**Return of Organization Exempt From Income Tax** 

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

A F	For the	$\pm$ 2023 calendar year, or tax year beginning $$ JUL $1,$ $2023$ and e	ending J	<u>UN 30, 2024</u>			
	Check if applicable	C Name of organization		D Employer identific	cation number		
	Addres						
	Name change	Doing business as		51-00669	34		
	Initial return Final return/	1101 WASHINGTON STREET	Room/suite	E Telephone number 302-762-1132			
	termin ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	2,828,609.		
	Ameno return	WILMINGTON, DE 19802-2151		H(a) Is this a group re	eturn		
	Applic tion	F Name and address of principal officer. CITKID DIOOI		for subordinates	? Yes X No		
	pendir	SAME AS C ABOVE		<b>H(b)</b> Are all subordinates in	cluded? Yes No		
<u> 1                                   </u>	Гах-ехе	empt status: $\overline{\mathbf{X}}$ 501(c)(3) $\overline{}$ 501(c) ( ) (insert no.) $\overline{}$ 4947(a)(1) or	r 527	If "No," attach a	list. See instructions		
	Websit			H(c) Group exemptio			
	orm of	organization: X Corporation Trust Association Other  Summary	L Year	of formation: 1924  N	1 State of legal domicile: DE		
_	1	Briefly describe the organization's mission or most significant activities: PROVI	DE OP	PORTUNITY FO	OR ANYONE		
Governance		TO ACCESS EXCELLENCE IN MUSIC TRAINING, ED	DUCATI	ON, AND EXP	ERIENCES.		
rna	2	Check this box if the organization discontinued its operations or dispose	ed of more	than 25% of its net ass	sets.		
ove	3	Number of voting members of the governing body (Part VI, line 1a)		3	14		
		Number of independent voting members of the governing body (Part VI, line 1b)		4	14		
es &	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)			141		
ξį	6	Total number of volunteers (estimate if necessary)			60		
Activities &	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			0.		
_	b	Net unrelated business taxable income from Form 990-T, Part I, line 11	<u></u>		0.		
				Prior Year	Current Year		
ě	8	Contributions and grants (Part VIII, line 1h)		797,958.	870,499.		
Revenue	9	Program service revenue (Part VIII, line 2g)		1,825,587.	1,950,969.		
Rev	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		3,551.	5,975.		
_	יין	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		2,456.	1,166.		
_		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,629,552.	2,828,609.		
	1	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		90,608.	172,719.		
	1	Benefits paid to or for members (Part IX, column (A), line 4)		2,395,540.	2,642,324.		
ses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		2,393,340.	2,042,324.		
Expenses	10a	Professional fundraising fees (Part IX, column (A), line 11e)  Total fundraising expenses (Part IX, column (D), line 25)  357,00	·····	0.	0.		
Ä	170	Total fundraising expenses (Part IX, column (D), line 25) 357, 00  Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,125,974.	1,136,981.		
	''	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		3,612,122.	3,952,024.		
	1	Revenue less expenses. Subtract line 18 from line 12		-982,570.	-1,123,415.		
	19	neveriue less experises. Subtract iille 16 from line 12	Bei	ginning of Current Year	End of Year		
Net Assets or	20	Total assets (Part X, line 16)		14,411,363.	14,607,288.		
ASSE	21	Total liabilities (Part X, line 10)		1,363,734.	1,445,230.		
Net.	22	Net assets or fund balances. Subtract line 21 from line 20		13,047,629.	13,162,058.		
Pá	art II	Signature Block					
Und	er pena	lties of perjury, I declare that I have examined this return, including accompanying schedules a	and stateme	nts, and to the best of my	knowledge and belief, it is		
		t, and complete. Declaration of preparer (other than officer) is based on all information of whic		· · ·			
	,						
Sig	n	Signature of officer		Date			
Her		CHRIS STOUT, BOARD CHAIR					
		Type or print name and title					
		Print/Type preparer's name Preparer's signature		Date Check	PTIN		
Paid	j	JEFFREY A KOWALCZYK CPA JEFFREY A KOWALC	ZYK 0	5/12/25 self-employ			
Prep	parer	Firm's name BARBACANE THORNTON & COMPANY LLP		1-0229493			
Use	Only	Firm's address 503 CARR RD SUITE 100					
		WILMINGTON, DE 19809		Phone no. 30	2-478-8940		
May	y the IF	S discuss this return with the preparer shown above? See instructions			Yes No		

Page 2

Га	Chack if Cahadula O contains a vacanage or note to any line in this Dout III	X
_	<u> </u>	<u>~</u> _
1	Briefly describe the organization's mission: IT IS THE MISSION OF THE MUSIC SCHOOL OF DELAWARE TO PROVIDE	
	EXCELLENCE IN MUSIC EDUCATION, TRAINING, AND EXPERIENCES FOR PEOPLE OF	
	ALL AGES AND ABILITIES.	
	THE HOLD IN THE INTERIOR	_
2	Did the organization undertake any significant program services during the year which were not listed on the	
_	prior Form 990 or 990-EZ?	No
	If "Yes," describe these new services on Schedule O.	••
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	No
•	If "Yes," describe these changes on Schedule O.	••
4	Describe the organization's program service accomplishments for each of its three largest program services, as 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 \$2,539,458. including grants of \$172,719. ) (Revenue \$1,950,969.	• )
	IN FY24, THE MUSIC SCHOOL OF DELAWARE SERVED YOUTH AND ADULT STUDENTS	_ ′
	THROUGH OUR STATEWIDE ARRAY OF COMMUNITY MUSIC EDUCATION PROGRAMS,	_
	OFFERED AT EIGHT LOCATIONS IN URBAN, EXURBAN, AND RURAL COMMUNITIES. WE	
	ARE PROUD TO HAVE PROVIDED HIGH-QUALITY ONE-ON-ONE PERSONALIZED MUSIC	
	INSTRUCTION THROUGH PRIVATE LESSONS; TO HAVE SUPPORTED STUDENTS IN	
	DEVELOPING THEIR SKILLS AND CREATIVE EXPRESSION THROUGH ENSEMBLES	
	PROGRAMS LIKE DELAWARE YOUTH SYMPHONY, CANTABILE WOMEN'S CHORALE, AND	
	WILMINGTON COMMUNITY ORCHESTRA; AND THROUGH INTENSIVE AND	
	FAMILY-FOCUSED MUSIC EDUCATION PROGRAMS LIKE MELODY (FREE MUSIC	
	EDUCATION FOR UNDERSERVED WILMINGTON YOUTH), SUZUKI (RESEARCH-PROVEN	
	YOUTH DEVELOPMENT PROGRAM), AND EARLY CHILDHOOD (SUPPORTING AGES SIX	
	MONTHS TO FIVE YEARS IN MOTOR SKILL AND FAMILY BONDING THROUGH MUSIC	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$	_ )
4c	(Code:) (Expenses \$	_ )
		_
		_
		_
4d	Other program services (Describe on Schedule O.)	
<del>-r</del> u		
40	(Expenses \$ including grants of \$ ) (Revenue \$ )  Total program convice expenses 2 539 458 .	_

# Form 990 (2023) THE MUSIC SCHOOL OF DELAWARE INC Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		<u> </u>
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		X
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			l
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			l
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	77	X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			٠.,
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	37	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	X	37
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			<sub>v</sub>
4-	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			<sub>v</sub>
40	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	4.		x
47	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	4-7		X
10	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	40		y
40	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	4.		v
20-	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		├^
b 21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		$\vdash$
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			v
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21	l	X

51-0066934 Page 4 Part IV Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Х 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 X 23 Schedule J 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 Х 24a Schedule K. If "No," go to line 25a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a Х b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Х 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% Х 26 controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 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 ....... Х 27 28 Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV ..... 28a **b** A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV ..... 28b A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If 28c "Yes," complete Schedule L, Part IV ..... Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I ..... Х 31 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes." complete 32 Х Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations Х sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and 34 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? Х If "Yes," complete Schedule R, Part V, line 2 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Х 37 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Х Note: All Form 990 filers are required to complete Schedule O 38 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 81 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 0 Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

(gambling) winnings to prize winners?

