** PUBLIC DISCLOSURE COPY ** Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

A	For th	he 2022 calendar year, or tax year beginning $$ JUL $1,$ 2022 $$ and en	T. naih	UN 30, 2023	
	Check i		<u></u>	D Employer identif	
	Addr	YOUTH MUSIC MONTEREY			
	Nam chan	Doing business as		94-28636	07
	lnitia retur	 Number and street (or P.O. box if mail is not delivered to street address) 	om/suite	E Telephone numbe	
L	Final retur termi	h	E B	(831) 37	5-1992
	ated Ame	City or town, state or province, country, and ZiP or foreign postal code		G Gross receipts \$	426,697.
<u> </u>	returi Appl	MONTEREY, CA 93940		H(a) Is this a group r	
L	tion tend	I F Name and address of principal officer LDOROTHRY MILCHELLETTI		for subordinates	
	Tay a	[TZ]		H(b) Are all subordinates i	
	Nebs		527		list. See instructions
		forganization: X Corporation Trust Association Other	T. 37	H(c) Group exemption	n number
	irt I	Summary	J L Year o	of formation: 19881	VI State of legal domicile; CA
	1	Briefly describe the organization's mission or most significant activities: INSPIR	E EXC	TELLENCE IN	CULLIDENING
Governance		BY PROVIDING OPPORTUNITIES TO PARTCIPATE IN	J MIIS	TC AND PERF	OBMVNCE
g B	2	Check this box if the organization discontinued its operations or disposed	of more t	than 25% of its not see	ottorial CE.
ove.	3	Number of voting members of the governing body (Part VI, line 1a)			7
	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	7
Activities &	5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)		5	27
Ξ	6	Total number of volunteers (estimate if necessary)		i 6	100
Act	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
	<u>b</u>	Net unrelated business taxable income from Form 990-T, Part I, line 11		7b	0.
		0 17 1		Prior Year	Current Year
an	8	Contributions and grants (Part VIII, line 1h)		248,676.	295,554.
Revenue	9	Program service revenue (Part VIII, line 2g)		157,008.	110,116.
Re	10 11	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		2,537.	3,602.
	12	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		12,300.	7,387.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3)		420,521.	416,659.
	14	B 60 114 4 1 6 6 6 6 6		43,231.	33,514.
"		Salaries, other compensation, employee benefits (Part IX, column (A), line 4)		225,146.	257,589.
36	16a	Professional fundraising fees (Part IX, column (A), line 11e)	····	0.	
Expenses	b	Total fundralsing expenses (Part IX, column (D), line 25) 12,733	45.6	Tope March 1979, 1988	
щ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		116,734.	123,438.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		385,111.	414,541.
	19	Revenue less expenses. Subtract line 18 from line 12		35,410.	2,118.
S OF				inning of Current Year	End of Year
Net Assets	20	Total assets (Part X, line 16)		449,403.	447,520.
et A	21	Total liabilities (Part X, line 26)		7,836.	13,451.
	22 rt	Net assets or fund balances. Subtract line 21 from line 20 Signature Block		441,567.	434,069.
	ample(20)	<u>-1</u>			
true	correc	Ities of perjury, I declare that I have examined this return, including accompanying schedules and	statemen	ts, and to the best of my	knowledge and belief, it is
11 00,	GOTTOC	t, and complete. Declaration of preparer (other than officer) is based on all information of which p	oreparer ha	as any knowledge.	
Sign		Signature of officer		Date	
Here		DOROTHY MICHELETTI, PRESIDENT		Duto	
		Type or print name and title			
		Print/Type preparer's name Preparer's signature	Da	te Gheck	PTIN
Paid		AUTUMN ROSSI AUTUMN ROSSI		/27/23 self-employe	
Prepa		Firm's name CLIFTONLARSONALLEN LLP		Firm's EIN 4	L-0746749
Use (Only	Firm's address 1188 PADRE DRIVE, STE 101		THE SERVICE SE	
		SALINAS, CA 93901		Phone no. (83	31) 759-6300
		S discuss this return with the preparer shown above? See instructions			X Yes No
23200	1 12-15	1-22 I HA For Paperwork Reduction Act Notice con the congrete instructions			

Fori	m 990 (2022) YOUTH MUSIC MONTEREY	94-2863607 Page 2
P	art III Statement of Program Service Accomplishments	- 1 μgσ –
	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission: INSPIRE EXCELLENCE IN INDIVIDUAL STUDENTS AND ENRICH OUR	COMMINITY BY
	PROVIDING YOUNG PEOPLE WITH OPPORTUNITIES TO PARTICIPATE	TN AND CATN
	GREATER UNDERSTANDING OF MUSIC AND ITS PERFORMANCE.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O.	Yes A No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O.	Yes X No
4		ŭ
7	Describe the organization's program service accomplishments for each of its three largest program services, as m	easured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others	, the total expenses, and
	revenue, if any, for each program service reported.	
4a	(Revenue	\$110,116.
	JUNIOR YOUTH AND HONORS ORCHESTRA: 100 STUDENTS FROM OVER	30 MONTEREY
	COUNTY SCHOOLS AUDITION FOR YMMC'S ORCHESTRAS, REHEARSE W	EEKLY DURING
	THE SCHOOL YEAR, AND PRESENT 3 FULL LENGTH SYMPHONIC CONC	ERTS AT THE
	SUNSET CENTER EACH SEASON. MEMBERS PARTICIPATE IN TWO WE	EKEND RETREATS
	A YEARS.	
4b	(Code:) (Expenses \$ 32,567. including grants of \$) (Revenue	¢ \
	SOUTH COUNTY STRINGS: YMM PROVIDES INSTRUMENTS AND FREE G	ROUP VIOLIN
	VIOLA, AND CELLO LESSONS FOR UP TO 200 STUDENTS AGES 8-13	DIRING THE
	SCHOOL DAY IN SOUTH MONTEREY COUNTY. STUDENTS PERFORM FO	R SCHOOL AND
	COMMUNITY EVENTS. UP TO 24 STRING STUDENTS PLAY ALONGSID	F VMM'S TINTOR
	YOUTH ORCHESTRA MUSICIANS IN OUR MAY SEASON FINALE. COMBI	NED, THE 300
	STUDENTS OF YMMC'S PROGRAMS PRESENT 30 CONCERTS EACH YEAR	TO AN
	AUDIENCE OF OVER 7500 DISTINCT INDIVIDUALS THROUGHOUT MON	TO AN
	MON TOOLSON THE CHIEF THE PROPERTY OF THE PROP	TEKET COUNTY.

