 ; Part V	, line 4; Part X, line
5 Part Provid	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line XIII Supplemental Information . le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.) d 4; Part IV,	lines 1b and 2b	5 ; Part V	, line 4; Part X, line
5 Part Provid	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line XIII Supplemental Information . le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.) d 4; Part IV,	lines 1b and 2b	5 ; Part V	, line 4; Part X, line
5 Part Provid	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line XIII Supplemental Information . le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.) d 4; Part IV,	lines 1b and 2b	5 ; Part V	, line 4; Part X, line
5 Part Provid	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line XIII Supplemental Information . le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.) d 4; Part IV,	lines 1b and 2b	5 ; Part V	, line 4; Part X, line
5 Part Provid	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line XIII Supplemental Information . le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.) d 4; Part IV,	lines 1b and 2b	5 ; Part V	, line 4; Part X, line
5 Part Provid	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line XIII Supplemental Information . le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.) d 4; Part IV,	lines 1b and 2b	5 ; Part V	, line 4; Part X, line
5 Part Provid	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line XIII Supplemental Information . le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.) d 4; Part IV,	lines 1b and 2b	5 ; Part V	, line 4; Part X, line
5 Part Provid	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line XIII Supplemental Information . le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.) d 4; Part IV,	lines 1b and 2b	5 ; Part V	, line 4; Part X, line
5 Part Provid	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line XIII Supplemental Information . le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.) d 4; Part IV,	lines 1b and 2b	5 ; Part V	, line 4; Part X, line
5 Part Provid	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line XIII Supplemental Information . le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.) d 4; Part IV,	lines 1b and 2b	5 ; Part V	, line 4; Part X, line
5 Part Provid	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line XIII Supplemental Information . le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.) d 4; Part IV,	lines 1b and 2b	5 ; Part V	, line 4; Part X, line
5 Part Provid	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line XIII Supplemental Information . le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.) d 4; Part IV,	lines 1b and 2b	5 ; Part V	, line 4; Part X, line

BAA

Schedule D (Fo	rm 990) 2022	Page \$
Part XIII	Supplemental Information (continued)	

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.

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

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

NATI	CONAL ASSOCIATION FOR MUSIC EDUCATION 52-6045043			
Part	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		
2	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	×	
_				
3	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			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
7	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		×
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		×
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.	10		
	is any example to go to the posterior and provide the appropriate annual to the case in an in-			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the revenues of:			
а	The organization?	5a		×
b	Any related organization?	5b		×
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the net earnings of:			
а	The organization?	6a		×
b	Any related organization?	6b		×
	If "Yes" on line 6a or 6b, describe in Part III.			
_	E			
7	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	7		×
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			
	in Part III	8		×
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
J	Regulations section 53.4958-6(c)?	9		
				1

9

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				(iii) Other reportable		(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation in column (B) reported as deferred on prior
		Compondation	Companion	compensation				Form 990
Christopher Woodside	(i)	258,662.	0.	0.	0.	0.	258,662.	0.
1 Executive Director	(ii)	0.	0.	0.	0.	0.	0.	0.
Amanda Karhuse	(i)	170,248.	0.	0.	0.	0.	170,248.	0.
2 Assistant Exec Director		0.	0.	0.	0.	0.	0.	0.
Chaudlier Moore	(i)	228,968.	0.	0.	0.	0.	228,968.	0.
3 Chief Financial Officer	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
4	(ii)							
	(i)							
5	(ii)							
	(i)							
6	(ii)							
	(i)							
7	(ii)							
	(i)							
8	(ii)							
	(i)							
9	(ii)							
	(i)							
10	(ii)							
	(i)							
	(ii)							
	(i) (ii)							
12	(i)							
	(ii)							
13	(i)							
44	(ii)		 					
14	(i)							
45	(ii)		 					
15	(i)							
16	(ii)							
IV	1.17						1	

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 p	ar
or any additional information.	

