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Form 990

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)

OMB No 1545-0047

Open to Public

		e Service		-	e a copy of this return to s						ection	4
			endar year, or tax year be C Name of organization		6/1/2012	, and e	naing		31/2013 or identif	ication numbe		_
_		applicable			Curtis Bok Foundation							
=	Address o	-	- Odi		delivered to etreet address)	Room/suite		23-600061 E Telephon		_		-
=	Name cha	•	Number and street (or PO t	box ir maii is not	delivered to street address)	Roomvaule		•		:1		
=	nıtıal retu		1726 Locust Street					215-717-3°	134			_
=	Terminate		City, town or post office, stat	te, and ZIP code		40400					40 5 4 4 4 7 7	,
닏′	Amended	return	Philadelphia		PA	19103		G Gross red			40,544,177	_
\sqcup'	Applicatio	n pending	F Name and address of princip					this a group ret			Yes X No	
			Samuel R Shipley 1726	Locust Stree	et, Philadelphia, PA 191	03	3	e all affiliates ir			Yes No	1
<u> </u>	ax-exem	pt status	X 501(c)(3) 501(c)	() ◀	(insert no) 4947(a)(1)	or 527	lf '	"No," attach a l	ıst (see	instructions)		
JV	Vebsite	: ► N/A	\				H(c) Gr	oup exemption	number	•		_
KF	orm of or	rganization	X Corporation Trus	st Associa	tion Other ▶	L Yes	ar of forma	ation 1932	Ms	State of legal d	omicile PA	
	art l		mmary			<u>l -</u>		1002	· L			<u> </u>
	1		lescribe the organization's	e mission or	most significant activities	s: Suni	nort of I	Music School	ol - Cu	rtis		-
	'	•	of Music, tuition free sch		•		poit of i	Music Ocho	01 - 04	103		
e			onally gifted musicians for				level					
Jan		<u> </u>	many girtou muoloidino tot	. powering.	on the state of th							
Activities & Governance	2	Check t	his box ▶ if the orga	anization die	continued its operations	or disposed	of mor	a than 25%	of ite r	not assets		
ဖွ	3		of voting members of the		· · · · · · · · · · · · · · · · · · ·	or disposed	OI IIIOI	e triair 2570	3		(9
م ق ق	4		of independent voting m	-	• •	/Line 1h)			4			9
vitie	5		mber of individuals emplo				•		5			ŏ
Acti	6		mber of volunteers (estim	•	•				6	-		<u>-</u>
•	7a		related business revenue						7a			ō
	Ь		elated business taxable in						7b			ō
								Prior Year	-	Curre	ent Year	_
<u> </u>	8	Contribu	utions and grants (Part VI	II, line 1h)	RECEIVE	<u> </u>			0		(ō
Į Š	9		n service revenue (Part V						0		(ō
S & Lu Revenue	10	-	ent income (Part VIII, col	•	\$3,4, and 7,d)		7,77	2,280		5,117,258	<u>8</u>	
-	11		evenue (Part VIII, column					0			(<u>5</u>
2 - -	12	Total rev	enue-add lines 8 through	11 (must equ	al Part VIII, column (A), lin	e 12)ഗ്		7,77	2,280		5,117,25	8
<u> </u>	13	Grants a	enue—add lines & through and similar amounts paid and to or for members ((Part IX, col	umn (A) (B) (B) (1-3)			3,64	5,900		4,120,955	<u>5</u>
a	14	Denenia	paid to or for intempers (0			<u>ე</u>			
ည်တွ	15		, other compensation, empl	•		5–10) .			0		(<u>ე</u>
Z §	16a		ional fundraising fees (Pa		• •				0		(<u>0</u>
る。	b		ndraising expenses (Part			0					<u> </u>	<u>.</u>
5	17		xpenses (Part IX, column						29,250		518,545	
9 7	18		penses Add lines 13-17			25)	<u> </u>		75,150		4,639,500	
. 6	19	Revenu	e less expenses. Subtrac	t line 18 fron	1 line 12	<u> </u>	 		7,130		477,758	<u>ರ</u>
Net Assets or Fund Balances			1 (5 1)(1 40)				Begini	ning of Curren		Ena	of Year	_
Bala	20		sets (Part X, line 16)	•	•		<u> </u>		32,100	_	86,614,616	_
tet P	21		bilities (Part X, line 26)						03,985 58,115		2,261,768 84,352,848	_
			ets or fund balances Sub	otract line 21	rom line 20		<u> </u>	74,00	30,113			_
	rt II		nature Block y, I declare that I have examined	this peturn inch	iding accompanying schedules	and statements	and to t	he hest of my l	nowledo	1e		-
and	belief, it i	is true, corre	ect, and complete Declaration of	preparer fother	than officer) is based on all info	rmation of which	h prepare	er has any knov	wiedge			
					XXV					1/10/2014	<u> </u>	_
Sig			Signature of officer	// ////	DI I			Date				_
He	re		Joseph Slater, Assistant	Treasurer		1/10	/2014					
			Type or print name and title									_
		Pnn	t/Type preparer's name		Preparer's signature		Da		.	PTIN		_
Pa	id								Check self-emp			
Pre	parei							T				_
Us	e Only	y <u>Fim</u>	n's name 🕨		 			Firm's EIN				_
		Fım	n's address 🕨					Phone no				_
Ma	y the IF	RS discus	s this return with the prep	parer shown	above? (see instructions	s) .				'	Yes No	٥
Eor	Papan	work Bod	uction Act Notice, see the	o consento in	etructions —					Fo	orm 990 (2012	<u>.</u>

