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# Form 990

(HTA)

# **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

2008

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public

		ue Service		toward					i to satisi				24/0006		pection	
			Please	ar, or tax yea				6/1/2008		, and e	nding		31/2009			
	heck if a		use IRS	C Name of o	<del></del>		ouise	Curtis Bol	( Founda	ition		D Employe		cation num	ber	
=	\ddress	•	label or print or	Doing Bus		Same						23-600061				
=	lame ch	-	type.	1	nd street (or P	O box if mail	is not d	lelivered to s	reet addres	ss) Ro	oom/suite	E Telephon	e numbe	7		
=	nitial retu		See Specific	1726 Locus								215-717-3	134			
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=	mended		tions.	Philadelphi	ia			PA		19103		G Gross red	ceipts \$		<u>3,66</u>	<u> 38,752</u>
	Application	on pending	F N	ame and add	fress of princ	apal officer:					H(a) Is	this a group ref	turn for af	filiates?	Yes	X No
			James F	R. Ledwith,	President o	f the Boar	d of D	irectors 1	9B Morto	n Road,	H(b) A	re all affiliates ir	ncluded?		∏Yes	No
I T	ax-exe	mpt status			3 ) <b>∢</b> (inser			7(a)(1) or	527		7	If "No," attach	a list (se	e instruction	ns)	_
		: ► N/A		.(0) (		· ··• /		(4)(1) 01	<u> </u>	·	┧୷ <sub>╸</sub> 、				•	
					7					T		roup exemption				
		ganization		rporation	Trust	Association	لبيا	Other <b>&gt;</b>		L Yea	r of form	ation 1932	2   M S	tate of lega	domicile	<u>PA</u>
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Activities & Governance		professi	onal leve	<u> </u>												
rua				<u></u>												
ove	2											e than 25%	of its a	ssets.		
<u>ග</u> නේ	3			g members									3			9
es	4	Number	of indep	endent voti	ng member	rs of the go	overni	ng body (f	Part VI, li	ne 1b) .			4			9
Ž	5	Total nu	mber of	employees	(Part V, line	e 2a) .   .							5			0
Act	6			volunteers (									6			0
ı	7a			lated busine						)			7a			0
,	b	Net unre	elated bu	ısiness taxa	ble income	from Forn	n 990-	T, line 34			<u>,</u>		7b			0
•											ļ	Prior Year		Cur	rrent Year	
	8			id grants (Pa		-						<del> </del>	0			0
ي ال	9	-		revenue (P		•							0			0
Revenue	10			me (Part VII	-	-		-					29,992			)4,67 <u>2</u>
<u> </u>	11	Other re	venue (F	Part VIII, col	lumn (A), lir	nes 5, 6d,	8c, 9c	, 10c, and	11e) .			-14,31	1,288		-21,02	21,765
2 2	12			dd lines 8 th						ne 12)	<u> </u>		31,296		-26,32	26,437
7	13			ar amounts	•			-				4,81	17,500		4,97	<u>73,475</u>
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Expenses	16a			draisıng fee									이			0
×	b			expenses (						0						
ш	17		•	(Part IX, col				•					73,347			<u>34,204</u>
	18	Total exp	penses /	Add lines 13	3–17 (must	equal Par	t IX, c	olumn (A)	, line 25)	١		5,49	0,847		5,60	7,679
	19	Revenue	e less ex	penses Su	btract line 1	18 from line	<u>e 12 .</u>	· · · ·				-10,07	2,143	-	-31,93	<u>14,116</u>
Net Assets or Fund Balances											В	eginning of Ye	-	En	d of Year	
sets	20		•	rt X, line 16)	<u> </u>							100,00				<u>55,753</u>
A P	21			Part X, line 2									4,428			9,754
		Net asse	ets or fun	nd balances	. Subtract l	ine 21 fron	n line .	<u> 20</u>			ļ	99,38	30,115		67,44	<u> 15,999</u>
Pa	rt II	Sig	nature l	Block		$\mathcal{A}$	1	<b>\</b>								
		Unde	r penalties	of perjury, I dec	clare that I have	e examined	ns røtur	n, including a	ccompany	ng schedul	es and s	tatements, and on of which prep	to the bes	st of my kno	wledge	
		and 0	eller, it is tr	ue, correct, and	VI III	ciaraciónico p	LEPHIEL	tomer man c	inicer) is oa	ised on all i	niormauc	on or which prep	barer nas	any knowied	.ige	
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Sig	n	_ <b> </b> ▶ ·	Signature of	of officers		<del>XVI 1</del> 2	-	<del>\ \ -</del>				Date		3/23/201	<u> </u>	<del></del>
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P8	Statement of Program Service Accomplishments (see instructions)	·
1	Briefly describe the organization's mission:	
	Support of Music School - Curtis Institute of Music, tuition free school of music that strives to educate and train ex	ceptionally
	gifted municipal for performing envisors on the highest professional level offerdames accounts and 405 students	
2	Did the organization undertake any significant program services during the year which were not listed on	<del>-</del>
_	the prior Form 990 or 990-EZ?	Yes X No
		Yes X No
_	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
	services?	Yes X No
	If "Yes," describe these changes on Schedule O.	
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expe	
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of g	rants and
	allocations to others, the total expenses, and revenue, if any, for each program service reported.	
4a	(Code: ) (Expenses \$ 4,973,475 including grants of \$ 4,973,475 ) (Revenue \$	0)
	Curtis Institute of Music	
	1726 Locust Street	
	DE31-J-1-E3- DA 40400	
	Provided financial support for tuition free school of music.	
	•	
	•••••	
		<u>.</u>
4b	(Code (Code ) (Expenses \$ 0 including grants of \$ 0 ) (Revenue \$	0)
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4¢	(Code: ) (Expenses \$ 0 including grants of \$ 0 ) (Revenue \$	0)
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	Other program services. (Describe in Schedule O.)	
74	· · ·	
4e		
TG	Total program service expenses ► \$ 4,973,475 (Must equal Part IX, Line 25, column (B).)	

### 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," 1 Х 2 Is the organization required to complete Schedule B, Schedule of Contributors? 2 Х Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, 4 Х 5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice 5 Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete 6 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 Х Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 Did the organization report an amount in Part X, line 21, 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," Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 10 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, 11 12 Did the organization receive an audited financial statement for the year for which it is completing this return Х that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII . . . . . . 12 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E......... 13 14a Did the organization maintain an office, employees, or agents outside of the U.S?......... 14a b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, 14b 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization 15 Х Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance Х 17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I 17 Χ 18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 18 19 Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III . . . . . 19 20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H....... 20 21 21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II . . . . . 22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III . . . . . 22 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete 23 Х 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . . . . 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year 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) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a Х b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified 25b Х Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II . . . 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III . . .