4c	(Code:) (Expenses \$	***
	CHAMBER MUSIC ENSEMBLES: ADVANCED MUSICIANS PARTICIPATE I)
	WOODWIND AND CHAMBER ENSEMBLES. ENSEMBLES RECEIVE WEEKLY	N BRASS,
		COACHING TO
	PREPARE FOR PUBLIC PERFORMANCES REPRESENTING YMM.	
		36.
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$	1
4e	Total program service expenses 355,834.	,
		Form 990 (2022)
		rorm ฮฮบ (2022)

Form 990 (2022) YOUTH MUSIC MONTEREY 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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	_ 2	X	
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		<u> </u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
6	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X_
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
7	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6_		X
1	Did the organization receive or hold a conservation easement, including easements to preserve open space,	İ		
8	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
0	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
9	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?	_		٠,,
10	If "Yes," complete Schedule D, Part IV	9		X
10				177
11	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	er egas	X
	as applicable.			
а		yer a gran	ens so	10 M 12
-		l	37	
h	Part VI Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	11a	X	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			· •
c	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	11b		<u>X</u>
•	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII			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	11c		
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	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	116	77	
	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?	12.0		
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	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		1	
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	.	Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign Individuals? If "Yes," complete Schedule F, Parts III and IV	16	- 1	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	_18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? if "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		7	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
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Form 990 (2022)	HTUOY	MUSIC	MONTER.
Part IV Checklist of R	equired S	chedules	(continued)
		Will be	

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
-00	Part IX, column (A), line 2? if "Yes," complete Schedule I, Parts I and III	22	X	<u></u>
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	1		
24 a	Schedule J	23		X
£.40	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			1
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	ļ		
h	Schedule K. If "No," go to line 25a	24a		X
c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	24b	 	
·	any tax-exempt bonds?			İ
d	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c	 	<u> </u>
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	24d	-	-
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I) DEc		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	25a	-	-2\(\sigma\)
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	}		
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	200		-21
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,		Message Element	14 T.
	instructions for applicable filing thresholds, conditions, and exceptions):			yeur d against
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			V 0. 240 - 0.
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L. Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	_29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
00	Schedule N, Part II	32		<u>X</u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
24	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	_33		<u>X</u> _
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
352	Part V, line 1	34		<u>X</u>
		35a		X
w	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		ļ	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	35b		
-	If "Ves " complete Schedule P. Port V. line C.	_		7.7
37	If "Yes," complete Schedule R, Part V, line 2	36		<u>X</u> _
	and that is treated as a nartharphin for fodoral income to unusure 0]	v
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	37	\dashv	<u>X</u>
	Note: All Form 900 files are required to parallele Calcalide C	20	x	
Par	tV Statements Regarding Other IRS Filings and Tax Compliance	38		
	Check if Schedule O contains a response or note to any line in this Part V			
		·····	Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	0.00	<u>। 63</u> े १७४	UVI
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
¢	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		3436 T	
	(gambling) winnings to prize winners?	10	Х	Ntukki
232004	12-13-22		990 (2	20221
	4		/-	/

		ilea			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,]		31,50	100	1
	filed for the calendar year ending with or within the year covered by this return	_2a	27			\$77.3
b		ırns?		2b	X	
3a	σ		***************************************	За		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedul	eO		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	authori	tv over. a			
	financial account in a foreign country (such as a bank account, securities account, or other financial	accoun	t)?	4a		X
D	If "Yes," enter the name of the foreign country				10-4	
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial	Account	s (FBAR).			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	y and a summariant was of to a party to a profit tax affects that is	action?		5b		X
с 6а	and the deganization months and the second		***************************************	5c	<u> </u>	
Ua.	Does the organization have annual gross receipts that are normally greater than \$100,000, and did t any contributions that were not tax deductible as charitable contributions?	he orgai	nization solicit		ļ	
h	If "Yes," did the organization include with every solicitation an express statement that such contribu			<u>6a</u>		X
7	were not tax deductible? Organizations that may receive deductible contributions under section 170(c).			_6b	: * :	
` a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	e daga m			l diam	
	If "Vec " did the exceptantion notify the department to the second of th			7a 		X
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w		ivad	7b		***
	to file Form 8282?	as requ	irea	_		7.7
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d		<u>7с</u>	a 1 2 1	<u>X</u>
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	Ontract	7		Chart	elik myy i
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont	vacto		7e 7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file F	nrm 880	Q as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	ation file	a Form 1098-02	7 <u>y</u> 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintaine	d by the	41011111000-01	111	31.	V gagati
	sponsoring organization have excess business holdings at any time during the coard	-		8		\$4. 19
9	Sponsoring organizations maintaining donor advised funds.	••••••	,,	Ğ	Fag. 35	41/3
a	Did the sponsoring organization make any taxable distributions under section 4966?			9a	801 (2)	_111_FTV
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:				7. T	
a	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:					
a	Gross income from members or shareholders	11a		Žū,		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against					
40	amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?	ļ	12a		
13	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
	Section 501(c)(29) qualified nonprofit health insurance issuers.		-			
a	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	N Z 8	or et alla
b	Enter the amount of reserves the organization is required to maintain by the states in which the					ng yag
~	organization is licensed to issue qualified health plans	1 1	[:	94		
С	Enter the amount of reserves on hand	13b	·····			
14a	Did the organization recoive any neumants for independent to the continue to t	13c		A. 12	Arrite 9	77
b	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedu</i>			14a	-	X
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune	le O .		14b		7-94
**	excess parachute payment(s) during the year?	ialion oi		<u>.</u>		v
	If "Yes," see the instructions and file Form 4720, Schedule N.	• • • • • • • • • • • • • • • • • • • •	ļ-	15	- J	X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	incom	.,	16		X
	If "Yes," complete Form 4720, Schedule O.	. moont	·	16	Territo	
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac	tivitiee	ŀ			455FT
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	Heiligg.	ŀ	17	1	
	If "Yes," complete Form 6069.	• • • • • • • • • • • • • • • • • • • •		1 1 1 1 A	E 150 2	. 155.5
232005	12-13-22			Form	990 (2	2022)
				- ******	(2	