Form 9	90 (2012)	Mary Louise Curtis Bok Fo	undation			23	<u>-6000615 </u>	Page 2
Pa	rt III	Statement of Program S	ervice Accom	plishments				
		Check if Schedule O cont		e to any question in t	this Part III	<u> </u>	<u> </u>	
1	-	escribe the organization's mission			4			
		of Music School - Curtis Institute					•	
		educate and train exceptionally professional level						
	ingilest	olessional level					•	
2	Did the	organization undertake any sign	ficant program s	ervices during the year	which were not lis	sted on		
		Form 990 or 990-EZ?					Yes	X No
	If "Yes,"	describe these new services on	Schedule O				_	
3	Did the	organization cease conducting, o	or make significa	nt changes in how it coi	nducts, any progra	am		
	services						Yes	X No
	If "Yes,"	describe these changes on Sch	edule O.					
4		the organization's program ser						
	-	s. Section 501(c)(3) and 501(c)			he amount of grar	nts and allocat	ons to others,	
	the total	expenses, and revenue, if any,	for each program	service reported				
								
4a) (Expenses \$						
							· · · · · · · · · · · · · · · · · · ·	·
		bhia, PA 19103				·		
	Provide	financial support for tuition free	school of Music					
		•••••						
		· · - · · · · · · · · · · · · · ·						
						~		·
4b	(Code) (Expenses \$	-	including grants of \$) (Revenue \$		<u> </u>
		·····						
		····						
								·
		<u> </u>	<u></u>					
4c	(Code) (Expenses \$		including grants of \$) (Revenue \$)
								
								-
		•••••						
							••	
								
		··						
4d	Other or	ogram services. (Describe in Sc	hedule ())			-		
74	(Expens	-	uding grants of \$) (Revenue \$		0)	
4e		ogram service expenses		,120,955	, (, (, (, (, (, (, (, (, (, (, (, (, (,			-

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		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		×
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
8	the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		X
	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		×
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
11	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	. ,
	VII, VIII, IX, or X as applicable	>		
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		Х
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		×
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e		Х
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	x	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes,"			
	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional .	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		_X_
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	13		
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		Х
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		Х
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		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

19? Note. All Form 990 filers are required to complete Schedule O

Par	W Checklist of Required Schedules (continued)	-		
		•	Yes	No
21 `	Did the organization report more than \$5,000 of grants and other assistance to any government or organization			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		_X_
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K If "No," go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? If "Yes," complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	1		
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X_
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	4463	Nys Y	- 400
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)	, ; ;		,
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? 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		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31	L	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		<u> </u>
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, Part II,			
	III, or IV, and Part V, line 1	34	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled			
	entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	<u>L</u> _	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		Γ	
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part	1	1	
	VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
		1	•	1