### Part IV Checklist of Required Schedules (continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or			
	employee), or an indirect business relationship through ownership of more than 35% in another entity			
	(individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,			
	Part IV	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		Х
C	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a			
	professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M .	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,  Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?  If "Yes," complete Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	х	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete	•		
	Schedule R, Part V, line 2	35		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	"		
٠.	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
	VI	37		Х

Form **990** (2008)

Form 9	990 (2008) Mary Louise Curtis Bok Foundation 23-6	000615	-	age 5
Pai				-0-
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
b	U.S. Information Returns. Enter -0- if not applicable	ł		
C	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1		
·	gaming (gambling) winnings to prize winners?	1c	X	<b> </b>
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	<del>- ''</del>	<u>  ^</u>	<u> </u>
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 0		İ	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see			
	instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			
	this return?	3a		<u> </u>
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4.		U
b	account)?	4a	ļ	X
U	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			
	and Financial Accounts.			
5a	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?	5b		Х
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity			
	Regarding Prohibited Tax Shelter Transaction?	5c		
6a	Did the organization solicit any contributions that were not tax deductible?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
_	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7-		
b	\$757.  If "Yes," did the organization notify the donor of the value of the goods or services provided?	7a 7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	70		
•	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	. 7f		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
8	required?	7h		
0	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		X
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.	<u> </u>		
a	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12		- 1	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		l	
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders	1		
b	Gross income from other sources (Do not net amounts due or paid to other sources			
120	against amounts due or received from them.)	40-		
12a b	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b	12a	$\dashv$	- 1
	1 1-65, error the amount of tax-exempt interest received of accrued during the year   120			

Mary Louise Curtis Bok Foundation 23-6000615

Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.) Part VI

Sect	tion A. Governing Body and Management			_
			Yes	No
	For each "Yes" response to lines 2–7b below, and for a "No" response to lines 8 or 9b below, describe the			
	circumstances, processes, or changes in Schedule O. See instructions		-	
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Х
6	Does the organization have members or stockholders?	6		Х
7a	Does the organization have members, stockholders, or other persons who may elect one or more members		_	
	of the governing body?	7a		Х
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	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	
ь	Each committee with authority to act on behalf of the governing body?	8b	Х	
9a	Does the organization have local chapters, branches, or affiliates?	9a		Х
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations			
	must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	х	
11	Is there any officer, director or 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 in Schedule O	11		Х
Sect	ion B. Policies		•	
			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	х	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
_	describe in Schedule O how this is done	12c	x	
13	Does the organization have a written whistleblower policy?	13	х	
14	Does the organization have a written document retention and destruction policy?	14	X	
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		1	
а	The organization's CEO, Executive Director, or top management official?	15a		
b	Other officers or key employees of the organization?	15b	$\dashv$	
IJ	Describe the process in Schedule O (see instructions).	100		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
IVa	with a taxable entity during the year?	16a		
ь	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	100		<del></del>
b	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard		1	į
	the organization's exempt status with respect to such arrangements?	16b		
Sact	ion C. Disclosure	100		
<u>360.</u> 17	List the states with which a copy of this Form 990 is required to be filed ► PA			
17 18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s o			
10		'''y <i>)</i>		
	available for public inspection. Indicate how you make these available. Check all that apply.			
40	Own website X Another's website X Upon request	-4		
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interesting and financial statements available to the public	SI		
	policy, and financial statements available to the public	_		
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	Organization: No.   Jacob States 215-717-212	4		. <b></b>
	organization:   Joseph Slater  1726 Locust Street, Philadelphia, PA 19103			

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

Section A. \_\_Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order. individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

X Check this box if the organization did not compensate any officer, director, trustee, or key employee.

(A)	(B)			(	C)			(D)	(E)	(F)
Name and Title	Average		_			that ap		Reportable	Reportable	Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
James R Ledwith President/Director	1	X		x				0	0	0
Cary W. Bok Vice President/Director	1	x		x				0	0	0
Bayard Fiechter Treasurer/Director	1	X	L	x	ļ Ļ			0	0	0
Joseph M Field Secretary/Director	1	X		x				0	0	0
Milton L. Rock Director	1	X						0	0	0
Samuel R. Shipley Director	1	x	_					0	0	0
Jerry G. Rubenstein Director	1	х						0	0	0
Gary Graffman Director	1	. x						0	0	0
Shaun F O'Malley Director	1	X						0	0	0
	0				İ			0	0	0
	0							0	0	0
	0							0	0	0
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	0							0	0	0
	0							0	o	0
	0							0	0	0

Pa	rt VII Section A. Officers, Directors, Tru	ustees, Key Em	ploy	ees	, and	Hig	hes	t Co	mpensated Emp	ployees (contin	ued)	, 480 6	
	(A)	(B)			(	C)			(D)	(E)		(F)	
	Name and title	Average	Po	sition	(chec	k all ti	hat ap		Reportable	Reportable		mated	
		hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	comp fro orga and	ount of other ensation in the nization related nizations	
		0							0	C		0	
		0.							0	C		0	
		O.							0			0	
		0.							0	0		0	
		0.							0	0		0	
		0.							0	0		0	
		0.							0	0		0	
		0							0			0	
		0.							0			0	
		0							0	0		0	
		0.					_		0	0		0	
		0.	0.	0.						0			0
1b	Total	0.						Ļ	0	0		0	
2	Total number of individuals (including those	in 1a) who rece	ived	mor	e tha	n \$1	100.0	 100 ii	reportable com		the		
_	organization ► 0	,			·	🛡 .			· roponable com	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
3	Did the organization list any former officer, employee on line 1a? If "Yes," complete Sci					yee,		-	st compensated		Ye	s No X	
4	For any individual listed on line 1a, is the su the organization and related organizations g	m of reportable	com	pens	satio		d oth	er co	ompensation from	m uch			
5	Did any person listed on line 1a receive or a										4	X	
-	services rendered to the organization? If "Yoution B. Independent Contractors	es," complete S	cnea	uie J	i tor .	sucn	per	son	· · · · · · ·	<u> ] :</u>	5	X	
1	Complete this table for your five highest concompensation from the organization.	npensated inde	pend	ent c	contra	acto	rs tha	at re	ceived more than	n \$100,000 of			
	(A) Name and business a	ddress							(B) Description of servi	ices	(C) Compens	ation	
	ING Clarion Real Estate : 259 North	Radnor - Ches	ter F	Road	Rad	nor	PA 1	Inve	stment Manager	ment Ser		272,907	
		<del> </del>							<u>-</u>			0	
							-	<u> </u>				0	
	······································							<u> </u>		<del></del>		<u>0</u> 0	
2	Total number of independent contractors (in compensation from the organization	cluding those in	1) w	/ho r	ecei	/ed r	тоге	thar	\$100,000 in				