YOUTH MUSIC MONTEREY 94-2863607 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 Section 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 7 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? X 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? X 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? X 4 Did the organization become aware during the year of a significant diversion of the organization's assets? X 5 6 Did the organization have members or stockholders? 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? X 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a b Each committee with authority to act on behalf of the governing body? X 8b 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 X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No 10a Did the organization have local chapters, branches, or affiliates? X b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Х 11a **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 Х 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? X 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done 12c Did the organization have a written whistleblower policy? 13 X 13 Did the organization have a written document retention and destruction policy? X 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official X 15a b Other officers or key employees of the organization X 15b 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? ______ X 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed CA Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website X Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records

Form **990** (2022)

<u>DOROTHY MICHELETTI - (831) 375-1992</u> 546 HARTNELL STREET STE B, MONTEREY, CA

93940

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

Check this box if neither the organiza	tion nor any related	orga	ıniza	tion	con	nper	sat	ed any current officer, d	irector, or trustee.	
(A)	(B)			Poo	C)					(F)
Name and title	Average hours per	(do	not c	heck	more	than	one	Reportable	Reportable	Estimated
	week	offi	cer a	nda d	rson irecto	is boti or/trus	n an tee)	compensation from	compensation from related	amount of other
	(list any	refo.						the	organizations	compensation
	hours for	or dire				Ē		organization	(W-2/1099-MISC/	from the
	related	trustee or director	truste		93	pensa		(W-2/1099-MISC/	1099-NEC)	organization
	organizations below	la E	bonad		Ploye.	t com	١.	1099-NEC)		and related
	line)	Individual	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) SUZANNE MUDGE	40.00	✝	_		-		<u> </u>			
EXECUTIVE DIR.	******			х				70,252.	0.	4,352.
(2) DOROTHY MICHELETTI	20.00			_	-			, , , , , , , , , , , , , , , , , , , ,		27002
PRESIDENT		x		X				0.	0.	0.
(3) PETER MECKEL	8.00									
VICE PRESIDENT		x		X				0.	0.	0.
(4) TREVOR HAWKINS	8.00									
TREASURER		X		X				0.	0.	0.
(5) MARI RONDELI	8.00								****	
SECRETARY		X		X				0.	0.	0.
(6) AMELIA MAASKE	8.00		ļ							
DIRECTOR		X						0.	0.	0.
(7) ED GAVRIN	8.00								:	
DIRECTOR		Х						0.	0.	0.
(8) JO ANN HATCH	3.00							İ		
DIRECTOR		X						0.	0.	0.
		Ì								
		<u> </u>								77844
		<u> </u>								
						_				
147.V-1-			\vdash				_			
		-	\vdash	\vdash						
	*									

232007 12-13-22

Form 990 (2022)

For	n 99	0 (ONTEREY			94-2863	607 Page
Pe	irt \	/III	Statement of Re	venue	•					
			Check if Schedule O	contains	a response	or note to any lia	ne in this Part VIII .		^^**	
		•••					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 51
at t	1	а	Federated campaigns	,	<u>1</u> a					
<u> </u>	b Membership dues 1b 1c 26									
ξ, A					26,550.					
첉ಪ		d	9							
Si Si		e	Government grants (conti			30,000.				50000000000000000000000000000000000000
iii ii	3	1	All other contributions, gifts,			220 004				
Contributions, Gifts, Grants and Other Similar Amounts	\$	~	similar amounts not included Noncash contributions included in			239,004.				
LO C		_					295,554.			
	1		TOTAL FIED THE .			Business Code	473,334.		eksinga ji sejjende Najele kate Aleese	
a)	2	а	TUITION & FEE	ls		711130	93,373.	93,373.	17 mil 414 farkt 17 80 5 14	
Program Service Revenue		b				711130	16,743.	16,743.		
		С						10,713.		
am eve		d								
Progr R		е								
		f	All other program service	revenue						
		g	Total. Add lines 2a-2f				110,116.			接触 达图图的
	3		Investment income (includ	ding divi	dends, intere	est, and				
							3,602.			3,602
	4		Income from investment of							
	5		Royalties	······	(i) Real		200 m - 2 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	- 20 x 12 x 12 x 12 x 12 x 12 x 12 x 12 x		
	_	_	O	I. -	(i) Real	(ii) Personal				
	6		Gross rents	6a 6b						
			Less: rental expenses Rental income or (loss)	6c						
			Net rental income or (loss)			L	<u> </u>	<u> </u>		
	1		Gross amount from sales of		Securities	(ii) Other		. #1.000 JASE 1, 2015		
			assets other than inventory	7a		· · · · · · · · · · · · · · · · · · ·				
		b	Less: cost or other basis							
ne			and sales expenses	7b						
ven		С	Gain or (loss)	7c						
Be		d	Net gain or (loss)		·····					
Other Revenue	8	а	Gross income from fundraising							
ō			including \$26							
			contributions reported on			17 405				
		1	Part IV, line 18	• • • • • • • • • • • • • • • • • • • •	8a	17,425.				
			Less: direct expenses			10,038.	7,387.			
			Net income or (loss) from Gross income from gamin				1,36/•			7,387.
	יט	a	Part IV, line 19							
		b	Less: direct expenses							
			Net income or (loss) from				80 - A 128 - 128 - 12 12 12 12 12 12 12 12 12 12 12 12 12	user read to the historical service street	era i i ra erazi ya Ka na ya Kifi ¹⁸ i wiliki i	<u>141 y 2</u> 50 i 14 50 335 1 1 1 1 2 7 0
			Gross sales of inventory, l	-						January Comment
			and allowances							
		b	Less: cost of goods sold		10b					
			Net income or (loss) from							
ıρ						Business Code				
eon	11	a	**************************************							
Miscellaneous Revenue		b								
Scel		C.								
Ξ Z			All other revenue					Paragerja (f. 1911) and a distribution of		na de la celata del celata de la celata delata de la celata delata de la celata de la celata del la celata de la celata de la celata de la celata del la celata de la celata de la celata d
		ď	Total. Add lines 11a-11d				1	melakaka <i>Per</i> aka Peraka	PENNSHALI LI SEMERE	UL 하고 사회 전기가