Part	0 (2012) Mary Louise Curtis Bok Foundation 23-600 V Statements Regarding Other IRS Filings and Tax Compliance			age 5
	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		`	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		,× ,	
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable]	 	
9	gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	, "		l
	Statements, filed for the calendar year ending with or within the year covered by this return .	<u> </u>		ļ
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		Ь
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)	ļ	ļ	ļ
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		├
	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	1.		,
	account)?	<u>4a</u>	ļ	X
	If "Yes," enter the name of the foreign country.	, , ,	-	
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.			X
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a 5b		Î
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?.	5c		┝
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	130	<u> </u>	\vdash
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
	If "Yes," did the organization include with every solicitation an express statement that such contributions or	<u> </u>		
	gifts were not tax deductible?	6ь		
	Organizations that may receive deductible contributions under section 170(c).	,		<u> </u>
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	· 		
	and services provided to the payor?	7a		Х
b I	If "Yes," did the organization notify the donor of the value of the goods or services provided? .	7b		
c I	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			1
	required to file Form 8282?	7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year	4 ⁷ ř3	\$82.5° 5	, ¹ 2.
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
_	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		-
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	<u> </u>	
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		, X
	Sponsoring organizations maintaining donor advised funds.		عيشت	
	Did the organization make any taxable distributions under section 4966?	9a 9b	_	\vdash
	Did the organization make a distribution to a donor, donor advisor, or related person?			\vdash
	· · · · · ·	₹, ,		
	Initiation fees and capital contributions included on Part VIII, line 12	1: :		
	Section 501(c)(12) organizations. Enter.	1: "		
	Gross income from members or shareholders	TOE.	, ,,	, ,
	Gross income from other sources (Do not net amounts due or paid to other sources	1 1818	^* ^t	٠,٠٠٠
- '	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	P	Ι .	I '

а	Gross income from members or shareholders	11a		2 A	
b	Gross income from other sources (Do not net amounts due or paid to other sources		, " ',		, ,
	against amounts due or received from them)	11b	<u>.</u>	<i>-</i>	1
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of F	orm 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note. See the instructions for additional information the organization must report on Schedule O				
b	Enter the amount of reserves the organization is required to maintain by the states in which		" ^		
	the organization is licensed to issue qualified health plans	13b	indak.		:
С	Enter the amount of reserves on hand	13c		100	
14a	Did the organization receive any payments for indoor tanning services during the tax year?.		14a		Χ
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Scheen	dule O	14b		

•	•		'- '	
	Pa	rt '	VI	•

Sect	ion A. Governing Body and Management								
				Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year	1a (3 🕸	W.	*				
	If there are material differences in voting rights among members of the governing body, or			i jar					
	if the governing body delegated broad authority to an executive committee or similar			-	. ,				
	committee, explain ın Schedule O.				ř.				
b	Enter the number of voting members included in line 1a, above, who are independent	1b 9	<u> </u>	gragas.	1.6				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relations	hip with	****	<u>``</u>					
	any other officer, director, trustee, or key employee?		2		X				
3	Did the organization delegate control over management duties customarily performed by or under	the direct							
	supervision of officers, directors, or trustees, or key employees to a management company or other	r person?	3		X				
4	Did the organization make any significant changes to its governing documents since the prior Form 990 w		4		Х				
5	Did the organization become aware during the year of a significant diversion of the organization's		5		Х				
6	· · · · · · · · · · · · · · · · · · ·								
7a									
-	one or more members of the governing body?								
b	Are any governance decisions of the organization reserved to (or subject to approval by) members		7a		X				
~	stockholders, or persons other than the governing body?	1	7b		x				
8	Did the organization contemporaneously document the meetings held or written actions undertake	o during	4	0.18	\$-7 (388)				
U	the year by the following	ii duliiig							
а	The governing body?		8a	X	â				
b	Each committee with authority to act on behalf of the governing body?		8b	X					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re-		00	 ^					
3	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.		9		x				
Soot				<u> </u>					
Seci	ion B. Policies (This Section B requests information about policies not required by the	iiileiiiai Neveliue	Coue.	Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?		10a	103	X				
b	If "Yes," did the organization have written policies and procedures governing the activities of such	hantore	102		 ^				
U	affiliates, and branches to ensure their operations are consistent with the organization's exempt pu	-	10b						
440	Has the organization provided a complete copy of this Form 990 to all members of its governing body before the organization provided a complete copy of this Form 990 to all members of its governing body before the organization provided a complete copy of this Form 990 to all members of its governing body before the organization provided a complete copy of this Form 990 to all members of its governing body before the organization provided and the organi		11a	X	_				
11a		ine ming the forms.		-					
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			۔ اُن ا					
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>		12a	X					
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could		12b	-^-					
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If	res,	40-	,					
	describe in Schedule O how this was done		12c	_					
13	Did the organization have a written whistleblower policy?		13	X					
14	Did 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 appro	•	3/4	7 7	4 :				
	independent persons, comparability data, and contemporaneous substantiation of the deliberation	and decision?	2/2	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	å				
а	The organization's CEO, Executive Director, or top management official		15a						
b	Other officers or key employees of the organization		15b	ļ					
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)								
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangements	jement	1						
	with a taxable entity during the year?		16a		X				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate		Ŋ.		há:				
	participation in joint venture arrangements under applicable federal tax law, and take steps to safe	guard		7 ,××5	\$				
	the organization's exempt status with respect to such arrangements?		16b						
Sect	ion C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed ► PA								
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 99	0-T (Section 501(c)(3	3)s only	/)					
	available for public inspection. Indicate how you made these available. Check all that apply								
	Own website X Another's website X Upon request Other (e)	plain in Schedule O)							
19	Describe in 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								
20	State the name, physical address, and telephone number of the person who possesses the books	and records of the							
	organization. ▶ Joseph M Slater	215-717-31	34						
	1726 Locust Street, Philadelphia, PA 19103								