Form 990 (2023) THE MUSIC SCHOOL OF DELAWARE INC

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

				_		Yes	No				
<b>2</b> a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,										
	filed for the calendar year ending with or within the year covered by this return	2a		141							
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns? .			2b	X					
3а					3a		X				
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule			<u> </u>	3b						
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a										
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccou	nt)?		4a		X				
b	If "Yes," enter the name of the foreign country			— I							
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A						37				
_	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?				5a		X				
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction that it was or is a party to a prohibited tax shelter transaction.				5b 5c		X				
	c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?										
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the				<b>C</b> -		Х				
	any contributions that were not tax deductible as charitable contributions?			⊦	6a		Λ				
D	If "Yes," did the organization include with every solicitation an express statement that such contributions and tox deductible?		•		Gh.						
7	were not tax deductible?			·····	6b						
7	Organizations that may receive deductible contributions under section 170(c).	viooo i	provided to the p	over2	7-		Х				
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser If "Yes," did the organization notify the donor of the value of the goods or services provided?				7a 7b		- 21				
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			·····-	7.0						
С	to file Form 8282?				7c		х				
Ы	If "Yes," indicate the number of Forms 8282 filed during the year	7d	1		-						
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit or		•		7e		Х				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra			·····	7f		X				
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo				7g						
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiza				7h						
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained										
	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?			L	9a						
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			L	9b						
10	Section 501(c)(7) organizations. Enter:										
а	Initiation fees and capital contributions included on Part VIII, line 12	10a		-							
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		_							
11	Section 501(c)(12) organizations. Enter:	ı	1								
	Gross income from members or shareholders	11a	+								
b	Gross income from other sources. (Do not net amounts due or paid to other sources against										
	amounts due or received from them.)	11b	•	-							
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1	1	- 1	12a						
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	1								
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			- 1	120						
а	Is the organization licensed to issue qualified health plans in more than one state?  Note: See the instructions for additional information the organization must report on Schedule O.			·····-	13a						
h	Enter the amount of reserves the organization is required to maintain by the states in which the										
D	organization is licensed to issue qualified health plans	13b	1								
c	Enter the amount of reserves on hand	13c									
					14a		Х				
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul			····-	14b						
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner			·····							
	excess parachute payment(s) during the year?				15		Х				
	If "Yes," see the instructions and file Form 4720, Schedule N.										
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	t inco	me?		16		Х				
	If "Yes," complete Form 4720, Schedule O.										
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac	tivitie	s								
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			L	17						
	If "Yes," complete Form 6069.										

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

	Check if Schedule O contains a response or note to any line in this Part VI			X						
Sec	tion A. Governing Body and Management									
			Yes	No						
1a	Enter the number of voting members of the governing body at the end of the tax year									
	If there are material differences in voting rights among members of the governing body, or if the governing									
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.									
b	Enter the number of voting members included on line 1a, above, who are independent 1b 14									
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other									
	officer, director, trustee, or key employee?	2		X						
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision									
	of officers, directors, trustees, or key employees to a management company or other person?	3		X						
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X						
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X						
6										
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or									
	more members of the governing body?	7a		Х						
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or									
	persons other than the governing body?	7b		Х						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:									
а	The governing body?	8a	Х							
b	Each committee with authority to act on behalf of the governing body?	8b	Х							
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the									
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O	9		Х						
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)									
	(This social 2 logisate in smaller as at possion is required by the internal his order		Yes	No						
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х						
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,									
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b								
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х							
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.									
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х							
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х							
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe									
	on Schedule O how this was done	12c	Х							
13	Did the organization have a written whistleblower policy?	13	Х							
14	Did the organization have a written document retention and destruction policy?	14	Х							
15	Did the process for determining compensation of the following persons include a review and approval by independent									
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?									
а	The organization's CEO, Executive Director, or top management official	15a	Х							
	Other officers or key employees of the organization	15b	X							
-	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.									
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a									
	taxable entity during the year?	16a		х						
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation									
-	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's									
	exempt status with respect to such arrangements?	16b								
Sec	tion C. Disclosure	100								
17	List the states with which a copy of this Form 990 is required to be filedNONE									
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s	onlv) :	availah	ole						
	for public inspection. Indicate how you made these available. Check all that apply.	,,								
	X Own website X Another's website X Upon request Other (explain on Schedule O)									
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	cial							
	statements available to the public during the tax year.									
20	State the name, address, and telephone number of the person who possesses the organization's books and records									
-	THE MUSIC SCHOOL OF DELAWARE - (302)762-1132									
	4101 WASHINGTON STREET, WILMINGTON, DE 19802-2151									

# 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.

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

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

(A)  Name and title	(B) Average			(C Pos	C) ition	1		(D)  Reportable	(E) Reportable	(F) Estimated
Name and the	hours per	box.	, unle	ss per	rson i	than o s both r/trus	an	compensation	compensation	amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer	Key employee	Highest compensated 5		from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MISC/ 1099-NEC)	other compensation from the organization and related organizations
(1) KATE RANSOM	50.00									
PRESIDENT AND CEO (THRU 1/24)				Х				117,500.	0.	19,104.
(2) STEPHEN BEAUDOIN	50.00									
PRESIDENT AND CEO (EFF 2/24)				Х				0.	0.	0.
(3) RICHARD FACCIOLO	10.00									
BOARD CHAIR		Х		Х				0.	0.	0.
(4) HOLLY LISSNER	10.00									
TREASURER		Х		Х				0.	0.	0.
(5) LAWRENCE A. HAMERMESH	10.00									
SECRETARY		X		Х				0.	0.	0.
(6) NINA ANDERSON	5.00									
MEMBER		X		Х				0.	0.	0.
(7) JANE E AUSTIN	5.00									
MEMBER		X						0.	0.	0.
(8) SUSAN BOOKER	5.00									
MEMBER		Х						0.	0.	0.
(9) JAN E. CHRISTOPHER	5.00									
MEMBER		X						0.	0.	0.
(10) CLAIRMARIE FIELD	5.00									
MEMBER		X						0.	0.	0.
(11) ROBERT RINALDI	5.00									
MEMBER		X						0.	0.	0.
(12) JONATHAN H. SALVIN, MD	5.00									
MEMBER		Х						0.	0.	0.
(13) CHRIS STOUT	5.00									
MEMBER		X						0.	0.	0.
(14) BRUCE DITTMAR	5.00									
MEMBER EMERITUS		X						0.	0.	0.
(15) MARIE STEWART	5.00									
DIRECTOR EMERITUS		X						0.	0.	0.
(16) DAVID BROWN	5.00									
MEMBER		Х						0.	0.	0.
(17) SCOTT BURRIS	5.00									
MEMBER		Х						0.	0.	0.

Form **990** (2023)

Part VII   Section A. Officers, Directors, 7	(B)	oloy	ees,			gnes	st C					<b>(C\</b>	
(A)	' '	(B) (C) Average Position						( <b>D</b> ) Reportable	(E)	( <b>E)</b> Reportable		( <b>F)</b> stimate	
Name and title	hours per		not c	heck r	more	than		compensation	compensation			nount	
	week			nd a di				from	from related		<u> </u>	other	01
	(list any	director						the	organizations		com	pensa	tion
	hours for	or dire	a.			ted		organization	(W-2/1099-MISC	/	fr	om the	Э
	related	stee	truste		an an	bensa		(W-2/1099-MISC/	1099-NEC)			anizati	
	organizations below	ıal tru	onal t		ploye	com ee		1099-NEC)				d relate	
	line)	Individual trustee or	Institutional trustee	Officer	Key employee	Highest compensated employee	ormer				orga	anizatio	ons
(18) PETER COMPO	5.00	_	<del>  -</del>	0	×	T 40	ш						
MEMBER		Х						0.	(	).			0.
(19) THOMAS L COVER	5.00												
MEMBER		Х						0.	(	).			0.
(20) JOHN E.B. DU PONT	5.00	<b>3,</b>							,	、			0
MEMBER (21) VERONICA F EID	5.00	Х						0.		).			0.
MEMBER	3.00	Х						0.	(	٥.			0.
(22) DAVID C MCBRIDE	5.00	25							•	•			•
MEMBER		Х						0.	(	o .			0.
(23) DINA NEIMAN-ABDESALAM	5.00												
MEMBER		Х						0.	(	).			0.
		_											
										-			
		1											
1b Subtotal								117,500.		).			
c Total from continuation sheets to Pa	rt VII, Section A							0.		).			
d Total (add lines 1b and 1c)								117,500.		).	1	9,10	)4.
2 Total number of individuals (including b	out not limited to th	ose	liste	ed ab	ove	) wh	o re	eceived more than \$100,0	000 of reportable				1
compensation from the organization												Yes	No
3 Did the organization list any former off	icer, director, trust	ee, k	cey e	emple	ove	e, or	hiq	hest compensated empl	oyee on				
line 1a? If "Yes," complete Schedule J			•	•	•	-	_		•		3		Х
4 For any individual listed on line 1a, is the	ne sum of reportabl	e cc	mpe	ensat	tion	and	oth	ner compensation from th	ne organization				
and related organizations greater than	\$150,000? If "Yes,	" co	mple	ete S	Sche	edule	Jf	for such individual			4		X
5 Did any person listed on line 1a receive	•				•			•	ual for services				
rendered to the organization? [f "Yes."	complete Schedule	e <i>J f</i>	or su	ıch p	pers	on .					5		X
Section B. Independent Contractors  1 Complete this table for your five highes	t componented inc	lono	ndo	nt co	ntr	acto	rc th	and received more than \$	100 000 of compo	ncat	tion fr		
the organization. Report compensation										ıısaı	lioii iic	7111	
(A)				. <u>.</u>				(B)			(0	<del>)</del>	
Name and busir	ness address	N	INC	3				Description of se	ervices	С		nsatio	า
Total number of independent contractor	ors (including but n	ot lir	nited	d to t	_		ted	above) who received mo	ore than				
\$100,000 of compensation from the org	ganization				C	)							