416,659.

12 Total revenue, See instructions

110,116.

Form 990 (2022) YOUTH MUSIC MONTEREY Part IX Statement of Functional Expenses

Sect	ion 501(c)(3) and 501(c)(4) organizations must comp	plete all columns. All othe	er organizations must co	mplete column (A).	
	Check if Schedule O contains a respor		this Part IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	33,514.	33,514 <u>.</u>		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	50 50 5			
	trustees, and key employees	72,602.	72,602.		
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	151 880	1.40 200	0 150	
7	Other salaries and wages	151,778.	149,328.	2,450.	
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)	1/ 220	11 010	0.004	
9 10	Other employee benefits	14,228. 18,981.	11,247. 18,601.	2,981.	
10 11	Payroll taxes Fees for services (nonemployees);	10,301.	10,001.	380.	
	` ' ' '				
a	Management				
	LegalAccounting	2,545.		2,545.	
	Lobbying	4,545.		2,545.	· · · · · · · · · · · · · · · · · · ·
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees		385000000000000000000000000000000000000		
	Other. (If line 11g amount exceeds 10% of line 25,				
9	column (A), amount, list line 11g expenses on Sch O.)	8,307.		8,307.	
12	Advertising and promotion	640.		240.	400.
13	Office expenses	13,736.	4,340.	7,750.	1,646.
14	Information technology	4,013.	1,676.	2,337.	= 7010.
15	Royalties				
16	Occupancy	18,269.	11,124.	5,481.	1,664.
17	Travel				
18	Payments of travel or entertainment expenses				7.1-1
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	3,017.	3,017.		
23	Insurance	9,140.	1,371.	7,769.	
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),				
	amount, list line 24e expenses on Schedule 0.)				
a	CONCERTS	40,457.	40,457.		
b	MISCELLANEOUS EXPENSE	9,023.			9,023.
C	MUSIC PURCHASES	4,780.	4,780.		
d	SPECIAL PROJECTS	3,262.	2,194.	1,068.	
e	All other expenses	6,249.	1,583.	4,666.	
25	Total functional expenses. Add lines 1 through 24e	414,541.	355,834.	45,974.	12,733.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.		ĺ		
	Check here if following SOP 98-2 (ASC 958-720)				
232010	12-13-22				Form 990 (2022)

Pai	rt X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A)		(B)
			Beginning of year	<u> </u>	End of year
	1	Cash - non-interest-bearing	106,420.	1	114,053.
	2	Savings and temporary cash investments	16,378.	2	17,593.
	3	Pledges and grants receivable, net	141,035.	3	90,793.
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%		الحادة فلسط المدادة فلسط	
	İ	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	
Assets	8	Inventories for sale or use		8	
¥	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 95,691.		4	
	b	Less: accumulated depreciation 10b 88,885.	7,679.	10c	6,806.
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	177,891.	15	218,275.
	16	Total assets. Add lines 1 through 15 (must equal line 33)	449,403.	16	447,520.
	17	Accounts payable and accrued expenses	1,137.	17	6,752.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Ş	22	Loans and other payables to any current or former officer, director,		19.00	
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
gp		controlled entity or family member of any of these persons		22	
L	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third]	
		parties, and other liabilities not included on lines 17-24). Complete Part X		1	
		of Schedule D	6,699.	_	6,699.
	26	Total liabilities. Add lines 17 through 25	7,836.	26	13,451.
(0		Organizations that follow FASB ASC 958, check here		1.00	
ĕ		and complete lines 27, 28, 32, and 33.			
<u>a</u>	27	Net assets without donor restrictions		27	
Ä	28	Net assets with donor restrictions	This end that it would also a Mindows are	28	Tarana an and a Narber State and and
E C		Organizations that do not follow FASB ASC 958, check here			
II.		and complete lines 29 through 33.		Bari	
23	29	Capital stock or trust principal, or current funds	0.	29	0.
sse	30	Paid-in or capital surplus, or land, building, or equipment fund	0.	30	0.
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or other funds	441,567.	31	434,069.
Š	32	Total net assets or fund balances	441,567.	32	434,069.
	33	Total liabilities and net assets/fund balances	449,403.	33	447,520.