Form **990** (2008)

Par	t VIII	Statement of Revenue						
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
grants	1a	Federated campaigns	1a	Ō				
ributions, gifts, grants other similar amounts	Ь	Membership dues	1b	0			ĺ	
S, S	С	Fundraising events		0				
a gir	d	Related organizations		0				
E, S	е	Government grants (contributions)		0			ļ	
r si	f	All other contributions, gifts, grants						
the get		similar amounts not included above		0				
d E	g	Noncash contributions included in	i 1- 16 C	0			1	
Contributions, gifts, and other similar am	h	Total. Add lines 1a-1f			0			
				Business Code		· · · · · · · · · · · · · · · · · · ·		
Program Service Revenue	2a				0			
ě	ь				0			-
8	c				0		i	
Š	d				0	<del></del>	†	
S E	ءَ ا				0			
gra	،	All other program service revenue			0		<del>                                     </del>	
o O	a	Total. Add lines 2a-2f		<b>•</b>	0		l	
	_~				<del></del>		<u></u>	
	3	Investment income (including divide			4 705 004		Ì	4 705 004
	١.	other similar amounts)			1,765,984		<del> </del>	1,765,984
	4	Income from investment of tax-exe	•		0	<del></del>	<u>-</u>	
	5	Royalties		1	0		<u> </u>	
į	_		(i) Real	(II) Personal				
	6a	Gross Rents					į	
	b	Less. rental expenses						
	C	Rental income or (loss)		<del></del>			ļ	
	d	Net rental income or (loss)		<u>, , , , , , , , , , , , , , , , , , , </u>	0			<del></del>
	7a		(i) Securities	(II) Other				
		assets other than inventory	22,924,533	3 0				
	b	Less: cost or other basis	}					
		and sales expenses	29,995,189					
	С	Gain or (loss)	-7,070,656	3 0		·		
	d	Net gain or (loss)		<u> </u>	-7,070,656			-7,070,656
ø.	8a	Gross income from fundraising						
Other Revenue		events (not including \$	0	į	]			i
Ķ		of contributions reported on line 1c	).					
æ		See Part IV, line 18	a	0				
ē	b	Less direct expenses	<b>b</b>	\o				
ᅙ	С	Net income or (loss) from fundraising	ng events	<u> </u>	0			
	9a	Gross income from gaming activitie	s.					
		See Part IV, line 19	<b>a</b>	l o				
	ь	Less: direct expenses						
		Net income or (loss) from gaming a			0			
	ľ	Gross sales of inventory, less						
		returns and allowances	a	l 0				
	b	Less: cost of goods sold						
	r	Net income or (loss) from sales of i			0		·	
		Miscellaneous Revenue		Business Code	<u>"</u>			-
	11a	Unrealized gains (losses)			-21,021,765			-21,021,765
	b	omedized game flooded			0			.,==,,,.30
	c				0			
	d	All other revenue			0			
	_	Total. Add lines 11a–11d			-21,021,765			
	12	Total Revenue. Add lines 1h, 2g, 3						
	-	9c, 10c, and 11e			-26,326,437	0	o	-26,326,437
	1					U	. 0	,,

solicitation . . . . . . . . . .

Form **990** (2008)

Da	AIV Chatamant of Functional Functions				1 200 10
Pal	t IX Statement of Functional Expenses				<del></del> .
	Section 501(c)(3) and 501(c) All other organizations must complete column				nd (D).
	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 governments and		expenses	general expenses	expenses
•	organizations in the U.S. See Part IV, line 21	4,973,475	4,973,475		
2	Grants and other assistance to individuals in	4,913,413	4,913,413		···········
_	the U.S. See Part IV, line 22	o			
3	Grants and other assistance to governments,				
•	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16	o			
4	Benefits paid to or for members	0			<del></del>
5	Compensation of current officers, directors,	- 0			
	trustees, and key employees	o			
6	Compensation not included above, to disqualified				
•	persons (as defined under section 4958(f)(1)) and		İ		
	persons described in section 4958(c)(3)(B)	o			
7	Other salaries and wages	0			
8	Pension plan contributions (include section 401(k)			<del></del>	
•	and section 403(b) employer contributions)	o			
9	Other employee benefits	0			
10	Payroll taxes	0			
11	Fees for services (non-employees):				<del></del> _
а	Management	42,000		42,000	
b	Legal	0			
С	Accounting	16,842		16,842	
d	Lobbying	0			
е	Professional fundraising services. See Part IV, line 17	0			
f	Investment management fees	575,362		575,362	
g	Other	0			
12	Advertising and promotion	0			
13	Office expenses	0			
14	Information technology	0			
15	Royalties	0			
16	Occupancy	0			
17	Travel	0			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	0			
20	Interest	0			
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization	0	0	0	0
23	Insurance	0			<del></del>
24	Other expenses. Itemize expenses not				
	covered above. (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below.)				
а		0			
b		0			
C		0			
d		0			
е		0			
f	All other expenses	0			
25	Total functional expenses. Add lines 1 through 24f	5,607,679	4,973,475	634,204	0
26	Joint Costs. Check here ▶ if following	ļ		1	
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined	1		İ	
	educational campaign and fundraising			}	