51-0066934

			□ Check if Schedule O c	ontains a re	esponse (	or note to any lin	e in this Part VIII			
							(A)	(B)	(C)	(D)
							Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
								function revenue	business revenue	sections 512 - 514
လ လ	1	а	Federated campaigns		1a					
ant	_				1b					
ي ق			Fundraising events		1c					
ifts,					1d					
Ω.ë			Government grants (contri			211,494.				
Contributions, Gifts, Grants and Other Similar Amounts			All other contributions, gifts, g	′ F		,				
je Ei		•	similar amounts not included		1f	659,005.				
흕		~	Noncash contributions included in li		1g \$	033,003.				
Ö		_	Total. Add lines 1a-1f	ines ia-ii	ig <sub> Ψ</sub>		870,499.			
0 %		<u>'''</u>	Total. Add lines 1a-11			Business Code	07071331			
	2	а	TUITION AND F	EES			1,950,969.	1 950 969.		
je	2		10111011 1110 11			011000	±,550,505•	±,550,505•		
je v		b								
m S		C								
gra Re		d								
Program Service Revenue		e	All alls and an area and a second							
۳ ۱			All other program service r				1,950,969.			
	_		Total. Add lines 2a-2f				1,330,303.			
	3		Investment income (includ				5,975.			5,975.
							5,915.			3,313.
	4		Income from investment of	-	-					
	5		Royalties	$\overline{}$						
			_	<del>  ``</del>	Real	(ii) Personal				
	6		Gross rents	6a						
			Less: rental expenses	6b						
			Rental income or (loss)	6c						
			Net rental income or (loss)							
	7	а	Gross amount from sales of	(i) Se	curities	(ii) Other				
			assets other than inventory	7a						
		b	Less: cost or other basis							
je l				7b						
Ver		С	Gain or (loss)	7c						
her Revenue		d	Net gain or (loss)		<u></u>					
þer	8	а	Gross income from fundraisin	ng events (no	ot					
ᅙ			including \$		of					
			contributions reported on	line 1c). Se	e					
			Part IV, line 18		8a					
		b	Less: direct expenses		8b					
			Net income or (loss) from f							
	9	а	Gross income from gaming							
			Part IV, line 19		9a					
		b	Less: direct expenses		9b					
		С	Net income or (loss) from (	gaming acti	vities					
	10	а	Gross sales of inventory, le	ess returns						
			and allowances		10a					
		b	Less: cost of goods sold		10b					
		С	Net income or (loss) from s	sales of inve	entory					
,						Business Code				
Miscellaneous Revenue	11	а	LOAN FORGIVEN	ESS GA	IN	611600	1,166.			1,166.
ane		b								
eve		С								
Aisc B		d	All other revenue							
2			Total. Add lines 11a-11d				1,166.			
	12		Total revenue See instruction				2.828.609.	1 950 969.	0.	7 141.