	1 990 (2022) YOUTH MUSIC MONTEREY	<u>94-286</u>	3607	Pag	_{le} 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	416	, 65	59.
2	Total expenses (must equal Part IX, column (A), line 25)	2	414	., 54	11.
3	Revenue less expenses, Subtract line 2 from line 1	3	2	,13	L8.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	441	,56	57.
5	Net unrealized gains (losses) on investments	5	9	,61	<u> </u>
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	434	,06	59.
Pa	rt XIII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
			`	Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.			M.S
2a			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a	8 (5) A A A A A A A A A A A A A A A A A A A		X213
	separate basis, consolidated basis, or both:				A.J.
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.			
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		<u>X</u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
			Form 9	90 (2	2022)

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Inspection

Name of the organization

VOITH MISTC MONTEREV

Employer identification number

		XO0.T.	H MUSIC MO	NTEREY				94	:-2863607
Part	1	Reason for Public (Charity Status.	(All organizations must	complete t	his part.) S	See instructions.		
The org	ani	zation is not a private found							
1 🗂		A church, convention of ch					4VAVO		
2						אָל שואָטיזיו ווינ	IANI).		
-		A school described in sect							
3 📙		A hospital or a cooperative							
4 _		A medical research organiz	ation operated in cor	njunction with a hospita	I described	in section	on 170(b)(1)(A)(iii). Ei	nter th	ne hospital's name,
		city, and state:							
5		An organization operated fo	or the benefit of a col	llege or university owner	d or operat	ted by a do	vernmental unit desc	cribed	l in
		section 170(b)(1)(A)(iv). (0		.,	-	, <u>-</u>		J., 100 G	
6	_	,							
6 -		A federal, state, or local go							
7		An organization that norma		ntial part of its support f	rom a gov	ernmental	unit or from the gene	ral pu	ıblic described in
	_	section 170(b)(1)(A)(vi). (C	omplete Part II,)						
8		A community trust describe	ed in section 170(b)((1)(A)(vi). (Complete Par	rt II.)				
9		An agricultural research org				ed in conic	inction with a land-or	rant co	allene
		or university or a non-land-g							
		university:	grant conlege of agrici	andro (acc manachoria).	Latio inc	manne, city	, and state of the con	iege o	or .
10 X	-		1r. 1 641			- 15 - 15			
10 LX		An organization that norma							
		activities related to its exen							
		income and unrelated busir	ness taxable income	(less section 511 tax) fro	om busine:	sses acqui	red by the organization	on afte	er June 30, 1975.
		See section 509(a)(2). (Co	mplete Part III.)						
11].	An organization organized a	and operated exclusi	vely to test for public sa	fety. See	section 50	09(a)(4).		
12		An organization organized a						the nu	irnoses of one or
		more publicly supported or							
		lines 12a through 12d that						3). OH	eck the box off
" Г									
a L		Type I. A supporting orga							
		the supported organization			majority o	of the direc	tors or trustees of th	e supr	porting
-		organization. You must o							
b		Type II. A supporting org	anization supervised	or controlled in connec	tion with it	s supporte	ed organization(s), by	having	g
		control or management o							
		organization(s). You mus			•				· North
с		Type III functionally inte			in connec	tion with s	and functionally integ	ratad	with
		its supported organization						raicu i	willi,
أيد									
d [Type III non-functionally							
		that is not functionally int						entiver	ness
-		requirement (see Instructi							
е		Check this box if the orga	anization received a v	vritten determination fro	m the IRS	that it is a	Type I, Type II, Type	Ш	
		functionally integrated, or	Type III non-function	nally integrated supporti	ng organiz	ation.			
f E	nter	the number of supported of		***************************************				ſ	
		de the following information	_ *********			4		h	
	(i)	Name of supported	(ii) EIN	(iii) Type of organization	(iv) is the orga in your govern	inization ((sled	(v) Amount of moneta	rv T	(vi) Amount of other
		organizatlon		(described on lines 1-10	Yes	No document?	support (see instruction	- 1	upport (see instructions)
				above (see instructions))	103	NO	<u> </u>		
								\dashv	——————————————————————————————————————
							77/78/21		
				**************************************		<u> </u>			11-91-
					The Reference of the	-6. C F C.O.W J		+	

Schedule A (Form 990) 2022 YOUTH MUSIC MONTEREY 94-2863607 Page 2
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.)

Se	ction A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and				(=1===	107 2022	(i) iotal
	membership fees received. (Do not						
	include any "unusual grants.")		1	[1	
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to					•	
	or expended on its behalf						
3	The value of services or facilities	-					
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions					企作 1 197.39	
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
	Public support, Subtract line 5 from line 4.	****************					
	ction B. Total Support			-			
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 4						
8	Gross income from interest,					İ	
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business		i	•			
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital	İ				İ	
	assets (Explain in Part VI.)	An alice of the section	en en Electronista en el		and the second second second		
11	Total support. Add lines 7 through 10					Tana da ang may na may sa ang may na may sa ang may na may na may na may na may na may na may na may na may na May na maganaga may na may na may na may na may na may na may na may na may na may na may na may na may na may	
12	Gross receipts from related activities,					12	
13	First 5 years, If the Form 990 is for the	ne organization's fir	st, second, third, f	ourth, or fifth tax y	ear as a section 50	D1(c)(3)	
Ser	organization, check this box and stor ction C. Computation of Publi	c Support Per	centage	***************************************			<u></u>
	Public support percentage for 2022 (I			aluma /6\			
15	Public support percentage from 2021	Schedule A. Bert I	Flipe 14	olumn (1))		14	%
162	33 1/3% support test - 2022. If the c	rdanization did no	t check the haven	line 19 and line 1	4 io 39 1/20/ ar ==	15	%
,,,	stop here. The organization qualifies	as a nublicky suppy	rted omanization				
Ь	33 1/3% support test - 2021. If the c				ino 15 io 22 1/20/	or many about this t	
_	and stop here. The organization qual	ifies as a nublicly s	unnorted organiza	tion	ME 13 18 33 173%	or more, crieck this t	oox
17a	10% -facts-and-circumstances test	- 2022. If the ora	apported organiza anization did not cl	hack a hov on line	13 16a or 16b a	nd line 14 is 1004 ar	
	and if the organization meets the facts	s-and-circumstance	s test, check this	hox and ston ber	no, rua, ur rub, a na Evolain in Derth	Thoughe secondant	uure,
	meets the facts-and-circumstances te	st. The organization	n qualifies as a nut	oliciv supported or			
b	10% -facts-and-circumstances test					7a and line 15 is 100	
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	organization meets the facts-and-circu	imstances test. The	e organization cual	lifies as a nuhlicly o	nuncited organiz		
<u>1</u> 8	Private foundation. If the organization	n did not check a h	oox on line 13. 16a	. 16b. 17a or 17b	check this hover	ation	
					S. SON E NO DOX OF	Schedule A (Fo	