Form 990 (2012)	Mary Louise Curtis Bok Foundation	n								23-60006	15 Page 7
Part VII ⁿ	Compensation of Officers, Dire	ctors, Truste	es, K	(ey	Em	nplo	oyee	s, ł	lighest Comp	ensated	
•	Employees, and Independent C Check if Schedule O contains a r		y qu	esti	on i	in tl	his P	art	VII		🖂
Section A.	Officers, Directors, Trustees, Key E							_			
1a Complete	this table for all persons required to be									with or within the	
organization's			•						, ,		
List all List the List the List the who received organization a	of the organization's current officers, di ion. Enter -0- in columns (D), (E), and (of the organization's current key emplor organization's five current highest con reportable compensation (Box 5 of For and any related organizations	F) if no compens byees, if any. See npensated emplo m W-2 and/or Bo	sation e instr oyees ox 7 d	wa ructi s (ot of Fo	s pa ions her orm	aid. for thai 109	defin n an (9-Mi	itior offic SC)	of "key employe er, director, trust of more than \$1	ee." ee, or key emplo 00,000 from the	yee)
\$100,000 of re	of the organization's former officers, ke eportable compensation from the organ	ization and any	relate	d o	rgar	niza	tions				
organization,	of the organization's former directors of more than \$10,000 of reportable compe	ensation from the	e orga	aniza	atio	n ar	nd an	y re	ated organizatio	ns	the
compensated	n the following order individual trustees employees, and former such persons.									•	
X Check thi	s box if neither the organization nor any	y related organiz	ation	con	npe	nsa	ted a	ny c	urrent officer, dir	ector, or trustee.	
	(B) Average hours per	Average box, unless person is both an officer and a director/trustee)				is both or/trust	an ee)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of	
		week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
	R Shipley	1 00									
President/Dire		0.00	X	<u> </u>	X	L	<u> </u>	<u> </u>	0	0	0
(2) Shaun		1 00									•
Vice Presiden (3) J G Ru		0 00	-	-	X	├	 		0	0	0
Treasurer/Dire		1.00 0.00			x				0	0	0
(4) Joseph		1 00		-	Ĥ	╁				Ŭ	
Secretary/Dire		0.00			х				0	o	0
(5) A Marg		1 00			Ė						
Director		0 00	l .				ľ		o	o	0
(6) Gary G	raffman	1.00	ı								
Director		0 00			_		ļ	<u> </u>	0	0	0
(7) James	R Ledwith	1 00		•							•
Director (9) Multon I	Pack	0 00	X	\vdash	\vdash	\vdash		\vdash	0	0	0
(8) Milton L Director	. INUCK	1 00	_v							ار	^
(9) HFLer	nfest .	0.00 1 00		\vdash					0	0	0
Director		0 00							o	o	0
			-``	Н	\vdash	\vdash		\vdash			<u>~</u>

(12)

(13)