Р	art X	Balance Sheet				00010		age _			
			(A) Beginning of year				B) of year				
	1	Cash-non-interest-bearing	20,562	_ 1				32,629			
	2	Savings and temporary cash investments		_2							
	3	Pledges and grants receivable, net	0	3							
	4	Accounts receivable, net	132,050	4			12	23,594			
	5	Receivables from current and former officers, directors, trustees, key									
	ļ	employees, or other related parties. Complete Part II of Schedule L	0	5				<u></u>			
	6	Receivables from other disqualified persons (as defined under section									
		4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete									
		Part II of Schedule L	0	6				0			
ets S	7	Notes and loans receivable, net	0	7	_			<u>C</u>			
Assets	8	Inventories for sale or use		8							
⋖	9	Prepaid expenses and deferred charges		9							
	10a	Land, buildings, and equipment: cost basis 10a 0									
	b										
		Part VI of Schedule D	0					0			
	11	Investments-publicly traded securities	<u>99,851,931</u>				<u>69,30</u>	<u> </u>			
	12	Investments-other securities See Part IV, line 11	0								
	13	Investments-program-related. See Part IV, line 11	0					0			
	14	Intangible assets		14							
	15	Other assets. See Part IV, line 11	0								
	16	Total assets. Add lines 1 through 15 (must equal line 34)	100,004,543					<u>55,753</u>			
	17	Accounts payable and accrued expenses	63,230					51,781			
	18	Grants payable	561,198				1,96	37,97 <u>3</u>			
	19										
Liabilities	20	Tax-exempt bond liabilities	0					<u> </u>			
	21	Escrow account liability. Complete Part IV of Schedule D		21							
Ħ	22	Payables to current and former officers, directors, trustees, key									
ia D		employees, highest compensated employees, and disqualified									
_		persons. Complete Part II of Schedule L	0	22	,			0			
	23	Secured mortgages and notes payable to unrelated third parties	0	23				0			
	24	Unsecured notes and loans payable	0	24				0			
	25	Other liabilities. Complete Part X of Schedule D	0	25				0			
	26	Total liabilities. Add lines 17 through 25	624,428	26			2,01	19,754			
ses		Organizations that follow SFAS 117, check here ► X and complete lines 27 through 29, and lines 33 and 34.									
an	27	Unrestricted net assets	99,380,115	27			67,44	15,999			
Baj	28	Temporarily restricted net assets		28							
g	29	Permanently restricted net assets		29							
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.									
ŠŠ	30	Capital stock or trust principal, or current funds		30							
88	31	Paid-in or capital surplus, or land, building, or equipment fund		31							
Ä	32	Retained earnings, endowment, accumulated income, or other funds .		32							
Ž	33	Total net assets or fund balances	99,380,115	33			67.44	15,999			
	34	Total liabilities and net assets/fund balances	100,004,543	-				55,753			
Pa	rt XI	Financial Statements and Reporting	100,001,010				00,				
	10 //1	Thansar catomorto and Reporting					Yes	No			
1	Ac	counting method used to prepare the Form 990 . Cash X Accrua	al Other		Γ						
2		ere the organization's financial statements compiled or reviewed by an indep			. 1	2a	X	l			
		ere the organization's financial statements audited by an independent accou				2b	Х				
		"Yes" to lines 2a or 2b, does the organization have a committee that assume			-						
		idit, review, or compilation of its financial statements and selection of an inde		_		2c	х				
3		s a result of a federal award, was the organization required to undergo an aud	-		Ì						
		e Single Audit Act and OMB Circular A-133?			. 1	3a		x			
1		'Yes," did the organization undergo the required audit or audits?				3b					

### · SCHEDULE A (Form 990 or 990-EZ)

# **Public Charity Status and Public Support**

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

2008
Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-F7 ► See separate instructions

HITCHIS	11 1/040	enne Service		acii to i ciiii 330 ci i ci	000 CE.	00	c scparat	e ilişti üçti				ecuo	
		organization							1	r identifica	tion numb	er	
		ise Curtis Bol		harity Ctatus / All as				- Abi	23-6000				
Par	_			harity Status (All or lation because it is: (P					rt.) (see	Instruction	ons)		
1	آ ا			rches, or association					(b)(1)(A)(	i).			
2	Ħ			on 170(b)(1)(A)(ii). (A			/cu	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	( <b>-</b> )( -)(~)(	.,.			
3	H			hospital service organ		-	cootion	470/b\/4\	/A\/;;;\_/	NHoob Sc	hadula l		
4	H											-	
•		hospital's na	ime, city, and st					• • • • • • • • • • • • • • • • • • • •	• • • • • • • •				• • • • • • • • • • • • • • • • • • • •
5				r the benefit of a colle (Complete Part II.)	ge or univ	ersity ow	ned or op	erated by	a govern	mental u	nıt descr	ıbed	
6		A federal, st	ate, or local gov	ernment or governme	ntal unit d	described	in sectio	n 170(b)(	1)(A)(v).				
7				ly receives a substant (1)(A)(vi). (Complete		its suppo	rt from a	governme	ental unit	or from th	ne gener	al pub	lic
8		A community	y trust describe	d in section 170(b)(1)	(A)(vi). (C	Complete	Part II.)						
9		An organization receipts from support from	tion that normal n activities relat n gross investmo	ly receives: (1) more the document to the document to the document income and unrelated an after June 30, 1975	han 33 1/3 ons—subj ted busin	3% of its : ject to cei ess taxab	support fr tain exce le income	ptions, an e (less sec	nd (2) no i ction 511	nore that	n 33 1/3°	% of its	
10	$\Box$			and operated exclusive				-	-	4) (see i	nstructio	ns)	
11	岗			and operated exclusive									
e		purposes of 509(a)(3). C a Type By checking	one or more putheck the box the b this box, I certification.	blicly supported organiat describes the type of Type II cfy that the organization managers and other	izations dof supportion Type Tis not co	lescribed ing organ E III–Fund Introlled d	in sectior ization ar ctionally in irectly or	n 509(a)(1 nd comple ntegrated indirectly	) or section te lines 1	on 509(a)  1e throug  d X  more dis	)(2). See gh 11h. Type III- squalified	section -Other	г
		509(a)(1) or	section 509(a)(	2).									
f g		organization Since Augus	, check this box st 17, 2006, has	a written determination the organization acce						e III supp	oorting 		
		following per									1		
			•	or indirectly controls,		_		•			<u> </u>	Yes	No
		-		verning body of the su person described in (i		-					11g(i) 11g(ii)		X
				ty of a person describe							11g(iii)		$\frac{\hat{x}}{x}$
h				ation about the organi							<u> </u>		
(i)		of supported anization	(ii) EIN	(III) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the c	organization sted in your document?	(v) Did y the organ col.(i) sup	you notify nization in of your port?	organiza (i) organi	s the tion in col zed in the S ?		Amount support	l of
					Yes	No	Yes	No	Yes	No	Ļ		
<u>Curti:</u>	s Inst	titute of Music	23-1585611	7	x		X		х		<u> </u>	4,97	73,475
											1		0
									_				

Total

0

0

4,973,475

18

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support (a) 2004 Calendar year (or fiscal year beginning in) ▶ (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . . . . . . . O 0 3 The value of services or facilities furnished by a governmental unit to the organization without charge . . . . . . 0 0 0 0 0 0 0 0 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) . 0 Public support. Subtract line 5 from line 4. Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (b) 2005 (c) 2006 (e) 2008 (a) 2004 (d) 2007 (f) Total Amounts from line 4 . . . . . . . 0 0 ol 7 0 0 0 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar 0 Net income from unrelated business activities, whether or not the business is regularly carried on . . . . . . . 0 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) . . . . . . 0 11 Total support. Add lines 7 through 10. 0 12 Gross receipts from related activities, etc. (see instructions.) . . . . . . . . . . . . . . . . . . First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 Section C. Computation of Public Support Percentage 0.00% 14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) . . . . . . . Public support percentage from 2007 Schedule A, Part IV-A, line 26f . . . . . . . . . . . . . . . . 15 33 1/3% support test-2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box 16a 33 1/3% support test-2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this 10%-facts-and-circumstances-test-2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. . 🏲 10%-facts-and-circumstances test-2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . .

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2004 (d) 2007 (b) 2005 (c) 2006 (e) 2008 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . . 0 0 0 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 0 0 Gross receipts from activities that are not an unrelated trade or husiness under section 513 0 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . . . . . . . n 0 n 0 The value of services or facilities furnished by a governmental unit to the organization without charge . . . . . . 0 0 n Total. Add lines 1-5 . . . . . . 0 0 0 O 0 0 7a Amounts included on lines 1, 2, and 3 received from disqualified persons. 0 b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 . . . . . . . . . . . . 0 Add lines 7a and 7b . . . . . . . . . . 0 0 0 0 Public support (Subtract line 7c from 0 line 6.) Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total Amounts from line 6 . . . . . . 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . . . . 0 c Add lines 10a and 10b . . . . . . 0 0 O 0 Net income from unrelated business activities not included in line 10b. whether or not the business is regularly carried on . . 0 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) . . . . . . 13 Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage 0.00% Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)) . . . 15 Public support percentage from 2007 Schedule A, Part IV-A, line 27g. . . . 16 0 00% Section D. Computation of Investment Income Percentage 17 0.00% 17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)) . . . . 18 0 00% 18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h. 19a 33 1/3% support tests-2008. 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 33 1/3% support tests-2007. 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 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions. 20

	990 or 990-EZ) 2008 Mary Louise Curtis Bok Foundation	23-6000615	Page 4
Part IV	Supplemental Information. Complete this part to provide the explanation require	ed by Part II, line 10	:
	Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information	n. (see instructions)	•
<del></del> _		(4444	
	•••••••••••••••••••••••••••••••••••••••		
	•••••••••••••••••••••••••••••••••••••••		
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			• • • • • • • •
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		,	
		· · · · · · · · · · · · · · · · · · ·	

### SCHEDULE D (Form 990)

# **Supplemental Financial Statements**

20**08** 

Department of the Treasury
Internal Revenue Service

Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection

Mame	or the organization		Employer	identification number
	Louise Curtis Bok Foundation		23-60006	
Par	Organizations Maintaining Done	or Advised Funds or Other Similar F	unds or Ac	counts. Complete if
	the organization answered "Yes" t	o Form 990, Part IV, line 6.		
		(a) Donor advised funds	(b) Fu	inds and other accounts
1	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and d	onor advisors in writing that the assets he	ld in donor ad	vised
	funds are the organization's property, subje-	ct to the organization's exclusive legal con-	trol?	Yes No
6	Did the organization inform all grantees, do	nors, and donor advisors in writing that gra	int funds may	be
	used only for charitable purposes and not for	or the benefit of the donor or donor advisor	or other	
	impermissible private benefit?	<u></u>		U Yes U No
Par	Conservation Easements. Comp	plete if the organization answered "Yes		0, Part IV, line 7.
	Purpose(s) of conservation easements held	by the organization (check all that apply)		
•	Preservation of land for public use (e.g.		of an histori	cally important land area
	<b>=</b>	· · · · =		* *
	Protection of natural habitat	Preservation	n ot certitied n	nistoric structure
	Preservation of open space			
2	Complete lines 2a-2d if the organization he	ld a qualified conservation contribution in t	he form of a d	conservation easement
	on the last day of the tax year.		F	
				Held at the End of the Year
а	Total number of conservation easements .			<del></del>
b	Total acreage restricted by conservation ear			
C	Number of conservation easements on a ce	• •		
d	Number of conservation easements include		• • • • • • • • • • • • • • • • • • • •	<del></del>
3	Number of conservation easements modifie	d, transferred, released, extinguished, or to	erminated by	the organization
	during the taxable year			
4	Number of states where property subject to	••		
5	Does the organization have a written policy	- · · · · · · · · · · · · · · · · · · ·		
	enforcement of the conservation easements			
6	Staff or volunteer hours devoted to monitoria			
7	Amount of expenses incurred in monitoring,		•	▶ \$
8	Does each conservation easement reported			Г v
_	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIV, describe how the organization re			
	balance sheet, and include, if applicable, the		inanciai state	ments that describes
Par	the organization's accounting for conservation	ons of Art, Historical Treasures, or Othe	- Cimilar Ass	nata
rall	Complete if the organization answere		i Sililiai Ass	ets.
			<del></del>	
1a	If the organization elected, as permitted und			
	art, historical treasures, or other similar asso			
_	service, provide, in Part XIV, the text of the			
b	If the organization elected, as permitted und			
	historical treasures, or other similar assets he service, provide the following amounts relati		earch in luithe	erance or public
	•	<del>-</del>		
	(i) Revenues included in Form 990, Part VII	I, line 1		<b>\$</b>
	(ii) Assets included in Form 990, Part X			<b>▶</b> \$
2	If the organization received or held works of		ssets for finan	cial gain, provide the
	following amounts required to be reported u			
а	Revenues included in Form 990, Part VIII, li	ne 1		<b>\$</b>
b	Assets included in Form 990, Part X			▶ \$

4	Describe in Part XIV the intended uses of	r the organization's er	<u>laowment tunas.</u>		
Part	VI Investments—Land, Building	s, and Equipment.	See Form 990, Pa	rt X, line 10.	
	Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a	Land	0	0		0
b	Buildings	0	o	0	0
C	Leasehold improvements	0	0	0	0
đ	Equipment	0	0	0	0
е	Other	0	0	0	0
	I. Add lines 1a-1e. (Column (d) should equ	ual Form 990, Part X,	column (B), line 10(d	:).) ▶	0

uncertain tax positions under FIN 48.

Schedule D (Form 990) 2008	0.5	<del> </del>	Page 3
Part VII Investments—Other Securities	s. See Form 990, Part X,	line 12.	<del></del>
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valu Cost or end-of-year ma	
Financial derivatives and other financial products	0		
Closely-held equity interests	0		
Other	0	, <u> </u>	
	0		
	0	/ <u></u>	
	0	<del></del>	
	0		
	0	<del> </del>	
	0	<del> </del>	<del></del>
	0	<del></del>	
	0	<del></del>	
Total. (Column (b) should equal Form 990, Part X, col. (B) line 12.)	0		
Part VIII Investments—Program Relate		<u> </u>	
		(c) Method of valu	
(a) Description of investment type	(b) Book value	Cost or end-of-year ma	
	0	<del> </del>	
	0	<del></del>	
<del></del>	0		
	0	<del> </del>	
	0	<del>                                       </del>	
	0		
	0		
	0		
	0		
	0	<u>,                                      </u>	<del></del>
Total. (Column (b) should equal Form 990, Part X, col. (B) line 13)	0	4	
Part IX Other Assets. See Form 990, P			,
(;	a) Description		(b) Book value
			0
<del></del>			0
			0
			0
			0
	<del></del>	<del></del>	0
<del></del>	<del></del>		0
	<del></del>		0
			0
Total. (Column (b) should equal Form 990, Part X	col. (B) line 15.)		0
Part X Other Liabilities. See Form 990			
(a) Description of liability	(b) Amount		
Federal income taxes		0	
		<u>o</u>	
		<u> </u>	
		<u> </u>	
		<u> </u>	
		_0	
		_0	
<del></del>	<del></del>	_0	
		_0	
		0	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)		0	
In Part XIV, provide the text of the footnote to the	proprietion's financial state		tion's liability for
mir ait Aiv, provide the text of the foothole to the t	nganizanon s inidhcidi Statt	amento that reports the organiza	non a navinty ivi