Total expenses   Total expenses   Program service   Management and general expenses   Program service   Management   Program service   P	Secti	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).										
Total expenses   Program service   Program ser		Check if Schedule O contains a respon	se or note to any line in			X						
and domestic powerments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign organizations, foreign governments, and foreign organizations, foreign governments, and foreign departments, foreign governments, and foreign and providuals. See Part IV, lines 15 and 16 4 Benefits paid to 1 for members 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation of included above to disqualified persons (see defined under section 4988(1(1)) and persons described in section 4988(1(3)) and persons described in the sectio		· · · · · · · · · · · · · · · · · · ·	(A) Total expenses	<b>(B)</b> Program service expenses	Management and	Fundraising						
2 Grants and other assistance to domestic inclividuals. See Part IV, inc 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign inclividuals. See Part IV, line 17 Grants and other assistance to foreign organizations, foreign governments, and foreign inclividuals. See Part IV, line 17 Grants and the section 4585(IV) and genoses discusted in section 4585(IV) and agenoses discusted in section 4585(IV) and agenoses discusted in section 4585(IV) and agenoses discusted in section 4585(IV) and 438(IV) employer contributions (include section 401(IV) and 438(IV) employer contributions)  9 Other employee benefits  1 Fee's for service's foremployees):  1 Fee's for service's foremployees):  1 Payroll taxes  1 Payroll taxes  1 Payroll taxes  1 Professional fundatising services. See Part IV, line 17 filmostment management fees  2 Other, (If line II g anount exceeds 10% of line 25, column (IV), amount, list line II g openeses on Sch. 0, 264, 926. 262, 112. 2, 814.  2 Advertising and promotion  5 Royaltis  1 Office expenses in line 24n, II (200).  1 Travel  1 Travel in the section 4585(IV) in 18 (200).  2 Advertising and promotion  5 Royaltis  1 Fee's for services (concernity) in 18 (200).  2 Coupancy  1 Fee's foreign and promotion  5 Royaltis  1 Royaltis  2 Payments to travel or entertainment expenses for any federal, state, or local public officials done, (List in inclinations expenses on local public officials done, (List in inclinations expenses on local public officials done, (List in inclinations expenses on the 24n, II (200).  1 Royaltis  2 Payments to travel or entertainment expenses for any federal state, or local public officials done, (List inclinations expenses on the 24n, II (200).	1	Grants and other assistance to domestic organizations										
Individuals. See Part V. line 22   172,719		and domestic governments. See Part IV, line 21										
Individuals. See Part V. line 22   172,719	2	Grants and other assistance to domestic										
3 Grants and other assistance to foreign organizations, foreign operments, and toreign individuals. See Part IV, lines 15 and 16  4 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation of included above to disqualified persons (as defined under section 4968(ff)1) and persons described in section 4968(ff)1) and persons (as defined under section 4968(ff)1) and persons described in section 4968(ff)1) and persons described in section 4968(ff)1) and persons described in section 4968(ff)1) and 4980(ff)1) and 498			172,719.	172,719.								
organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	3											
Individuals. See Part IV, lines 15 and 16   Benefits paid to or for members   Compensation of current officers, directors, trustees, and key employees   136,445   81,867   40,934   13,644		organizations, foreign governments, and foreign										
## Description of current officers, directors, trustees, and key employees    Compensation of current officers, directors, trustees, and key employees   Compensation not included above to disqualified persons described in section 4980(()) and persons described in section 4980(()) a												
136,445	4											
Tustees, and Keye remployees   136, 445.   81,867.   40,934.   13,644.	5											
6 Compensation and included above to disqualified persons (as defined under section 4958(r)(3)(8) 7 Other salaries and wages 8 Pension plan acrualis and contributions (include section 401(k) and 403(t) employer contributions) 9 Other employee benefits 1 Payroll taxes 1 156,648. 93,989. 46,994. 15,665. 11 Fees for services (nonemployees): 1		•	136,445.	81,867.	40,934.	13,644.						
persons (as defined under section 4988(r)(1)) and persons described in section 4988(r)(3)(8)  7 Other sealaries and wages  8 Pension plan accruals and contributions (include section 4018, and 4019) employer contributions)  9 Other employee benefits  10 Payroll taxes  11 Fees for services (nonemployees):  a Management  b Legal  c Accounting  6 Professional fundraising services. See Part IV, line 17  f Investment management fees  9 Other, (ill lime 1) amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0, 12, 209 a. 1, 088 b. 121 b.  13 Office expenses  14 Information technology  15 Royatibus  16 Occupancy  17 Travel  19 Payments of travel or entertainment expenses for any federal, state, or local public officials  19 Conference, conventions, and meetings  15 (5, 668 c.)  18 Payments to affiliates  19 Operation, depletion, and amortization  18 Payments to affiliates  18 Payments to affiliates  19 Conference, sorventons, and meetings  16 Occupancy  17 Tavel  18 Payments to affiliates  19 Conference, sorventons, and meetings  15 (5, 668 c.)  17 Payments to affiliates  19 Conference, sorventons, and meetings  15 (6, 997 c.)  18 Payments to affiliates  19 Payments to affiliates  10 Expenses Remize expenses not covered above, (List miscellareous expenses on line 24c IV, amount, list line 19 Payments to affiliates  10 Expenses Remize expenses not covered above, (List miscellareous expenses on line 24c IV, amount, list line 19 Payments to affiliates  10 User SAND MBAINTENANCE b User SAND MAINTENANCE b User SAND MAINTENANCE at 14, 104 c. 10, 578 c. 3, 526 c.  20 Interest in Expenses SEE SCH O 14, 927 c. 2, 618 c. 12, 309 c.  21 All other expenses SEE SCH O 14, 927 c. 2, 618 c. 12, 309 c.  22 Jata trunctional expenses. Add lines 1 through 24c or practication accuraging and fundraising solicitation, check for a combined educational campaign and fundraising solicitation. Check for a limit and solicitation.	6											
Persons described in section 4958(c)(3)(B)   2,016,506. 1,209,314. 601,454. 205,738.		· · · · · · · · · · · · · · · · · · ·										
7 Other salaries and wages 8 Pension plan accusals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 10 Payroll taxes 11 Fees for services (nonemployees): a Management b Legal c Accounting 0 Lobbying Professional fundraising services. See Part IV, line 17 f Investment management fees 10 Other, Illine 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0.) 12 Advertising and promotion 13 Office expenses 16 Occupancy 16 Information technology 17 Taxel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 10 Interest 10 Payments to affiliates 20 Depreciation, depletion, and amortization lawnount, list line 124e, it line 24e amount exceeds 10% of line 25, column (A), amount, list line 124e it line 24e amount exceeds 10% of line 26, column (A), annount, list line 10 expenses on Inch 24e. It line 24e amount exceeds 10% of line 25, column (A), annount, list line 10 expenses on Inch 24e. It line 24e amount exceeds 10% of line 25, column (A), annount, list line 10 expenses on Inch 24e. It line 24e amount exceeds 10% of line 25, column (A), annount, list line 10 expenses on Inch 24e. It line 24e amount exceeds 10% of line 25, column (A), annount, list line 10 expenses on Schedie (D.) a REPAIRS AND MAINTENANCE b DUES AND SUBSCRIPTIONS c STATIONARY AND PRINTING d CUSTODIAL CONTRACT AND All other expenses SEE SCH O 25 Total functional expenses SEE SCH O 25 Total functional expenses SEE SCH O 25 Joint costs, complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising soliciation. Check her if electives good as 4 page 24e 270 by 4 and 24e. 25 Joint costs from a combined educational campaign and fundraising soliciation. Check her if electives good as 2 page 24e 25e 25e 25e 25e 25e 25e 25e 25e 25e 25												
Separation plan accruais and contributions (include section 401(k) and 403(k) employer contributions)	7		2,016,506.	1,209,314.	601,454.	205,738.						
Section 401(k) and 403(b) employer contributions)   332,725.   199,635.   103,905.   29,185.	8											
9 Other employee benefits 10 Payroll taxes 11 Fees for services (nonemployees):  a Management b Legal c Accounting 15 Payroll taxes 9 Other. (If line 11g amount exceeds 10% of line 25, column (A, amount, list line 24e expenses on School.) 26 Advertising and promotion 27 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 10 Conferences, conventions, and meetings 11 Payments of travel or entertainment expenses for 65, 668 s. 12 Payments of travel or entertainment expenses for 66, 097 s. 14 Other expenses, liemize expenses on line 24e. If line 24e expenses on Schoule (Isl finic 24e expenses on Schoule) and Al Internation depletion, and amortization 18 Payments of travel or entertainment expenses for 5, 668 s. 19 Payments of travel or entertainment expenses for 65, 668 s. 10 Payments of travel or entertainment expenses for 5, 666 s. 11 Payments of travel or entertainment expenses for 5, 666 s. 12 Payments of travel or entertainment expenses for 5, 666 s. 15 Payments of travel or entertainment expenses for 5, 666 s. 16 Other expenses, liemize expenses in line 24e. If line 24e expenses on Schedule 0.) 28 Insurance 29 Other expenses in line 24e. If line 24e expenses on Schedule 0.) 30 REPARTS AND MAINTENNANCE 31 DUES AND SUBSCRIPTIONS 32 STATIONARY AND PRINTING 40 CUSTODIAL CONTRACT AND 41 (10 of 10		•										
10 Payroll taxes	9		332,725.	199,635.	103,905.	29,185.						
11 Fees for services (nonemployees): a Management b Legal c Accounting d Lobbying Professional fundraising services. See Part IV, line 17 f Investment management fees g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0.)  264, 926. 262, 112. 2, 814.  27, 112. 2, 814.  2814. 2, 2073. 12, 772. 2, 2073.  2815. 328. 58, 328. 58, 328. 16, 918. 2, 2073. 12, 772. 2, 2073.  2816. 16, 918. 2, 073. 12, 772. 2, 2073.  2817. 17avel 16, 955. 144, 675. 17, 290. 17, 17avel 1, 209. 1, 088. 121.  2818. Payments of travel or entertainment expenses for any federal, state, or local public officials of the seed of	10					15,665.						
a Management b Legal c Accounting	11											
b Legal c Accounting d Lobbying 53,740. 53,740. 53,740. d Lobbying	а											
C Accounting	b											
Continued   Colored   Co	С		53,740.		53,740.							
e Professional fundraising services. See Part IV, line 17 f Investment management fees	d											
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch 0.)  264,926. 262,112. 2,814.  244 overtising and promotion 58,328. 58,328.  16,918. 2,073. 12,772. 2,073.  17avel 161,965. 144,675. 17,290.  17avel 1,209. 1,088. 121.  18 Payments of travel or entertainment expenses for any federal, state, or local public officials  15 Conferences, conventions, and meetings 65,668. 65,668.  16,918. 2,073. 12,772. 2,073.  17avel 1,209. 1,088. 121.  18 Payments of travel or entertainment expenses for any federal, state, or local public officials  15,997. 2,400. 13,597.  20 Interest 65,668. 65,668.  21 Payments to affiliates  22 Depreciation, depletion, and amortization 180,401. 135,301. 45,100.  23 Insurance 66,097. 49,574. 16,523.  24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25c, column (A), amount, list line 24e expenses on Schedule 0.)  28 REPAIRS AND MAINTENANCE 179,301. 98,021. 81,280.  29 DUES AND SUBSCRIPTIONS 28,199. 15,166. 309. 12,724.  20 STATIONARY AND PRINTING 15,201. 15,201. 15,201. 12,309.  25 Total functional expenses. Add lines 1 through 24e 3,952,024. 2,539,458. 1,055,560. 357,006.  26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here 18 fellowing sone sec.246c 688-220.	е											
Column (A), amount, list line 11g expenses on Sch 0.)   264,926.   262,112.   2,814.	f	Investment management fees										
12   Advertising and promotion	g	Other. (If line 11g amount exceeds 10% of line 25,										
16,918.   2,073.   12,772.   2,073.   14   Information technology		column (A), amount, list line 11g expenses on Sch O.)			2,814.							
14	12	Advertising and promotion										
15	13		16,918.	2,073.	12,772.	2,073.						
161,965.   144,675.   17,290.	14	Information technology										
17   Travel   1,209.   1,088.   121.	15	Royalties	1.54 0.55	444.655	15.000							
18	16											
for any federal, state, or local public officials  19 Conferences, conventions, and meetings  15,997. 2,400. 13,597.  20 Interest  20 Interest  21 Payments to affiliates  22 Depreciation, depletion, and amortization  23 Insurance  24 Other expenses, Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% off line 25c, column (A), amount, list line 24e expenses on Schedule 0.)  28 REPAIRS AND MAINTENANCE  29 b DUES AND SUBSCRIPTIONS  20 c STATIONARY AND PRINTING  21 d CUSTODIAL CONTRACT AND  22 e All other expenses  23 SEE SCH O  24 Jint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.  20 Check here in indianal expenses in to converse and in the organization in the propertice of the column (B) joint costs from a combined educational campaign and fundraising solicitation.  21 Conferences, conventions, and meetings  22 2,400. 13,597.  65,668.  66,097.  15,500.  16,500.  16,500.  179,301.  180,701.  190,501.  190,501.  190,501.  190,501.  190,501.  190,501.  190,501.  190,501.  190,501.  190,501.  190,50	17		1,209.	1,088.	121.							
19   Conferences, conventions, and meetings   15,997.   2,400.   13,597.	18											
20 Interest 65,668. 65		, , , ,	15 005	0.400	12 505							
Payments to affiliates   180,401.   135,301.   45,100.				∠,400.	13,597.	65 660						
Depreciation, depletion, and amortization   180,401.   135,301.   45,100.			00,008.			.800,00						
23   Insurance			100 401	125 201	<i>1</i> 5 100							
Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)  a REPAIRS AND MAINTENANCE b DUES AND SUBSCRIPTIONS c STATIONARY AND PRINTING d CUSTODIAL CONTRACT AND All other expenses SEE SCH O All other expenses SEE SCH O  Total functional expenses. Add lines 1 through 24e  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)												
above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)  a REPAIRS AND MAINTENANCE DUES AND SUBSCRIPTIONS 28,199. 15,166. 309. 12,724.  c STATIONARY AND PRINTING 15,201. 15,201.  d CUSTODIAL CONTRACT AND 14,104. 10,578. 3,526.  e All other expenses SEE SCH O 14,927. 2,618. 12,309.  Total functional expenses. Add lines 1 through 24e 3,952,024. 2,539,458. 1,055,560. 357,006.  25 Total functional column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)			00,097.	43,374.	10,523.							
a REPAIRS AND MAINTENANCE b DUES AND SUBSCRIPTIONS c STATIONARY AND PRINTING d CUSTODIAL CONTRACT AND e All other expenses SEE SCH O 25 Total functional expenses. Add lines 1 through 24e  26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)  179,301. 98,021. 81,280.  28,199. 15,166. 309. 12,724.  15,201.  119,301. 15,201.  15,201.  12,309.  12,309.  12,309.  12,309.  12,309.	24	above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),										
DUES AND SUBSCRIPTIONS   28,199.   15,166.   309.   12,724.	а		179.301.	98.021.	81,280.							
C   STATIONARY AND PRINTING   15,201.   15,201.	b					12,724.						
d CUSTODIAL CONTRACT AND e All other expenses SEE SCH O 25 Total functional expenses. Add lines 1 through 24e 3,952,024. 2,539,458. 1,055,560. 357,006.  26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)	c			-,		, · = - ·						
e All other expenses SEE SCH O 14,927. 2,618. 12,309.  25 Total functional expenses. Add lines 1 through 24e 3,952,024. 2,539,458. 1,055,560. 357,006.  26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)	d			10,578.		_						
Total functional expenses. Add lines 1 through 24e 3,952,024. 2,539,458. 1,055,560. 357,006.  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)					-	12,309.						
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)			•		1,055,560.							
educational campaign and fundraising solicitation.  Check here if following SOP 98-2 (ASC 958-720)												
Check here if following SOP 98-2 (ASC 958-720)		reported in column (B) joint costs from a combined										
		Check here if following SOP 98-2 (ASC 958-720)				F 990 (2222)						