Schedule A (Form 990) 2022 YOUTH MUSIC MONTEREY

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	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total	
1	Gifts, grants, contributions, and					10,2022	(i) rotai	
	membership fees received. (Do not							
	include any "unusual grants.")	354,342.	397,458.	541,106.	405,684.	295,554.	1994144.	
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose					110,116.	110,116.	
3	Gross receipts from activities that							
	are not an unrelated trade or bus-							
	iness under section 513						**	
4	Tax revenues levied for the organization's benefit and either paid to							
_	or expended on its behalf							
5	The value of services or facilities furnished by a governmental unit to the organization without charge							
e	= ***	354,342.	397,458.	E/1 10C	405 604	405 650	0101050	
	Total. Add lines 1 through 5	334,342.	397,458.	541,106.	405,684.	405,670.	2104260.	
/a	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			14 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			0.	
	amount on line 13 for the year						0.	
	Add lines 7a and 7b	The state of the s		. 13876			0.	
8	Public support. (Subtract line 7c from line 6.)						2104260.	
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total	
	Amounts from line 6	354,342.	397,458.	541,106.	405,684.	405,670.	2104260.	
ıva	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	3,161.	2,929.	20,541.	2,537.	3,602.	32,770.	
b	Unrelated business taxable income	1						
	(less section 511 taxes) from businesses		i					
	acquired after June 30, 1975	l						
C	Add lines 10a and 10b	3,161.	2,929.	20,541.	2,537.	3,602.	32,770.	
11	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on				12,300.	7,387.		
	Other income. Do not include gain	7447			12,300.	7,307.	19,687.	
	or loss from the sale of capital assets (Explain in Part VI.)	14,917.	150.	44.			15,111.	
	Total support. (Add lines 9, 10c, 11, and 12.)	372,420.	400,537.	561,691.	420,521.	416,659.	2171828.	
	First 5 years. If the Form 990 is for th	e organization's firs	st, second, third, f	ourth, or fifth tax y	ear as a section 50)1(c)(3) organizatio	٦,	
	check this box and stop here		·····	<u></u>		***************************************		
	tion C. Computation of Public							
	Public support percentage for 2022 (li			olumn (f))		15	96.89 %	
16	Public support percentage from 2021	Schedule A, Part []	I, line 15			16	97.08 %	
	tion D. Computation of Inves			-00.00				
17	Investment income percentage for 20	22 (line 10c, colum	ın (f), divided by lin	e 13, column (f))		17	1.51 %	
	B Investment income percentage from 2021 Schedule A, Part III, line 17							
19a	Pa 33 1/3% support tests - 2022. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not							
	more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization							
b	b 33 1/3% support tests - 2021. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and							
	line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization							
20	Private foundation. If the organization	ı did not check a b	ox on line 14, 19a	, or 19b, check thi	s box and see insti	ructions		
32023	12-09-22					Schedule A	(Form 990) 2022	

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain,
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filling organization's supported organizations? If "Yes," provide detail in Part Vi.
- 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
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Schedule A (Form 990) 2022

YOUTH MUSIC MONTEREY 94-2863607 Page 7 Schedule A (Form 990) 2022 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions Current Year 1 Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations 3 Amounts paid to acquire exempt-use assets 4 5 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) 5 Other distributions (describe in Part VI). See instructions. 6 Total annual distributions. Add lines 1 through 6. 7 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. 8 Distributable amount for 2022 from Section C, line 6 9 Line 8 amount divided by line 9 amount 10 Underdistributions Distributable Section E - Distribution Allocations (see instructions) **Excess Distributions** Pre-2022 Amount for 2022 Distributable amount for 2022 from Section C, line 6 2 Underdistributions, if any, for years prior to 2022 (reasonable cause required - explain in Part VI). See instructions. 3 Excess distributions carryover, if any, to 2022 a From 2017 **b** From 2018 c From 2019 d From 2020 e From 2021 f Total of lines 3a through 3e g Applied to underdistributions of prior years h Applied to 2022 distributable amount Carryover from 2017 not applied (see instructions) j Remainder, Subtract lines 3g, 3h, and 3i from line 3f. Distributions for 2022 from Section D, line 7: a Applied to underdistributions of prior years b Applied to 2022 distributable amount c Remainder. Subtract lines 4a and 4b from line 4. 5 Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. 6 Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2023. Add lines 3j and 4c. 8 Breakdown of line 7: a Excess from 2018 b Excess from 2019 c Excess from 2020 d Excess from 2021 e Excess from 2022

Schedule A (Form 990) 2022

** PUBLIC DISCLOSURE COPY **

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990 or Form 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

Schedule B (Form 990) (2022)

Name of the organization	Employer identification number					
YO	UTH MUSIC MONTEREY	94-2863607				
Organization type (check or	ne):					
Filers of:	Section:					
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation					
	527 political organization					
Form 990-PF	501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
	covered by the General Rule or a Special Rule. 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rul	e. See instructions.				
General Halo						
	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor's					
Special Rules						
sections 509(a)(1) a contributor, during	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support to the 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Filine 1. Complete Parts I and II.	d that received from any one				
contributor, during literary, or educatio	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.					
year, contributions is checked, enter h purpose. Don't con	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \$					
answer "No" on Part IV, line	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Fo 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, prequirements of Schedule B (Form 990).					
	on Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.	Schedule B (Form 990) (2022)				

Schedule B (Form 990) (2022) Page 2 Name of organization Employer identification number YOUTH MUSIC MONTEREY 94-2863607 Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 1 Person Payroll 44,168. Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 2 X Person Payroli 12,500. Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 No. Total contributions Type of contribution 3 X Person Payroll 15,000. Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) Nο. Name, address, and ZIP + 4 **Total contributions** Type of contribution 4 Person X Payroll 15,000. Noncash (Complete Part II for noncash contributions.) (a) (c) (d) No. Name, address, and ZIP + 4 Total contributions Type of contribution 5 Person X Payroll 10,000. Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 6 X Person Pavroll

Noncash (Complete Part II for noncash contributions.)