Sched	ule D (Form 990) 2008			Page <b>4</b>
Par	Reconciliation of Change in Net Assets from Form 990	to Financial Stateme	ents	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1_	-26,326,437
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	5,607,679
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3_	-31,934,116
4	Net unrealized gains (losses) on investments		4	
5	Donated services and use of facilities		5	
6	Investment expenses		6	
7	Prior period adjustments		7	
8	Other (Describe in Part XIV)		8	
9	Total adjustments (net). Add lines 4–8		9	0
10	Excess or (deficit) for the year per financial statements. Combine lines 3 a		10	-31,934,116
Par	t XII Reconciliation of Revenue per Audited Financial Statem		per	
1	Total revenue, gains, and other support per audited financial statements.			1 -26,326,437
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains on investments	2a	- 1	
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c	_	
d	Other (Describe in Part XIV)	2d	$\neg$	
e	Add lines 2a through 2d	<del></del>		Ze 0
3	Subtract line 2e from line 1			3 -26,326,437
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1		20,020,107
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV)	4b	$\dashv$	
C	Add lines 4a and 4b.	<u> </u>	-	1c 0
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, lin		- ⊢	5 -26,326,437
	t XIII Reconciliation of Expenses per Audited Financial State			
1		ments with Expense		1 5,607,679
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		$\vdash$	3,007,079
_	Donated services and use of facilities	20		
a		2a   2b	{	
b	Prior year adjustments			
C	Losses reported on Form 990, Part IX, line 25	2c		
d	Other (Describe in Part XIV)	2d	<del>- </del> -	
e	Add lines 2a through 2d			2e 0
3	Subtract line 2e from line 1		- }-	5,607,679
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		ı	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	_	
b	Other (Describe in Part XIV)	4b		
С	Add lines 4a and 4b			<u>lc</u> 0
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, I	ine 18.)		<b>5</b> 5,607,679
Par	t XIV Supplemental Information			
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 2b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and Part >		4; Pa	art IV, lines 1b
<b></b>			- <del>-</del>	

	Mary Louise Curtis Bok Foundation		23-6000615
Schedule D (Form	990) 2008		Page 5
Part XIV	Supplemental Information (con	itinued)	
		*	•••
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# SCHEDULE O (Form 990)

### **Supplemental Information to Form 990**

Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information. OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer Identification number

Mary Louise Curtis Bok Foundation	23-6000615
Form 990 Part VI Section A Line 10 The Form 990 was discussed by	the Board of Directors of the Foundation
at their quarterly meeting.	
Form 990 Part VI Section B Line 12 (c) Conflict of interest statements	are submitted by the members of the
Foundation's Board of Directors annually.	
Form 990 Part VI Section C Line 19 Governing documents, conflict of	interest policy and financial statements
of the Foundation are available to the public upon reguest.	

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ▲

Name of the organization

Mary Louise Curtis Bok Foundation

Partl

Related Organizations and Unrelated Partnerships

See separate instructions.

Open to Public 2008 Inspection Employer identification number

23-6000615

OMB No 1545-0047

(F) Direct controlling (F) Direct controlling X (E)
Public chanty status
(if section 501(c)(3)) (E) End-of-year assets Public (D) Exempt Code section Total income 9 501c(3) Legal domicile (state or foreign country) Legal domicile (state or foreign country) Ā Primary activity Primary activity <u>@</u> <u>@</u> Music School Identification of Related Tax-Exempt Organizations (A)Name, address, and EIN of related organization (A)Name, address, and EIN of disregarded entity Identification of Disregarded Entities 1726 Locust Street, Philadelphia, PA 19103 Curtis Institute of Music 23-1585611 Part II

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

Schedule R (Form 990) 2008

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Schedule R (Form 990) 2008 Mary Louise Curtis Bok Foundation

Part III

	(J) General or managing partner?	Yes No								!	(H) Percentage ownership	%	%	%	%	%	%	%
	0 E -	۲					ļ	<u> </u>			م ق							
	(I) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)		0	0	0	0	0	0	0		(G) Share of end-of-year assets	0	0	0	0	0	0	0
	(H) Disproportionate allocations?	S No									(F) Share of total income	0	0	0	0	0	0	0
	Ousp	Yes							_		(F) Total							
	(G) Share of end-of-year assets		0	0	0	0	0	0	0	!								
			0	0	0	0	0	0	0	i	(E) Type of entity (C corp. S corp. or trust)							
	come											 						
	(F) Share of total income									rust	(D) Direct controlling entity							
as a Partnership	(E) Predominant income (related, investment, unrelated)									le as a Corporation or Trust	(C) Legal domicale (state or foreign country)		_					
ь Ра	=	ł								သင	ξ	}	i				1	
<u>o</u>	(D) Direct controlling entity										(B) Primary activity							
Suc			_					<u> </u>		suc								
janizatio	(C) Legal domicile (state or foreign	_								yanizatio	uon							
Identification of Related Organizations Taxab	(B) Primary activity									Identification of Related Organizations Taxab	(A) Name, address, and EIN of related organization							
	(A) Name, address, and EIN of related organization									Part IV Identification	Name, address, and E							
Part III	_									Par								