Form 990 (2023)
Part X Balance Sheet

1 Cash - non-interest-bearing 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 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	A) ng of year 200. 57,128.	1 2 3 4	(B) End of year 0 • 261,349 •
1 Cash - non-interest-bearing 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 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	200. 57,128.	2	End of year 0.
2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 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	57,128.	2	
2 Savings and temporary cash investments 35 3 Pledges and grants receivable, net 4 Accounts receivable, net 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		3	261,349.
3 Pledges and grants receivable, net 4 Accounts receivable, net 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	32,995.		
4 Accounts receivable, net 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	32,995.	4	
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			60,872.
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	
7 Notes and loans receivable, net		7	
8 Inventories for sale or use		8	
9 Prepaid expenses and deferred charges	55,544.	9	0.
10a Land, buildings, and equipment: cost or other			
basis. Complete Part VI of Schedule D 10a 6 , 404 , 621 .			
		10c	2,709,071.
1 /	19,181.	11	11,436,346.
12 Investments - other securities. See Part IV, line 11		12	
13 Investments - program-related. See Part IV, line 11		13	
14 Intangible assets	22.21.0	14	120 550
	09,312.	15	139,650.
	11,363.	16	14,607,288.
	09,338.	17	130,462.
18 Grants payable	14,227.	18	0.
	14,22/•	19	U•
20 Tax-exempt bond liabilities		20	
21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
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		22	
controlled entity or family member of any of these persons  23 Secured mortgages and notes payable to unrelated third parties		23	
	24,883.	24	429,144.
25 Other liabilities (including federal income tax, payables to related third	<u> </u>	24	123,111.
parties, and other liabilities not included on lines 17-24). Complete Part X			
	15,286.	25	885,624.
	63,734.	26	1,445,230.
Organizations that follow FASB ASC 958, check here X			
27 Net assets without donor restrictions 2,30	05,050.	27	1,795,427.
28 Net assets with donor restrictions 10,74	42,579.	28	11,366,631.
Organizations that do not follow FASB ASC 958, check here			
and complete lines 29 through 33.			
δ 29 Capital stock or trust principal, or current funds		29	
30 Paid-in or capital surplus, or land, building, or equipment fund		30	
31 Retained earnings, endowment, accumulated income, or other funds		31	
	47,629.	32	13,162,058.
33 Total liabilities and net assets/fund balances 14,41		33	14,607,288.

Form **990** (2023)

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why on Schedule O and describe any steps taken to undergo such audits

Form **990** (2023)

### **SCHEDULE A**

(Form 990)

Department of the Treasury Internal Revenue Service

# **Public Charity Status and Public Support**

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

Attach to Form 990 or Form 990-EZ.

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

**ZUZ**3

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

THE MUSIC SCHOOL OF DELAWARE INC

Employer identification number 51 – 0.066934

		IRE .	MOSIC SCHOO	OF DELIAWAR	ZE TIM	-	3	T-0000334					
Pa	ırt I	Reason for Public C	Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instructions.						
The	organ	ization is not a private found											
1		A church, convention of chu					I)(A)(i).						
2	X	A school described in secti	ion 170(b)(1)(A)(ii). (	Attach Schedule E (Form	n 990).)								
3		A hospital or a cooperative				(b)(1)(A)(ii	i).						
4		A medical research organiza					•	the hospital's name,					
		city, and state:	•				CARA 7	,					
5		An organization operated for	or the benefit of a col	lege or university owned	or operate	ed by a go	vernmental unit describe	ed in					
Ū		section 170(b)(1)(A)(iv). (C		g,		, 9-							
6				nental unit described in	section 17	70(h)(1)(A)	(v)						
7	H	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in											
'		section 170(b)(1)(A)(vi). (Co	•	itiai part of its support if	om a gove	minentar	unit of from the general p	dublic described in					
8		A community trust describe		1VAVvi) (Complete Part	F II \								
9		•			•	nd in coni	unation with a land grant	aallaga					
9	ш	An agricultural research org				-	-	•					
		or university or a non-land-g	grant college of agrici	ulture (see instructions).	Enter the i	iame, city	, and state of the college	e Or					
40		university:	Illy receives (1) more	than 22 1/20/ of its supp	out from o	ontribution	as mambarabin foca an	d areas ressints from					
10		An organization that normal											
		activities related to its exem		•				-					
		income and unrelated busin		(less section 511 tax) fro	m busines	ses acqui	red by the organization a	ifter June 30, 1975.					
		See section 509(a)(2). (Cor	•										
11		An organization organized a	•		•			_					
12		An organization organized a	•	•	-		•						
		more publicly supported org	-					Check the box on					
		lines 12a through 12d that o	* *										
а			anization operated, su	upervised, or controlled	by its supp	orted org	anization(s), typically by	giving					
		the supported organization	on(s) the power to req	gularly appoint or elect a	majority o	f the direc	tors or trustees of the su	pporting					
		organization. You must c	complete Part IV, Se	ctions A and B.									
b	· L	Type II. A supporting orga	anization supervised	or controlled in connect	ion with its	s supporte	ed organization(s), by have	ring					
		control or management of	f the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or manage the supp	oorted					
		organization(s). You mus	t complete Part IV,	Sections A and C.									
C	:	Type III functionally inte	grated. A supporting	g organization operated	in connect	ion with, a	and functionally integrate	ed with,					
		its supported organization	n(s) (see instructions)	. You must complete F	Part IV, Se	ctions A,	D, and E.						
d		Type III non-functionally	integrated. A supp	orting organization oper	ated in cor	nnection w	rith its supported organiz	zation(s)					
		that is not functionally into	egrated. The organiz	ation generally must sati	isfy a distr	ibution rec	uirement and an attentiv	/eness					
		requirement (see instructi	ions). You must con	nplete Part IV, Sections	A and D,	and Part	٧.						
е		Check this box if the orga	anization received a v	vritten determination from	m the IRS	that it is a	Type I, Type II, Type III						
		functionally integrated, or	Type III non-function	nally integrated supportir	ng organiz	ation.							
f	Ente	er the number of supported o											
g	J Prov	vide the following information	about the supporte	d organization(s).									
	(	i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	inization listed ng document?	(v) Amount of monetary	(vi) Amount of other					
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see instructions)	support (see instructions)					
<b>T</b>													