223452 11-15-22

51,242.

Name of organization

TVELITO OF OF GENERAL CONT	Linployer identification number
YOUTH MUSIC MONTEREY	94-2863607
Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.	

	IC MONTEREY		-2803007
	tributors (see instructions). Use duplicate copies of Part I if		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ 7,600.	Person X Payroll Noncash (Complete Part If for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$\$ \$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II for noncash contributions.)

223452 11-15-22

Name of organization

Employer identification number

YOUTH MUSTC MONTEREY

94-2863607

Part II	Noncash Property (see instructions). Use duplicate copies of F		-2003007
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
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(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

	B (Form 990) (2022)		Page 4					
Name of o	organization		Employer identification number					
YOUTH	MUSIC MONTEREY		94-2863607					
Part III	Exclusively religious, charitable, etc., contribution from any one contributor. Complete columns (a)	through (e) and the following line entry. charitable, etc., contributions of \$1,000 or les	ion 501(c)(7), (8), or (10) that total more than \$1,000 for the year					
(a) No. from Part l	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
		(e) Transfer of gift						
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee					
(a) No.	(h) Duvena of sift	(2)11.						
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
		Marie Control of the						
	(e) Transfer of gift							
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee					
(a) No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how wift is held					
Part I	(b) tu pose of gift	(c) Ose of gat	(d) Description of how gift is held					
	- 19-19-19-19-19-19-19-19-19-19-19-19-19-1	(e) Transfer of gift						
	Transferee's name, address, at	nd ZIP + 4	Relationship of transferor to transferee					
(a) No.								
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
	(e) Transfer of gift							
	Transferee's name, address, ar	Relationship of transferor to transferee						

SCHEDULE D

Department of the Treasury Internal Revenue Service

(Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

YOUTH MUSIC MONTEREY

Employer identification number 94-2863607

Train humber at end of year Aggregate value of contributions to (during year) Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value of grants from (during year) Aggregate value of grants from (during year) Aggregate value of grants from (during year) Did the organization in property, subject to the organizations in writing that the assets held in donor authlead funds are the organization in property, subject to the organizations in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or denic advisor, for any other purpose conferring imperimental private benefit? Pert III Conservation Easements held by the organization's answered "Yes" on Form 990, Part N, Ilino 7. Personation of land for public use (for example, recreation or education) Preservation of a historically important land area Proservation of land for public use (for example, recreation or education) Preservation of a certified historic structure Preservation of recoverable public that public the organization held a qualified conservation contribution in the form of a certified historic structure Preservation of conservation easements and the form of the organization in held a qualified conservation contribution in the form of a certified historic structure 1 Total number of conservation easements in childed in (a) 2	Pa	Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the					
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Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(f)) and section 170(h)(4)(B)(f))? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. In If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial galn, provide the following amounts required to be reported under FASB ASC 958 relating to these items: Revenue included in Form 990, Part	4	- ,	ement is located				
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b Assets included in Form 990, Part X \$	9			ф.			
	h	Assets included in Form 990 Part X		Фф			

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	edule D (Form 990) 2022 YOUTH M	USIC MONTE	REY					94-28	63607	Page 2
Pa	rt III Organizations Maintaining C								(continu	ıed)
3	Using the organization's acquisition, accessi	on, and other record	ls, chec	k any of the	following tha	it make s	ignificant	use of its		
	collection items (check all that apply):									
а	Public exhibition	•	d 🔝	Loan or exc	change progr	am				
b	Scholarly research	•	е 🔙	Other						
C	Preservation for future generations									
4	Provide a description of the organization's co							ose in Part	XIII.	
5	During the year, did the organization solicit of									
	to be sold to raise funds rather than to be ma	aintained as part of t	the orga	nization's co	ollection?				Yes	☐ No
Pa	rt IV Escrow and Custodial Arran	gements. Compl	lete if th	e organizatio	on answered	"Yes" on	Form 99	0, Part IV,	line 9, or	
	reported an amount on Form 990, Pa	rt X, line 21.								
1a	Is the organization an agent, trustee, custodi	an or other intermed	diary for	contribution	is or other as	sets not	included			
	on Form 990, Part X?	*************		,,,					Yes	No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing	table:						
									Amount	
c	Beginning balance						1c			
d	Additions during the year									,
е	Distributions during the year									
f	Ending balance									
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21, for	escrow or c	ustodial acco	ount liabil	ity?		Yes	No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	kplanatio	on has been	provided on	Part XIII			•	
	rt V Endowment Funds. Complete i	f the organization ar	nswered	"Yes" on Fo	orm 990, Pari	t IV, line	10.			
		(a) Current year	(b) F	Prior year	(c) Two yea	rs back	(d) Three	years back	(e) Four y	ears back
1a	Beginning of year balance									
b	Contributions									
c	Net investment earnings, gains, and losses									
d	Grants or scholarships						-		****	
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses	*******							7.11	
g	End of year balance									
2	Provide the estimated percentage of the curr	ent vear end balanc	e (line 1	a. column (a	\\ held as:					-
а	Board designated or quasi-endowment		%	9, (,,					
b	Permanent endowment	%								
С	Term endowment	%								
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.								
3a	Are there endowment funds not in the posse.	•	ation tha	it are held a	nd administe	red for th	e			
	organization by:	3 · · · ·							Г	es No
	(i) Unrelated organizations								3a(i)	
	(ii) Related organizations								3a(ii)	
ь	If "Yes" on line 3a(ii), are the related organiza	tions listed as requir	red on S	chedule R?	•••••	***********			3b	
4	Describe in Part XIII the Intended uses of the	organization's endo	wment i	funds.		• • • • • • • • • • • • • • • • • • • •	•••••		<u> </u>	
Pa	rt VI 🔝 Land, Buildings, and Equipm	ent.								
-	Complete if the organization answered	i "Yes" on Form 990), Part I\	/, line 11a. S	See Form 990), Part X,	line 10.			
	Description of property	(a) Cost or c		T	t or other		ccumulat	ed Dec	(d) Book	value
		basis (investr		1	(other)	(preciation	I	(a) Book	value
1a	Land	,		1				V. 25		
b	Buildings					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
-	Leasehold improvements									
d	Equipment			9	5,691.		88,8	85.	<u>ر</u>	,806.
	Other			 	<u>~,~,</u>		99,0			,000
	I. Add lines 1a through 1e. (Column (d) must e		X colur	nn (R) line 1	Oc. 1				б	,806.