Schedule R (Form 990) 2008

# Transactions With Related Organizations Part V

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following transactions with one or more related organizations listed in Parts II–IV?																									Antionships and transaction	and transacti	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	alationships and transaction type (a-r)	Plationships and transaction (B) Transaction type (a-r)	1	alationships and transaction (B) Transaction type (a-1)	alationships and transaction type (a-r)	alationships and transaction type (a-r)	Slationships and transaction (B) Transaction (b) Transaction Au type (a-r)	Hationships and transaction (B) Transaction type (a-r)	Transaction (B)  Transaction (A)  Type (a-r)	Authorships and transaction (B) Transaction (B) Transaction (A) type (a-r)	1	1	(B) Transaction type (a-r)
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	a controlled entity.							•		(S)UC	(s)u	າດ(s)	ın(s) ation(s)	Lease of facilities, equipment, or other assets to other organization(s)	on(s)	Lease of facilities, equipment, or other assets to other organization(s).  Lease of facilities, equipment, or other assets from other organization(s).  Performance of services or membership or fundraising solicitations for other organization(s).  Performance of services or membership or fundraising solicitations by other organization(s).  Sharing of facilities, equipment, mailing lists, or other assets.	on(s) ation(s) ns for other orga ns by other orgar	on(s) ation(s) as for other orga as by other orga	on(s) ation(s) as for other organs by other organs	on(s) ation(s) as for other organs by other organs	on(s) ation(s) as for other organs by other organs	on(s) ation(s) as for other organs by other organs	ation(s) s for other organs by other organs.	ation(s) as for other organs by other organs.	ation(s) s by other organs by other organs information on v	ation(s) Is for other organs by other organical information on v	ation(s) Is for other organs by other organinformation on v	ation(s)  s for other organ s by other organ information on v	ation(s)  s for other organ s by other organ information on v	ation(s)  The for other organ  S by other organ  Information on very state of the s	ation(s)  The for other organish by other organinformation on viration(s)	ation(s)  s for other organs by other organinformation on viration on viration on viration (s)	ation(s)  s for other organs by other organinformation on viration on viration on viration (s)	ation(s)  s for other organs by other organinformation on viration(s)	ation(s) s by other organ s by other organ information on v	ation(s)  s for other organ s by other organ information on v	ation(s)  s for other organ s by other organ information on verse organ information on verse organ information on verse organ	ation(s)  Is for other organ  Information on viration(s)	ation(s)  Is for other organs by other organization(s)	ation(s)  s for other organ  information on viration(s)
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valties (iv) rent	Giff grant or capital contribution to other organization(s)	Giff, grant, or capital contribution from other organization(s).	Loans or loan quarantees to or for other organization(s).	ization(s).	•		on(s)			ssets to other o	ssets to other o	ssets to other o	Lease of facilities, equipment, or other assets to other organization(s).  Lease of facilities, equipment, or other assets from other organization(s).	ssets to other o ssets from othe or fundraising s	ssets to other o ssets from othe or fundraising s or fundraising s	ssets to other o ssets from othe or fundraising s or fundraising s sts. or other as	Lease of facilities, equipment, or other assets to other organi:  Lease of facilities, equipment, or other assets from other organi:  Performance of services or membership or fundraising solicit  Sharing of facilities, equipment, mailing lists, or other assets	ssets to other o ssets from othe or fundraising s or fundraising s ists, or other as	ssets to other o ssets from othe or fundraising s or fundraising s ists, or other as	Lease of facilities, equipment, or other assets to other org Lease of facilities, equipment, or other assets from other or Performance of services or membership or fundraising so Performance of services or membership or fundraising so Sharing of facilities, equipment, mailing lists, or other ass Sharing of paid employees.  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During the tax year, did the organization engage in any of the	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from Gift grant or capital contribution to other organization(s)	ft. grant, or cal	ans or loan au	Loans or loan quarantees by other organization(s).	,	Sale of assets to other organization(s).	Purchase of assets from other organization(s).	Exchange of assets	ase of facilities			وفااندن وو ومد	ase of facilitie	ase of facilitie	ase of facilities stformance of seriormance of seri	ase of facilities stformance of strormance of strormance of strormance of strormance of stroility	ase of facilities reformance of seformance of seformance of sering of facility of secility	Lease of facilities, equipment, or other asset Performance of services or membership or fi Performance of services or membership or fi Sharing of facilities, equipment, mailing lists. Sharing of paid employees	ase of facilities of stromance of stromance of stromance of strong of facilities rating of paid (stromance)	ase of facilities of stromance of stromance of stromance of stromance of stromance of strong of paid of stromance of strong of paid of stromance of strong of paid of strong of paid of strong of paid of strong of paid of strong of paid of strong of paid of strong of paid of strong of paid of strong of paid of strong of paid of strong of paid of strong of paid of strong of paid of strong of paid of strong of paid of strong of paid of strong of	ase of facilities of stromance of stromance of stromance of saming of facilities aring of paid esimbursement simbursement	ase of facilities informance of sinformance of sinaing of facilities raring of paid (saring of paid (simbursement	ase of facilities of stromance of stromance of stromance of strong of facilities aring of paid esimbursement simbursement her transfer of	ase of facilities of stromance of stromance of stromance of stromance of stromance of stromance of stromance of stromance of stromance of stromance of stromance of stromance of the stromance of the stromance of the stromance of the stromance of the stromance of the stromance of the stromance of the stromance of the stromance of the stromance of the stromance of the stromance of the stromance of the stromance of stromance of stromance of stromance of stromance of stromance of stromance of strongerous of stronger	ase of facilities of stromance of stromance of stromance of stromance of stromance of stromance of stromance of stromance of stromance of stromance of stromance of the answer to stromance of the answer to stromance of the answer to stromance of the answer to stromance of the answer to stromance of the answer to stromance of the answer to stromance of the answer to stromance of the answer to stromance of the answer to stromance of the answer to stromance of strong stron	ase of facilities of stromance of stromance of stromance of stromance of stromand of paid training of paid training of paid the transfer of the answer to the answer to	ase of facilities of strormance of strormance of strormance of strormance of strormance of strormance of strong of paid strong	ase of facilities informance of stromance of stromance of staring of facilities in the stransfer of the answer to stromance of stronger of stransfer of the answer to stronger of the answer to stronger of the answer to stronger of the answer to stronger of the answer to stronger of the answer to stronger of the answer to stronger of the answer to strong	ase of facilities aformance of stromance of the stromance of the stromance of the stromance of the stromance of the stromance of the stromance of the stromance of the stromance of the stromance of the stromance of the stromance of the stromance of the stromance of strong str	ase of facilities of stromance of stromance of stromance of stromance of stromance of stromance of strong of paid elimbursement simbursement her transfer of the answer to the answer to stromance of the answer to strong the answer to strong the answer to strong the answer to strong the answer to strong the answer to strong the answer to strong the answer to strong the answer to strong the stron	ase of facilities Informance of stromance of stromance of stromance of strong of paid strong of	ase of facilities rformance of stromance of stromance of strong of paid strong of	ase of facilities rformance of stromance of the stromance of the stromance of the stromance of the stromance of the stromance of the stromance of the stromance of the stromance of the stromance of the stromance of the stromance of the stromance of the stromance of strong str	ase of facilities informance of stromance of stromance of strong of paid strong o	ase of facilities informance of sindormance of sindormance of sindormance of sindormance of sindormance of sindormance of sindorsement simbursement simbursement simbursement sindormance of the transfer of the answer to sindormance of sindormance	ase of facilities informance of strong of sality saring of paid the transfer of the answer to the an	ase of facilities of artformance of	ase of facilities Informance of stromance of stromance of stromance of stromance of strong of paid estimation of paid estranger of the answer to strong the	ase of facilities Informance of stromance of strong stro	ase of facilities Informance of strong of security of facility saring of paid to sar
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# Part VI Unrelated Organizations Taxable as a Partnership