332021 12-21-23

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

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

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						_
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
	The portion of total contributions						
_	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						
	tion B. Total Support	ı					
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 4						
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	<b>Total support.</b> Add lines 7 through 10						
	Gross receipts from related activities,	etc. (see instruction	ons)		•	12	
	First 5 years. If the Form 990 is for the	•				01(c)(3)	
	organization, check this box and stor	· ·			•	. , . ,	
Sec	tion C. Computation of Publi						
14	Public support percentage for 2023 (I	ine 6, column (f), d	ivided by line 11, o	column (f))		14	%
15	Public support percentage from 2022	Schedule A, Part	II, line 14			15	%
16a	33 1/3% support test - 2023. If the	organization did no	t check the box or	n line 13, and line	14 is 33 1/3% or m	ore, check this box	and
	stop here. The organization qualifies	as a publicly supp	orted organization				
b	33 1/3% support test - 2022. If the	organization did no	t check a box on I	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check thi	s box
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation			
17a	10% -facts-and-circumstances test	- 2023. If the org	anization did not d	check a box on line	e 13, 16a, or 16b, a	and line 14 is 10% o	or more,
	and if the organization meets the fact						
	meets the facts-and-circumstances te	st. The organization	n qualifies as a pu	blicly supported o	rganization		
b	10% -facts-and-circumstances test	- 2022. If the org	anization did not d	check a box on line	e 13, 16a, 16b, or 1	7a, and line 15 is 1	10% or
	more, and if the organization meets the	ne facts-and-circum	nstances test, chec	ck this box and st	<b>top here.</b> Explain i	n Part VI how the	
	organization meets the facts-and-circu		-	•	• • •		
18	Private foundation. If the organization	n did not check a	box on line 13, 16a	a, 16b, 17a, or 17b	o, check this box a	nd see instructions	

# Schedule A (Form 990) 2023 THE MUSIC SCHOOL OF DELAWARE INC 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.)

Sec	etion A. Public Support	siow, picase comp	oloto i dit ii.j				
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
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						
c	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
		(a) 2013	(6) 2020	(6) 2021	(d) ZOZZ	(6) 2020	(i) rotai
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b  Net income from unrelated business activities not included on line 10b, whether or not the business is						
12	regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	e organization's fi	rst, second, third,	fourth, or fifth tax	year as a section s	501(c)(3) organizatio	on,
	check this box and stop here						
Sec	ction C. Computation of Publi	c Support Per	rcentage				
15	Public support percentage for 2023 (li	ne 8, column (f), c	divided by line 13,	column (f))		15	%
	Public support percentage from 2022					16	%
Sec	ction D. Computation of Inves	tment Income	e Percentage				
17	Investment income percentage for 20	23 (line 10c, colur	mn (f), divided by I	ine 13, column (f))		17	%
18	Investment income percentage from 2	<b>2022</b> Schedule A,	Part III, line 17			18	%
19a	33 1/3% support tests - 2023. If the	organization did r	not check the box	on line 14, and line	e 15 is more than 3	33 1/3%, and line 1	7 is not
	more than 33 1/3%, check this box ar	nd <b>stop here.</b> The	organization qual	ifies as a publicly s	supported organiza	ation	
b	<b>33 1/3% support tests - 2022.</b> If the line 18 is not more than 33 1/3%, che	•			•	•	
20	Private foundation. If the organization						

# Part IV | Supporting Organizations

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

## Section A. All Supporting Organizations

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

	Yes	No
1		
2		
За		
3b		
3c		
4a		
4b		
40		
40		
4c		
5a		
5b		
5c		
6		
7		
8		
8		
9a		
9b		
9c		
10a		
10b le A (Forr	n 000\	2022
IC A (FULL	ロ シンし	ZUZJ

Par	t IV   Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sect	tion B. Type I Supporting Organizations	-		
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one	or		
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's office	ers,		
	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 suppor 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		
	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sect	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sect	tion D. All Type III Supporting Organizations	•		
			Yes	No
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		
	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		
Sect	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instru	ctions).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity	(see instruction	s).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			

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

	dule A (Form 990) 2023 THE MUSIC SCHOOL OF DE			51-0066934 Page 6
Pai				
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust on	Nov. 20, 1970 ( explain ii	<sub>γ</sub> Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu	st complete	Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
_3_	Other gross income (see instructions)	3		
_4	Add lines 1 through 3.	4		
_5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
_7_	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	<b>Discount</b> 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		

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

5

6

Schedule A (Form 990) 2023

5 Income tax imposed in prior year

instructions).

**Distributable Amount.** Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions).

	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga		<u>σ</u>	1 0000554 Page 7
	ion D - Distributions	(u)(o) eupperg e.ga	CONTINU	eu)	Current Year
1	Amounts paid to supported organizations to accomplish exe		1	Curront rour	
2	Amounts paid to perform activity that directly furthers exemp				
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2023	s	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023				
а	From 2018				
b	From 2019				
С	From 2020				
d	From 2021				
е	From 2022				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
	Applied to 2023 distributable amount				
i	Carryover from 2018 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2023 distributable amount				
c	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2023. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				

Schedule A (Form 990) 2023

a Excess from 2019
 b Excess from 2020
 c Excess from 2021
 d Excess from 2022
 e Excess from 2023

332028 12-21-23 Schedule A (Form 990) 2023

# **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047 Inspection

Name of the organization

THE MUSIC SCHOOL OF DELAWARE INC

**Employer identification number** 51-0066934

Pa	organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		iiiiiai i uiius (	or Accounts. Complete if the
		(a) Donor advise	d funds	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in v	writing that the assets he	d in donor advise	d funds
	are the organization's property, subject to the organization's	exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor ad	dvisors in writing that gra	nt funds can be u	ised only
	for charitable purposes and not for the benefit of the donor or	r donor advisor, or for any	y other purpose c	onferring
	impermissible private benefit?			
Pa	rt II Conservation Easements. Complete if the org	ganization answered "Yes	" on Form 990, P	art IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	_	
	Preservation of land for public use (for example, recreat	tion or education)	Preservation of	a historically important land area
	Protection of natural habitat		Preservation of	a certified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualifi	ied conservation contribu	ition in the form o	f a conservation easement on the last
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b	Total acreage restricted by conservation easements			2b
С	Number of conservation easements on a certified historic stru	ucture included on line 2a	ι	2c
d	Number of conservation easements included on line 2c acqui	ired after July 25, 2006, a	ind not	
	on a historic structure listed in the National Register			2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or to	erminated by the	organization during the tax
	year			
4	Number of states where property subject to conservation eas	sement is located		
5	Does the organization have a written policy regarding the peri	iodic monitoring, inspect	on, handling of	
	violations, and enforcement of the conservation easements it	holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, I	handling of violations, an	d enforcing conse	ervation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and ent	orcing conservati	on easements during the year
8	Does each conservation easement reported on line 2d above			
	and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization reports conservation		•	
	balance sheet, and include, if applicable, the text of the footn	ote to the organization's	financial stateme	nts that describes the
Da	organization's accounting for conservation easements.	Aut Historiaal Tree		an Cimilar Assats
Pa	rt III Organizations Maintaining Collections of Complete if the organization answered "Yes" on Form	-	asures, or Ou	ier Similar Assets.
			nua atatamant an	ad balance about works
ıa	If the organization elected, as permitted under FASB ASC 958			
	of art, historical treasures, or other similar assets held for pub			•
<b>L</b>	service, provide in Part XIII the text of the footnote to its finan			
b	If the organization elected, as permitted under FASB ASC 958	•		
	art, historical treasures, or other similar assets held for public	exhibition, education, or	research in furthe	erance or public service,
	provide the following amounts relating to these items.			Ф
	(i) Revenue included on Form 990, Part VIII, line 1			
_	(ii) Assets included in Form 990, Part X			
2	If the organization received or held works of art, historical trea			gain, provide
	the following amounts required to be reported under FASB AS			Φ.
	Revenue included on Form 990, Part VIII, line 1			\$
h	Assets included in Form 000 Part V			u·