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Schedule D (Form 990) 2022

Schedule G (Form 990) 2022

Sch	edule G (Form 990) 2022 YOUTH MUSIC MONTEREY 94-2	86360	7 Page 3
11		Yes	No
12	, , , , , , , , , , , , , , , , , , , ,		
40	to administer charitable gaming?	Yes	L No
	Indicate the percentage of gaming activity conducted in:	1-0-1	0.4
	a The organization's facility o An outside facility	13a	% %
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:	100	70
	The first and and and and proposed the proposed of the proposed of the posterior and the proposed of the posterior and the proposed of the pro		
	Name		
	Address		
15:	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	No No
ı	of gaming revenue retained by the third party \$ and the amount		
,	of gaming revenue retained by the third party \$ If "Yes," enter name and address of the third party:		
•	The root, office frame and address of the time party.		
	Name		
	Address		
16	Gaming manager information:		
	Name		
	Natio		
	Gaming manager compensation \$		
	Description of services provided		
	Director/officer Employee Independent contractor		
	Shorter of the contractor		
17	Mandatory distributions:		
ŧ	s the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	Yes	No No
ŀ	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
l Da	organization's own exempt activities during the tax year \$		
7-6	Int IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	t III, lines 9,	9b, 10b,
	130, 130, 16, and 176, as applicable. Also provide any additional information. See instructions.		
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Schedule G (Form 990)	YOUTH MUSIC MONTEREY formation (continued)	94-2863607 Page 4
Fart IV Supplemental III	Torrilation (continued)	***************************************
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SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

YOUTH MUSIC MONTEREY

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

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

OMB No. 1545-0047

Open to Public Inspection Employer identification number

94-2863607

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(h) Purpose of grant or assistance X Yes Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of noncash assistance (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of noncash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (d) Amount of cash grant (c) IRC section (if applicable) Part 1 General Information on Grants and Assistance (b) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization or government Part

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Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

Enter total number of other organizations listed in the line 1 table

YOUTH MUSIC MONTEREY

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Schedule | (Form 990) 2022

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Part III

(f) Description of noncash assistance TUITION ASSISTANCE (e) Method of valuation (book, FMV, appraisal, other) AID TYPE OF ASSISTANCE MUST SUBMIT STANDARDS TAKE INTO ACCOUNT THE NUMBER OF PEOPLE IN THE HOUSEHOLD, AND THE TO ASSURE **Part IV.** Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. TUITION ASSISTANCE AND PRIVATE LESSON ASSISTANCE FOR YOUTH MUSIC MONTEREY STUDENTS ARE DETERMINED BY A COMMITTEE OF BOARD AND STAFF MEMBERS. INCOME THE COMMITTEE. STUDENT THE CIRCUMSTANCE. FMV PROGRESS IS MONITORED BY YMM STAFF AND PRIVATE MUSIC INSTRUCTORS 367. STUDENTS ARE USING THE FUNDS TO PROGRESS IN THEIR MUSIC STUDIES. ٥. . (d) Amount of non-cash assistance 20, DEMONSTRATE THEIR FINANCIAL 0 3,000. 10,147 (c) Amount of cash grant IS THEN DISBURSED FOLLOWING DETERMINATIONS MADE BY APPLYING FOR THIS (b) Number of recipients 15 ~ 21 FAMILIES TO (a) Type of grant or assistance AND W-4 HOUSEHOLD INCOME. PRIVATE LESSON ASSISTANCE APPLICATION Γ INE TUITION ASSISTANCE SCHOLARSHIPS Ĥ PARTĀŇ

232102 10-31-22

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

VOITHE MISTO MONTEREV

Employer identification number 94-2863607

TOUTH MUSIC MONTEREY 94-2863607
FORM 990, PART VI, SECTION A, LINE 8B:
THERE ARE NO COMMITTEES WITH THE AUTHORITY TO ACT ON BEHALF OF THE
GOVERNING BODY.
FORM 990, PART VI, SECTION B, LINE 11B:
THE TREASURER REVIEWS THE 990 WITH THE PRESIDENT PRIOR TO FILING. ALL
BOARD MEMBERS ARE PROVIDED A COPY.
FORM 990, PART VI, SECTION B, LINE 12C:
EVERY NEW BOARD MEMBER MUST SIGN THE CONFLICT OF INTEREST POLICY, THEY
EVALUATE ANY CONFLICT THAT MAY ARISE, BUT THEY ARE NOT COMMON.
FORM 990, PART VI, SECTION C, LINE 19:
THE ORGANIZATION WILL MAKE THEIR FOUNDING DOCUMENTS AVAILABLE UPON WRITTEN
REQUEST.
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Schedule O (Form 990) 2022