Schedule J (Form 990) 2022

Page 3

SCHEDULE O (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 Internal Revenue Service Name of the organization

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

Open to Public Inspection **Employer identification number**

NATIONAL ASSOCIATION FOR MUSIC EDUCATION 52-6045043 Pt VI, Line 6: Explanation of classes of members or shareholders: NAFME has 45000 active voting members. Pt VI, Line 7a: Members use an electric voting system govern actions. Pt VI, Line 7b: Changes in NAFME bylaws require voting by active members. Pt VI, Line 11b: Form 990 is first reviewed by the Chief Financial Officer along with the preparer (CPA Firm). The Form 990 is then reviewed by the Executive Director. The Form 990 is then made available to the Finance Committee for review. The Form is then made available to the National Executive Board for review. After all reviews are completed and no changes are necessary, the Form 990 is filed with the Internal Revenue Service. Pt VI, Line 12c: Process for annually monitoring conflict of interest policy: All board members agree to declare conflicts of interest between their personal or professional life and their position on the board, avoid using their board membership or NAFME's staff, services, equipment, resources, or property for their advantage or that of their friends, relatives or other third parties, and abstain from boting orr discussion when appropriate, all in acccordance with NAFME's conflict of interest policy. The Board of Directors are responsible for self-goverance including the investigation of any claims of misconduct made about a director and disciplinary action for any claims of misconduct found to be valid. The board may modify these procedures for reviewing board member conduct from time to time. All members of the board consent to the implementation of the then current procedures if any claims of misconduct are made against them. 1) Complaints about any officer or director may be made to the President or any other officer or director of NAFME. Anyone receiving a compalint shall promtly forward ti to the President for investigation. Complaints about the President shall be promtly forwarded ti

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the immediate Past President or, in the absence of the immediated past president, to any other past president. 2) All complaints of misconduct will be kept confidential except to the necessary to conduct a through investigation. 3)A material violation of the code of conduct is one that results in harmto NAFME or its affiliates. 4) Direct or indirect retaliation of any kind by NAFME or its officers, director, employees, members, or agent against any individual who makes, initiates or is involved in making of a complaint is strictly prohibited. This shall be strictly enforced by the board. Complaints made with knowledge that they are false are strictly prohibited. This prohibition on making of knowingly false complaints shall be strictly enforced by the board. 5) Upon reeceipt and preliminary review of each complaint, the president may conclude, in the President's sole discretion, that the complaint: (A) contains factually unreliable or insufficient information, or (B) is patently frivolous or trivial. In such changes, The President may determine that the complaint does not constitute a potentially actionable compliant that would justify bringing it before the committee for determination of whether there has been a material violation of the code of conduct. If so, such complaint shall be dismissed without prejudice by the President, who shall provide written notice to the person who submitted the complaint of its disposition.All such preliminary dispositions of complaints by the President shall be immeiately reported in writing to all members of the committee. 6) Notice of investigation: If a complaint is deemed by the President on a preliminary basis to be a potentially actionable complaint, the President shall provide a written notice to the director whose conduct has been called into question, advising the director that an investigation is being initiated. The President shall also provide written notice to the person who submitted the complaint that the complaint is being reviewed by the committee. 7) Review of complaint: For each complaint that the President believes is potentially actionable, the President shall authorize an investigation into its specific

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facts or circumstances to whatever extent is necessary in order to clarify, expand or corrobarate the information provided in the complaint and in orderr to assist the committee in determining whether charges should be brought against the director. The committee may be assisted by NAFME staff, legal counsel and outside experts, as needed, so long as all persons involved in the investigation agree to maintain the complete confidentially of the investigation. The committee or its agents may contact the person who submitted the complaint, the director who is the subject of the charge, or any other persons who may have knowledge of the facts and circumstances surrouunding the complaint. 8) The committee determination: The committee shall either dismiss the complaint with prejudice or prepare written charges against the director. Written charges shall explain the alleged conduct and explain why the conduct constitutes grounds for disciplinary. The committee shall also produce a written report with the results of its investigation. The person who made the complaint shall be notified of the committee's determination but shall not be provided with a copyof any written charges of the report. The director in question shall be notified of the committee's determination. Copies of written charges and the committee's report shall be provided to the President, the committee members, the director against whom the charges were filed. 9) Hearing: If the committee recommends charges be brought, it shall hold a hearing, in person, by telephone or video conference. The President shall present the committee's report with the assistance of NAFME's legalcounsel. The charged director may present a defense and may be represented by legal counsel, at his or her own expense. The President shall determine the rules of evidence that shall apply to the hearing and may limit the presentation of oral or written testimony by witnesses. The charged director may waive the right to a hearing in which case the committee may deliberate based on its report. 10) Determination of violation: Upon completion of its investigation and the hearing, the committee shall determine