Par	t III	Organizations Maintaining Co	llections of Ar	t, Historical Tre	asures, or	Other	Simila	r Assets	(conti	nued)	J	
3	Using	g the organization's acquisition, accession	n, and other record	s, check any of the f	ollowing that n	nake siç	gnificant i	use of its	•			
	colle	ction items (check all that apply).										
а		Public exhibition	d	I Loan or exc	hange progran	n						
b												
С												
4	Provi	de a description of the organization's col	ections and explair	n how they further th	ne organization	i's exem	pt purpo	se in Part	XIII.			
5												
	to be	sold to raise funds rather than to be mai	ntained as part of th	ne organization's co	llection?				Yes		No	
Par	t IV	Escrow and Custodial Arrang	ements Comple	te if the organization					ne 9, or			
		reported an amount on Form 990, Part										
1a	Is the	e organization an agent, trustee, custodia	n, or other intermed	diary for contribution	s or other asse	ets not i	ncluded					
	on Fo	orm 990, Part X?							Yes		No	
b		es," explain the arrangement in Part XIII a										
									Amoun	t		
С	Begir	nning balance					1c					
d	-	tions during the year										
е		butions during the year										
f		ng balance					1f					
2a		he organization include an amount on Fo					ty?		Yes		No	
		es," explain the arrangement in Part XIII. (										
Par		Endowment Funds Complete if t					).					
			(a) Current year	(b) Prior year	(c) Two years			ears back	(e) Fou	r years	back	
1a	Begir	nning of year balance	10481552.	10232861.	674,	362.	5	74,141.		578,	081.	
b		ributions	12,500.	22,500.	10000	0000.						
С									940.			
	406 422 201 126											
		r expenditures for facilities										
		programs										
f		inistrative expenses										
g		of year balance	11275520.	10481552.	10232	2861.	6	74,362.		574,	141.	
2		de the estimated percentage of the curre	nt vear end balance	e (line 1a. column (a)	) held as:							
a		d designated or quasi-endowment	1.9000	%	,,							
b		nanent endowment 4.5000	%									
		endowment 93.6000 %										
_		percentages on lines 2a, 2b, and 2c should	d equal 100%.									
За		here endowment funds not in the posses	•	tion that are held ar	nd administere	d for the	<del>.</del>					
		nization by:					-			Yes	No	
	-	Jnrelated organizations?							3a(i)	Х		
		Related organizations?							3a(ii)		Х	
b	If "Ye	es" on line 3a(ii), are the related organizati	ons listed as requir	ed on Schedule R?								
4		ribe in Part XIII the intended uses of the o										
	t VI	Land, Buildings, and Equipme										
		Complete if the organization answered	"Yes" on Form 990	), Part IV, line 11a. S	ee Form 990, I	Part X, I	ine 10.					
		Description of property	(a) Cost or o		or other		cumulate	ed	(d) Boo	k valu	e	
		2 coon priori or property	basis (investr		(other)	٠,	reciation	II.	(4, 200		_	
	Land	·	,	12	9,057.	•			12	9,0	57.	
b		ings			4,350.	2.8	33,5	44.	2,33			
C		ehold improvements			5,597.		92,7			$\frac{3}{2}, 7$		
d		oment	I		5,617.		69,2			6,4		
		r	I	, =	, =			-		, -		
		lines 1a through 1e. (Column (d) must eq		X line 10c column	(R))				2,70	9,0'	71.	
	. <i>.</i> .uu		uuri Oiiii 330. i all.	A. III O TOO. COIUITIII	<i>IDII</i>					, -		

	CHOOL OF DELA	WARE INC 51	-0066934 Page 3
Part VII Investments - Other Securities	Fa 000 Part IV line	11h Coo Forms 000 Port V line 10	
Complete if the organization answered "Yes" of		T	d of year market value
(a) Description of Security or Category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	a-or-year market value
(1) Financial derivatives		+	
(2) Closely held equity interests			
(3) Other		+	
(A) (B)		+	
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII Investments - Program Related.		1	
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets			
Complete if the organization answered "Yes" o		11d. See Form 990, Part X, line 15.	
	Description		(b) Book value
<u>(1)</u>			
(2)			
(3)			
(4)			
(5)			
(6)			
<u>(7)</u>			
(8)			
(9)	(D))		
Total. (Column (b) must equal Form 990, Part X, line 15, col.  Part X Other Liabilities	(B))		
Complete if the organization answered "Yes" of	on Form 990 Part IV line	11e or 11f See Form 990 Part X line 25	
(a) Description of lightlift.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	THE OF THE GOOT OF THE COO, THE CAN, HITE ZO	(b) Book value
			(b) Book value
(1) Federal income taxes (2) WORKING CAPITAL LOAN			100,000.
(3) LINE OF CREDIT			645,974.
(4) RIGHT TO USE - LEASE PAYAB	ILE		139,650.
(5)			133,030.
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990. Part X, line 25. col.	(B))		885,624.
2 Liability for uncertain tax positions. In Part XIII. provide:	` "		

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Sche	dule D (Form 990) 2023	THE MU	JSIC S	CHOOL	OF	DELAWARE	INC		51-	0066934	Page 4
Par	t XI Reconciliation of	f Revenue	per Aud	dited Fina	ancia	l Statements	With Re	venue per Re	turn		
	Complete if the organ	ization answ	ered "Yes"	on Form 99	90, Par	t IV, line 12a.					
1	Total revenue, gains, and oth	ner support p	er audited	financial sta	atemen	nts			1	4,066,	,453.
2	Amounts included on line 1 b	out not on Fo	rm 990, Pa	art VIII, line 1	12:						
						1	1	~~= ~ 4 4			

1	Total revenue, gains, and other support per audited financial statements			1	4,066,453.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	1,237,844.		
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	1,237,844.
3	Subtract line 2e from line 1			3	2,828,609.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	2,828,609.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 3,952,024. Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities 2a **b** Prior year adjustments 2b 2c c Other losses d Other (Describe in Part XIII.) e Add lines 2a through 2d 2e 3,952,024. Subtract line 2e from line 1 3 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.) 4c c Add lines 4a and 4b 3,952,024. Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.)

Part XIII Supplemental Information

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

### PART V, LINE 4:

THE SCHOOL'S ENDOWMENT ASSETS ALLOW THE SCHOOL TO PROVIDE A PREDICTABLE STREAM OF FUNDING FOR ITS PROGRAMS. THE ENDOWMENT INCLUDES THE NORTHROP TRUST, VALUED AT \$10,547,429 AS OF JUNE 30, 2024. THE FUNDS IN THIS TRUST ARE RESTRICTED TO USE FOR SCHOLARSHIPS AND ADMINISTRATIVE EXPENSES OF THE FUND, AND ARE NOT AVAILABLE FOR THE OPERATING COSTS OF THE SCHOOL.

### PART X, LINE 2:

THE SCHOOL IS EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. HOWEVER, INCOME FROM CERTAIN ACTIVITIES NOT DIRECTLY RELATED TO THE SCHOOL'S TAX-EXEMPT PURPOSE MAY BE SUBJECT TO

Part XIII   Supplemental Information (continued)
GENERALLY ACCEPTED ACCOUNTING PRINCIPLES PRESCRIBE RULES FOR THE
RECOGNITION, MEASUREMENT, CLASSIFICATION, AND DISCLOSURE IN THE FINANCIAL
STATEMENTS OF UNCERTAIN TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN THE
SCHOOL'S TAX RETURNS. MANAGEMENT HAS DETERMINED THAT THE SCHOOL DOES NOT
HAVE ANY UNCERTAIN TAX POSITIONS OR ASSOCIATED UNRECOGNIZED BENEFITS THAT
MATERIALLY IMPACT THE FINANCIAL STATEMENTS OR RELATED DISCLOSURES. SINCE
TAX MATTERS ARE SUBJECT TO SOME DEGREE OF UNCERTAINTY, THERE CAN BE NO
ASSURANCE THAT THE SCHOOL'S TAX RETURNS WILL NOT BE CHALLENGED BY THE
TAXING AUTHORITIES AND THAT THE SCHOOL WILL NOT BE SUBJECT TO ADDITIONAL
TAX, PENALTIES, AND INTEREST AS A RESULT OF SUCH CHALLENGE.