Р	Part Vil Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
	(A) Name and title	me and title Average box, unless person is both an Reportable Report					(E) Reportable compensation from related		(F) Estimate Imount o				
		hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	ey employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	on	mpensa from the ganizati nd relate ganization	e ion ed
(15)											<u> </u>		
(16)													
(17)				-							+		
(18)													
(19)													
(20)	(20)												
(21)													
(22)											1		
(23)													
(24)													
(25)										* · ·	<u> </u>		
1b c				<u>L</u>	•	•		>	0	-			
d	Total from continuation sheets to Part VII, So Total (add lines 1b and 1c).	ection A	•			•		>	0				_
2	Total number of individuals (including but not lir reportable compensation from the organization	nited to those lis					recei				<u> </u>		
	reportable compensation with all organization			-								Yes	No
3	Did the organization list any former officer, dire employee on line 1a? If "Yes," complete Sched				oye	e, o	r high	nest	compensated		3	*	X
4	For any individual listed on line 1a, is the sum of				n a	nd c	other	con	nensation from		100 m		
•	the organization and related organizations great		-						•	7		. 4	,
	indıvidual						•				4		Х
5	Did any person listed on line 1a receive or accr for services rendered to the organization? If "Ye										5	; 	Х
Sec	tion B. Independent Contractors			-		-	n pon						
1	Complete this table for your five highest compe compensation from the organization. Report co year	nsated independ mpensation for t	dent o	cont	ract dar	ors yea	that r r end	ece	eived more than \$ with or within the	6100,000 of e organization's	tax		
	(A) Name and business addi	ress							(B) Description of serv	rices	(C Comper		
Colo	nial Consulting LLC 750 Third Avenu	ue, 20th Floor, N	ew Y	ork,	NY	100)17	Inv	estment Advisory	Services		110	,098
_													
									-	———— <u>—</u> ——	<u>-</u>		
_					_								
2	Total number of independent contractors (include more than \$100,000 of compensation from the					stec		ve)	who received		, .		

Total revenue. See instructions

Form 990 (2012) Mary Louise Curtis Bok Foundation 23-6000615 Part VIII Statement of Revenue Check if Schedule O contains a response to any question in this Part VIII . . . Related or Total revenue Unrelated Revenue exempt business excluded from function tax under sections revenue 512, 513, or 514 Federated campaigns Contributions, Gifts, Grants and Other Similar Amounts Membership dues . 1b c Fundraising events 1c Related organizations . . . Government grants (contributions) . . . 1e f All other contributions, gifts, grants, and similar amounts not included above 1f g Noncash contributions included in lines 1a-1f: Total. Add lines 1a-1f Business Code Program Service Revenue 0 0 0 All other program service revenue . . . Total. Add lines 2a-2f. Investment income (including dividends, interest, and other similar amounts) 1,712,513 1,712,513 Income from investment of tax-exempt bond proceeds. 5 Royalties (ı) Real (II) Personal 6a Gross rents **b** Less: rental expenses . c Rental income or (loss). d Net rental income or (loss) 7a Gross amount from sales of (ı) Securities (II) Other assets other than inventory 38,831,664 **b** Less cost or other basis and sales expenses . . . 35,426,919 c Gain or (loss) 3,404,745 Net gain or (loss). Other Revenue 8a Gross income from fundraising events (not including \$ _____0 of contributions reported on line 1c) See Part IV, line 18. **b** Less direct expenses. c Net income or (loss) from fundraising events . 9a Gross income from gaming activities. See Part IV, line 19 **b** Less direct expenses. 0 c Net income or (loss) from gaming activities . . . 10a Gross sales of inventory, less returns and allowances **b** Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11a 0 All other revenue . . . O DESCRIPTION TO A DESCRIPTION OF THE PROPERTY Total. Add lines 11a-11d.