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NATIONAL ASSOCIATION FOR MUSIC EDUCATION 52-6045043 by majority vote, upon a preponderance of the evidence, whether or not there has been a violation of the code of conduct and whether the board impose sanctions. If the committee find there has been a violation, the committee shall recommendan appropriate sanction. The committee's written recommendation shall be presented to the board. 11) Imposition of sanctions: The board shall determine, by majority vote, the appropriate sanction to be impose on any director found to have violated the NAFME code of conduct. Sanctions may include a written reprimand, censure, suspension from board membership for a period of time, or permanent expulsion from the board.12) Resignation: If a board member who is the subject of a complaint voluntarily resigns in writing his or her position on the board during the pendency of a complaint, the complaint shall be dismissed without prejudice and without any further action by the committee or the board. In the event of a resignation, the person who made the complaint shall be notified in writing of the fact and date of the resignation and that the boarf has dismissed the complaint without prejudice. Pt VI, Line 15a: Compensation of officers: The National Executive Board reviews and approves compensation of the Executive Director. Salary increase is linked to an appraisal conducted by the Executive committee with input from and consultation with the National Executive Board. Pt VI, Line 15b: Process for determining compensation of officers: The National Board reviews and approves compensation of the Executive Director. Salary increase is linked to an appraisal conducted by the Executive Committee. Pt VI, Line 19: Governing documents and the conflict of interest policy are made available upon request. Annual audited financial statements and tax returns are on NAFME's website. Pt III, Line 4d: Expenses: \$522,897 including grants of: \$0 Revenue: \$1,437

Schedule O (Form 990) 2022	Page 2
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Name of the organization	Employer identification number
NATIONAL ASSOCIATION FOR MUSIC EDUCATION	52-6045043
Description: Publications	
Description: Fubiteations	
Expenses: \$217,843 including grants of: \$0 Revenue: \$0	
Paggription: Covernance	
Description: Governance	
Expenses: \$184,711 including grants of: \$0 Revenue: \$0	
Description (Charteria Deletionalia Decelorment	
Description: Strategic Relationship Development	
Expenses: \$380,511 including grants of: \$0 Revenue: \$0	
Description: Other programs	
Description: Other programs	

Form **8879-TE**

IRS e-file Signature Authorization for a Tax Exempt Entity

For calendar year 2022, or fiscal year beginning Jul 1 , 2022, and ending Jun 30, 2023

2022

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Do not send to the IRS. Keep for your records. Go to www.irs.gov/Form8879TE for the latest information.

Name of filer EIN or SSN NATIONAL ASSOCIATION FOR MUSIC EDUCATION 52-6045043 Name and title of officer or person subject to tax CHAUDLIER MOORE, CHIEF FINANCIAL & ADMINISTRATOR OFFICER Type of Return and Return Information Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I. **1a** Form 990 check here **b Total revenue**. if any (Form 990, Part VIII, column (A), line 12) . . . Form 990-EZ check here . . **b Total revenue**, if any (Form 990-EZ, line 9) Form 1120-POL check here . . **b Total tax** (Form 1120-POL, line 22) 3a Form 990-PF check here . . . **b** Tax based on investment income (Form 990-PF, Part V, line 5) . 4a 4b **b Balance due** (Form 8868, line 3c) Form 8868 check here . . . X 0. 5b 6a Form 990-T check here . . . **b Total tax** (Form 990-T, Part III, line 4) Form 4720 check here . . . **b Total tax** (Form 4720, Part III, line 1) 7a 7b Form 5227 check here **b FMV** of assets at end of tax year (Form 5227, Item D) **Form 5330** check here . . . □ **b Tax due** (Form 5330, Part II, line 19) 9h 9a Form 8038-CP check here . . . **b** Amount of credit payment requested (Form 8038-CP, Part III, line 22) 10a **Declaration and Signature Authorization of Officer or Person Subject to Tax** Part II Under penalties of perjury, I declare that 🗵 I am an officer of the above entity or 🗌 I am a person subject to tax with respect to (name of entity) , (EIN) and that I have examined a copy of the 2022 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal. PIN: check one box only ▼ I authorize F S TAYLOR & ASSOCIATES P C to enter my PIN as my signature Enter five numbers, but on the tax year 2022 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen. As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2022 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. 10/31/2023 Signature of officer or person subject to tax **Certification and Authentication** Part III **ERO's EFIN/PIN.** Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. Do not enter all zeros I certify that the above numeric entry is my PIN, which is my signature on the 2022 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. Date 03/22/2024 ERO's signature ERO Must Retain This Form - See Instructions Do Not Submit This Form to the IRS Unless Requested To Do So