### **SCHEDULE E** (Form 990)

Department of the Treasury

### **Schools**

Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Open to Public

Name of the organization

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

Inspection Employer identification number

#### 51-0066934 THE MUSIC SCHOOL OF DELAWARE INC Part I YES NO 1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? Х 2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, Х catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 2 Has the organization publicized its racially nondiscriminatory policy on its primary publicly accessible Internet homepage at all times during its tax year in a manner reasonably expected to be noticed by visitors to the homepage, or through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general Х 3 community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II THE NONDISCRIMINATION POLICY IS PART OF THE ORGANIZATION'S ADMISSIONS POLICY, WHICH IS POSTED ON THE SCHOOL'S WEBSITE. ADDITIONALLY, THE POLICY IS PUBLISHED IN A BROCHURE WHICH IS DISTRIBUTED IN MASS MAILINGS. Does the organization maintain the following? Х a Records indicating the racial composition of the student body, faculty, and administrative staff? 4a Х **b** Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? 4b c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing Х with student admissions, programs, and scholarships? 4c X d Copies of all material used by the organization or on its behalf to solicit contributions? 4d If you answered "No" to any of the above, please explain. If you need more space, use Part II. Does the organization discriminate by race in any way with respect to: Х a Students' rights or privileges? X **b** Admissions policies? 5b c Employment of faculty or administrative staff? d Scholarships or other financial assistance? 5d Х Educational policies? f Use of facilities? 5f Х g Athletic programs? 5g Х Other extracurricular activities? 5h If you answered "Yes" to any of the above, please explain. If you need more space, use Part II. Х 6a Does the organization receive any financial aid or assistance from a governmental agency? **b** Has the organization's right to such aid ever been revoked or suspended? Х If you answered "Yes" on either line 6a or line 6b, explain on Part II. Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, as modified by Rev. Proc. 2019-22, 2019-22 I.R.B. 1260, covering

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

racial nondiscrimination? If "No," explain on Part II

Schedule E (Form 990) 2023

X

332062 10-25-23 Schedule E (Form 990) 2023

### SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

**Employer identification number** 

THE MUSIC	SCHOOL O	F DELAWARE	INC				51-0066934
Part I General Information on Grants a	nd Assistance					_	
Does the organization maintain records t	o substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or assi	stance, and the selection	n
criteria used to award the grants or assis	stance?						No
2 Describe in Part IV the organization's pro							
Part II Grants and Other Assistance to					anization answered "Y	es" on Form 990, Part	IV, line 21, for any
recipient that received more than \$	55,000. Part II can	be duplicated if additi	onal space is need	ed.	(s) Mathaul of		
Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
<ul> <li>Enter total number of section 501(c)(3) at</li> <li>Enter total number of other organizations</li> </ul>							

Schedule I (Form 990) 2023 THE MUSIC SCHOOL OF DELAWARE INC					51-0066934	Page 2
Part III Grants and Other Assistance to Domestic Individuals Part III can be duplicated if additional space is needed.	s. Complete if the	e organization answe	ered "Yes" on Form 9	990, Part IV, line 22.		
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash a	ssistance
SCHOLARSHIPS TO STUDENTS	130	172,719.	0.	FMV	TUITION SCHOLARSHIPS	
	1					
Part IV Supplemental Information. Provide the information re	quired in Part I, lir	ne 2; Part III, column	(b); and any other ac	dditional information.		
PART I, LINE 2:						
SCHOLARSHIPS ARE AWARDED TO DESERV	ING STUDE	ENTS BASED	ON ABILITY	AND/OR		
DEMONSTRATED NEED.						

## SCHEDULE O (Form 990)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

2023
Open to Public Inspection

OMB No. 1545-0047

Internal Revenue Service

Name of the organization

THE MUSIC SCHOOL OF DELAWARE INC

Employer identification number 51-0066934

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
EDUCATION). IN FY22, THE MUSIC SCHOOL RECEIVED A BEQUEST OF \$10 MILLION
TO ESTABLISH THE NORTHROP ENDOWED FUND FOR MUSIC EDUCATION. INCOME FROM
THAT FUND CAN BE APPLIED ONLY TO CERTAIN SCHOLARSHIPS IN LIMITED
AMOUNTS AND FOR NO MORE THAN TWO YEARS FOR ANY STUDENT, AND FOR
ADMINISTRAITVE EXPENSES OF THE FUND, AND THE FUND'S PRINCIPAL CANNOT BE
USED FOR OPERATING EXPENSES. ACCORDINGLY, THE TERMS OF THE BEQUEST
SIGNIFICANTLY LIMIT THE EXTENT OF FINANCIAL BENEFIT TO THE MUSIC
SCHOOL. IN 2025, THE MUSIC SCHOOL CELEBRATES A CENTURY OF PROVIDING
MUSIC EDUCATION FOR OUR COMMUNITY.
FORM 990, PART VI, SECTION B, LINE 11B:
FORM 990 IS DISTRIBUTED TO ALL MEMBERS OF THE BOARD BEFORE FILING WITH THE
IRS.
IMPORTANT TO NOTE:
SUBSEQUENT TO YEAR END, THE PRESIDENT/CEO CHANGED FROM KATE RANSOM TO
STEPHEN BEAUDOIN.
FORM 990, PART VI, SECTION B, LINE 12C:
DIRECTORS ARE REQUIRED TO DISCLOSE ANY KNOWN OR POTENTIAL CONFLICTS OF
INTEREST.

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

THE VOTING DIRECTORS' APPROVAL OF THE CEO'S COMPENSATION IS BASED ON INPUT

FROM A VARIETY OF SOURCES, INCLUDING EXPERIENCE WITH OTHER NON-PROFIT

Schedule O (Form 990) 2023 Page **2** 

Name of the organization  THE MUSIC SCHOOL OF DELAWARE INC	Employer identification number 51-0066934
ORGANIZATIONS, ADVICE FROM A NATIONAL SEARCH FIRM, AND A	SSESSMENT OF THE
CEO'S PERFORMANCE	
FORM 990, PART VI, SECTION C, LINE 18:	
THE ORGANIZATION'S FORM 990 AND FORM 1023 ARE AVAILABLE	UPON REQUEST.
ADDITIONALLY, FORM 990 IS AVAILABLE ON GUIDESTAR.ORG.	
FORM 990, PART VI, SECTION C, LINE 19:	
THE ORGANIZATION'S GOVERNING DOCUMENTS AND FINANCIAL STA	TEMENTS ARE
AVAILABLE UPON REQUEST. REQUESTS FOR THESE DOCUMENTS WO	ULD BE EVALUATED ON
A CASE BY CASE BASIS BY THE DIRECTORS.	
FORM 990, PART IX, LINE 24E, ALL OTHER FUNCTIONAL EXPENS	ES:
MISCELLANEOUS:	
PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	10,397.
TOTAL EXPENSES	10,397.
SECURITY:	
PROGRAM SERVICE EXPENSES	2,360.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	2,360.
ANNUAL FUND:	
PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	0.

Schedule O (Form 990) 2023 Page **2** 

Name of the organization  THE MUSIC SCHOOL OF DELAWARE INC	Employer identification number 51-0066934
FUNDRAISING EXPENSES	1,912.
TOTAL EXPENSES	1,912.
STAFF AND FACULTY DEVELOPMENT:	
PROGRAM SERVICE EXPENSES	258.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	258.
TOTAL OTHER EXPENSES ON FORM 990, PART IX, LINE 24E, COL A	14,927.
FORM 990, PART XII, LINE 2C	
THE ORGANIZATION HAS NOT CHANGED ITS PROCESS GOVERNING THE	OVERSIGHT
AND SELECTION OF AN INDEPENDENT AUDITOR.	

## Form **8868**

(Rev. January 2024)

# Application for Extension of Time To File an Exempt Organization Return or Excise Taxes Related to Employee Benefit Plans

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service File a separate application for each return.

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

Electronic filing (e-file). You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Part I - Identification Taxpayer identification number (TIN) Name of exempt organization, employer, or other filer, see instructions. Type or **Print** 51-0066934 THE MUSIC SCHOOL OF DELAWARE INC File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date for filina vour 4101 WASHINGTON STREET return. See instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions. WILMINGTON, DE 19802-2151 Enter the Return Code for the return that this application is for (file a separate application for each return) 01 Application Is For Return | Application Is For Return Code Code Form 990 or Form 990-EZ 01 Form 4720 (other than individual) 09 Form 4720 (individual) 03 Form 5227 10 Form 990-PF 04 Form 6069 11 Form 990-T (sec. 401(a) or 408(a) trust) 12 05 Form 8870 Form 990-T (trust other than above) 06 Form 5330 (individual) 13 07 Form 5330 (other than individual) 14 Form 990-T (corporation) Form 1041-A 80 After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330. • If this application is for an extension of time to file Form 5330, you must enter the following information. Plan Name Plan Number Plan Year Ending (MM/DD/YYYY) Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions) The books are in the care of THE MUSIC SCHOOL OF DELAWARE 4101 WASHINGTON STREET - WILMINGTON, DE 19802-2151 Telephone No. (302)762-1132 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four-digit Group Exemption Number (GEN) . If this is for the whole group, check this . If it is for part of the group, check this box ..... and attach a list with the names and TINs of all members the extension is for. , 20 **25** , to file the exempt organization return for the organization named above. The extension is for the organization's return for: \_\_\_ calendar year 20 JUL 1 \_\_\_\_, 20 <u>23</u>\_\_\_, and ending \_\_\_\_\_ JUN 30 . X tax year beginning \_\_\_\_\_ If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period 3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. За If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3h Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. Зс