5,117,258

5,117,258

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4)	organizations must complete all columns.	s. All other organizations must complete colui	mn (A)
•			

	Check if Schedule O contains a response to any o	luestion in this Part	IX	<u> </u>	· · · 🗀
	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			1000	
	organizations in the United States See Part IV, line 21	4,120,955	4,120,955	* '-, -	-
2	Grants and other assistance to individuals in the	1,120,000	1,120,000	· · · · · · · · · · · · · · · · · · ·	
_	United States See Part IV, line 22	0	0		
3	Grants and other assistance to governments,			У .	· · · · · · · · · · · · · · · · · · ·
•	organizations, and individuals outside the			, '	
		,		•	
	United States See Part IV, lines 15 and 16	0	0		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors,	_			_
_	trustees, and key employees	. 0	0	0	0
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0	0	0	0
7	Other salaries and wages	0	0	0	0
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	0	0	0	0
9	Other employee benefits	0	0	0	0
10	Payroll taxes	0	0	0	0
11	Fees for services (non-employees)	,			
а	Management	42,000	0	42,000	0
ь	Legal	7,500		7,500	0
c	Accounting	18,250		18,250	0
ď	Lobbying	0	0	10,200	0
-	Professional fundraising services. See Part IV, line 17				0
f	Investment management fees	450,795		450,795	0
g	Other (If line 11g amount exceeds 10% of line 25, column	430,793	<u> </u>	430,733	<u> </u>
9	(A) amount, list line 11g expenses on Schedule O.)	o	o	o	o
12		0	0	0	0
13	Advertising and promotion	0	0	0	0
	Office expenses			0	
14	Information technology	0	0		0
15	Royalties	0	0	0	0
16	Occupancy	0	0	0	0
17	Travel	0	.0	0	0
18	Payments of travel or entertainment expenses	_			_
	for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings	0	0	_	0
20	Interest	0	0	.0	0
21	Payments to affiliates	0	0	.0	0
22	Depreciation, depletion, and amortization	0	0	0	. 0
23	Insurance	0	0	0	0
24	Other expenses Itemize expenses not covered				*
	above (List miscellaneous expenses in line 24e. If	لادن.			
	line 24e amount exceeds 10% of line 25, column	of the same.			to de la constant de
	(A) amount, list line 24e expenses on Schedule O)	1,040		Section of the second	**
а		0	0	0	0
b		0	0	0	0
С		0	0	0	0
d		0	0	0	0
е	All other expenses	0	0	0	0
25	Total functional expenses. Add lines 1 through 24e	4,639,500	4,120,955	518,545	0
26	Joint costs. Complete this line only if the	.,	.,,	2.15,5.16	
	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here				
	following SOP 98-2 (ASC 958-720)				
	TOTIONING OUT 30-2 (AGO 300-120)				

Form 990 (2012) Mary Louis
Part X Balance Sheet

		Bularioc Officet				
		Check if Schedule O contains a response to	any question in this Part X .			
				(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		19,804	1	9,385
	2	Savings and temporary cash investments		0	2	0
	3	Pledges and grants receivable, net		0	3	0
	4	Accounts receivable, net		47,080	4	6,098
	5	Loans and other receivables from current and t	former officers, directors,	1 2 4 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	* 1	,
		trustees, key employees, and highest compens	sated employees	* * * * * * * * * * * * * * * * * * * *	J, 1	······································
		Complete Part II of Schedule L		0	5	_0
	6	Loans and other receivables from other disqualified pers 4958(f)(1)), persons described in section 4958(c)(3)(B), sponsoring organizations of section 501(c)(9) voluntary	and contributing employers and	· ·	,	
ស		organizations (see instructions) Complete Part II of Sch	· •	0	6	0
Assets	7	Notes and loans receivable, net	edule C	0	7	0
As	8	Inventories for sale or use	•	0	8	0
	9	Prepaid expenses and deferred charges .		0	_	0
	10a	Land, buildings, and equipment, cost or	1 . 1		,	
	IVa	other basis Complete Part VI of Schedule D	10a 0	in in it	1	
	b	Less. accumulated depreciation	10b 0		10c	0
	11	Investments—publicly traded securities	100	77,295,216		86,599,133
	12	Investments—other securities See Part IV, line		0		00,000,100
	13	Investments—program-related See Part IV, line		0		0
	14	Intangible assets		0		0
	15	Other assets. See Part IV, line 11		0		0
	16	Total assets. Add lines 1 through 15 (must equ		77,362,100		86,614,616
	17	Accounts payable and accrued expenses		31,499		64,730
	18	Grants payable		2,472,486		2,197,038
	19	Deferred revenue		2,472,400	19	2,107,000
	20	Tax-exempt bond liabilities		0	20	0
	21	Escrow or custodial account liability. Complete		0	21	0
s	22	Loans and other payables to current and former			W 355 500,585	
Œ.	~~	trustees, key employees, highest compensated		and depletion - the top can be all the		
Liabilities		disqualified persons Complete Part II of Sched	· •	0	22	0
Ľ	23	Secured mortgages and notes payable to unre		0	_	0
	24	Unsecured notes and loans payable to unrelate		0		0
	25	Other liabilities (including federal income tax, p	•			
		parties, and other liabilities not included on line	•			•
		Part X of Schedule D		0	25	l
	26	-		2,503,985		2,261,768
		Organizations that follow SFAS 117 (ASC 95			٠.	
Balances		complete lines 27 through 29, and lines 33 a	and 34.		-	24.050.040
<u>a</u>	27	Unrestricted net assets		74,858,115		84,352,848
ã	28	Temporarily restricted net assets		0		0
Ĕ	29	Permanently restricted net assets	<u></u>	Jan 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	29	0
s or Fund		Organizations that do not follow SFAS 117 (ASC958) complete lines 30 through 34.	, check here and		1 () 1 ()	
ets	30	Capital stock or trust principal, or current funds		0	30	0
Net Assets	31	Paid-in or capital surplus, or land, building, or e	equipment fund	0		0
et /	32	Retained earnings, endowment, accumulated i	ncome, or other funds	0		0
ž	33	Total net assets or fund balances		74,858,115	33	84,352,848
	34	Total liabilities and net assets/fund balances		77,362,100	34	86,614,616