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets

or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.	structions regarding exc	lusion for certain if	vestme	nt part	nerships.					
(A) Name, address, and EIN of entity	(B) Pnmary activity	(C) Legal domicile	(D) Are all		(E) Share of	) Disprop	(F) Disproportionate	(G) Code V—UBI	Gen (	(H) General or
			partners 501(c)(3) organizations?	ers (3) trons?	end-of-year assets	= = 	frons?	of Schedule K-1 (Form 1065)	man pad	managing partner?
			Yes	9 N		Yes	No		Yes	8
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Schedule R (Form 990) 2008

Part VI. Line 20 (990) - Books in Possession Of

Tall VI, Line Lo (000) - Books	, III 1 0000001011 OI			
Name			Phone Number	
Joseph Slater			215-717-3134	
Address			Foreign Country	
1726 Locust Street				
City, Town, or Post Office	State	Zıp Code		
Philadelphia	PA	19103	, <b></b>	

Par	Part VII, Section B, Line 1 (990) -	_	Highest Compensated Independent Contractors	ent Contractors			
		Check If					
	Contractor's Name	Business	Street Address	City	State	Zip Code	Foreign Country
-	ING Clarion Real Estate Securities, LP	×	259 North Radnor - Chester Road Radnor	Radnor	PA	19087	
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	Explanation						
272,907	Compensation						
	Description of Services	Investment Management Se					

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Part VIII, Line 7 (990) - Gain/Loss from Sale of Assets Other than Inventory

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									Description of	Bosic Mothod	Policial Manager																				
							_			Depression	100000																				
	Cost, otner	basis and expenses	29,995,189	0	0	Expense	of sale and	cost of	тргоуе	ments																				Ť	
	į Š	basis and					Cost or other basis	(Enter one field only)	Donated	value																					
	Gross	sales	22,924,533	0	0		Cost or o	(Enter one		Cost	13.678.785	_		<b> </b> ~	ļ	2 596 163	111 393	16 452													
			j						Gross sales	Duce	11,539,267	1,381,685	0	4.274.249	3 110 171	2,619,161	ō	0	0												
H-fells	200		Public Securities	Non-Public Securities	Other sales				Date	plos	5/31/2009	5/31/2009	5/31/2009	5/31/2009	5/31/2009	5/31/2009	5/31/2009	5/31/2009	5/31/2009												
			2	Non-Pul					Acquisition	method	Purchase	Purchase	Purchase	Purchase	Purchase	Purchase	Purchase	Purchase	Purchase												
									Date	acdnired	6/1/2008	6/1/2008	6/1/2008	6/1/2008	6/1/2008	6/1/2008	6/1/2008	6/1/2008	6/1/2008												
										Purchaser	Open Market	Open Market	Open Market	Open Market	Open Market	Open Market	Open Market	Open Market	Open Market												
							Check if	purchaser	15 a	business	)	)				J															
						Check if	gam/loss is	from sale of	non public	secunties																					
						Check if	gain/loss is	from sale	of public	secuntres	×	×	×	×	×	×	×	×	×												
									,	CUSIP #	xoration	ment	unties, LP	ii.		ment			t Management LL												
								_		т	1	T	Т	Т	T	╗	T		Brandywine Global Investment Management												
							_	_	_ :	ěğ.		~	n	4	ဂ	ဖ	^	∞	၈	우	=	12	13	14	15	¥	2	=	₽	19	2

Part X, Line 4 (990) - Accounts Receivable

	L	Accounts reco	eivable	Allowance for doubtful accounts			
	Г	Beginning	End	Beginning	End		
Investment Income Receivable	1 [	132,050	123,594		l — — —		
	2						
	3						
	4						
	5						
	6						
	7						
	8						
	ا و						
)	10						
1 Total accounts receivable	: :  -	132,050	123,594	0			

### Part X, Lines 11 and 12 (990) - Investments - Securities

Check one box below to indicate how securities are reported	t
Cost	

X End of year market value (FMV)

						0	99,851,931	69,309,530
		Publicly Traded	Financial	Closely-Held Equity	Number of Shares/	Value at Time of	Beginning Balance Book Value	Ending Balance Book Value
	Securities at end of year	Securities?	Denvatives	Interests	Face Value	Donation	FMV	FMV
1_	Various	X	l		0 00	0	99,851,931	69,309,530
_ 2					0 00	0	0	0
3					0.00	0	Ó	0
4					0 00	0	0	0
5					0.00	0	Ö	0
6					0 00	0	0	0
7					0 00	0	0	0
8					0.00	0	0	0
9					0 00	0	0	0
10					0 00	0	0	0
11					0.00	0	0	0
12					0 00	0	0	0
13					0 00	0	0	0
14					0 00	0	0	0
15					0 00	0	0	0
16					0.00	0	0	0
17					0.00	0	0	0
18			· · · · · · · · · · · · · · · · · · ·		0 00	0	0	0
19	<u> </u>			<b></b>	0.00	0	0	0
20					0 00	0	0	0

Part I. Line 11h (Sch A (990/990-EZ)) - Supported Organizations 4 973 475

<u> </u>	rt i, Line i in (Sch A	(990/990-EZ))	- Supported Organiza	itions						4,973,475	
	Name(s) of supported organization(s)	Employer identification number (EIN)	Type of organization (described in lines 1 through 9 of Page 1 or IRC section)	organization the support organization organization gove	ipported on listed in iporting zation's ming nents?	organizat	notify the on of your port?	ın the	ganization United tes?	Amount of support	
				Yes	No	Yes	No	Yes	No		
1	Curtis Institute of Music	23-1585611	7	X		Х		X		4,973,475	
2										0	
3				<u> </u>						0	
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(Sch O (990)) - Supplemental Information

(Scr	<u> 1 ( (990)) -</u>	Suppleme	ntai intorma	tion	
	Form	Part	Section	Line	Explanation
1	990	VI	Α	10	The Form 990 was discussed by the Board of Directors of the Foundation
2	<u></u>	<u> </u>		<u></u>	at their quarterly meeting.
3					
4					
5		<u> </u>			
6	990	VI	B	12 (c)	Conflict of interest statements are submitted by the members of the
7					Foundation's Board of Directors annually.
8		<u> </u>		<del></del>	
9		<u> </u>			
10					
11	990	VI	C	19	Governing documents, conflict of interest policy and financial statements
12					of the Foundation are available to the public upon request
13					
14					
15			<u> </u>		
16	<u></u>				
17					
18	L			<u>-</u>	
19					
20			<u> </u>		