-orm 9:	90 (2012) Mary Louise Curtis Bok Foundation	23-	60000615	Pag	e IZ
Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI			. [X
1	Total revenue (must equal Part VIII, column (A), line 12)	1		5,117	,258
2	Total expenses (must equal Part IX, column (A), line 25)	2	-	4,639	,500
3	Revenue less expenses. Subtract line 2 from line 1	3		477	7,758
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	7.	4,858	3,115
5	Net unrealized gains (losses) on investments	5	(9,016	,975
6	Donated services and use of facilities	6			0
7	Investment expenses	7	-		0
8	Prior period adjustments	8			0
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	84	4,352	2,848
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question 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 in		-		
	Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or		``		į
	reviewed on a separate basis, consolidated basis, or both				, !
	Separate basis Consolidated basis Both consolidated and separate basis			;	
b	Were the organization's financial statements audited by an independent accountant?		2b	X	<u>;</u>
D	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a		20		
	separate basis, consolidated basis, or both		6.38		
			8 711	, ,,	1
	X Separate basis Consolidated basis Both consolidated and separate basis			,	8
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of		<u> `_`_`</u>		أحث
	the audit, review, or compilation of its financial statements and selection of an independent accountant? .	•	2c	Х	<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain in			,	}
	Schedule O.		ا انگرگار	سخث	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2012)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support

OMB No 1545-0047 20**12**

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.

► See separate instructions.

Open to Public Inspection

		organization	-	•					Employer	r identificati	on numb	ər	
		ise Curtis Bok		** ** ***					1, 0		00615		
Par				narity Status (All organization because it is (For						<u>istruction</u>	ns		
1	Organ		•	ition because it is (For ches, or association of		•		•	•				
2	Ħ			n 170(b)(1)(A)(ii). (Atta			0001.0	•(=)(• //• • //• /•				
3	H			ospital service organiza			ection 17	0/b)/1)/A)	(iii)				
4	H			tion operated in conjun						/1\/ A \/iii\	Enter ti	ne.	
•		hospital's na	me, city, and sta	te									
5		_		the benefit of a college Complete Part II)	e or unive	rsity owne	d or opera	ated by a	governme	ntal unit d	escribe	d	
6		A federal, sta	ate, or local gove	ernment or government	al unit de	scribed in	section 1	70(b)(1)(<i>l</i>	4)(v).				
7				receives a substantia 1)(A)(vi). (Complete P		s support 1	rom a gov	ernmenta/	al unit or fr	om the ge	eneral p	ublic	
8		A community	trust described	in section 170(b)(1)(A	.)(vi). (Co	mplete Pa	rt II)						
9		receipts from support from	activities relate	receives (1) more that d to its exempt function nt income and unrelate after June 30, 1975 S	ns—subje ed busines	ct to certa	in exception	ons, and (ess sectio	(2) no mor on 511 tax)	e than 33	1/3% o	fits	5
10	\sqcup	-	-	nd operated exclusively		-	•						
11	X			nd operated exclusively									
			•	olicly supported organize								ction	
				t describes the type of						-			_
		a Type	_			•	•		ype III–No		•	egrate	u
е	X			that the organization in managers and other			-					ection	
		•	section 509(a)(2		than one	or more p	ubliciy su	oponeu oi	gariizatioi	is describ	cu iii se	Cuon	
f				wntten determination	from the I	RS that it	ıs a Tyne	I Type II	or Type III	Lsupportir	na		
·		_	, check this box					., .,po,			.5		
g		Since Augus	t 17, 2006, has t	he organization accep	ted any gi	ft or contri	bution fro	m any of t	the				
		following per									,		
			-	or indirectly controls, e		-	-	ersons de	scribed in	(ti)		Yes	No
				rerning body of the sup		-			•		11g(i)		X
			•	person described in (i) y of a person described					•		11g(ii) 11g(iii)		X
h				ition about the support		•	•		•		i iguio i		
(i)		of supported anization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see Instructions))	(iv) Is the o	organization sted in your document?	the organ	ou notify nization in of your port?	organizat (i) organiz	s the son in col zed in the S ?	(vii) Amo	ount of mo support	onetary
					Yes	No	Yes	No	Yes	No			
(A)		_											
	s Ins	titute of Music	23-1585611	7	X		Х		X			4,12	0,955
(B)													
(C)										_			
(D)													
(E)										-			
Tota	l	1										4,12	0,955

•	(Complete only if you checked the Part III. If the organization fails to	e box on line (qualify under	5, 7, or 8 of P the tests liste	art I or if the o	organization fa use complete	ailed to qualify Part III.)	under
	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and				-		
	membership fees received. (Do not	İ				ĺ	
	include any "unusual grants")		ļ				0
2	Tax revenues levied for the organization's						
	benefit and either paid to or expended on						
	ıts behalf						0
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge		<u></u>				0
4	Total. Add lines 1 through 3	0	0	0	0	0	0
5	The portion of total contributions by each		,	· , · ,	•	ř,	
	person (other than a governmental unit		,	ž,			
	or publicly supported organization)	43 1 1 2 2 3	3 CA 1 6 2 YOUR	And a design		i i i i i i i i i i i i i i i i i i i	
	included on line 1 that exceeds 2%						
	of the amount shown on line 11,						
	column (f)	in the state of th					
_6	Public support. Subtract line 5 from line 4		****	42011	73 - 7 - 2280	0.00	0
Sect	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	0	0	0	0	0	0
8	Gross income from interest, dividends,					<u> </u>	
_	payments received on securities loans,						
	rents, royalties and income from similar						
	sources					ľ	0
9	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	· · · · · · · · · · · · · · · · · · ·					\$\$\$\$\\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	0
12	Gross receipts from related activities, etc. (se		2 Mary +674 7 V	7 250 3 (1/2000) C	reading with the	12	
13	First five years. If the Form 990 is for the org		t second third	fourth or fifth t	ay vear as a se		
	organization, check this box and stop here .				-	3011011001(0)(0)	▶□
Sact	ion C. Computation of Public Support		• • •	• • • • •	· · ·	<u> </u>	
14	Public support percentage for 2012 (line 6, co		d by line 44 col	(6)		44	0.00%
15	Public support percentage from 2011 Schedu					14	0 00%
16a	33 1/3% support test—2012. If the organizar					15	0 00%
IVa	and stop here. The organization qualifies as				14 18 33 1/3% (or more, check t	nis box
b	33 1/3% support test—2011. If the organization				Llina 15 ia 22 1	/20/ or more sh	ــــا ◄ .
D	box and stop here . The organization qualifies				111111111111111111111111111111111111111	73% of more, cri	eck this
. -			• •		•		▶∟
17a	10%-facts-and-circumstances test—2012.						
	is 10% or more, and if the organization meets	s the "facts-and	-circumstances	" test, check thi	s box and stop	here. Explain ir	า
	Part IV how the organization meets the "facts	s-and-circumsta	nces" test The	organization qu	ualifies as a pul	olicly supported	_
	organization.		•				▶∟
b	10%-facts-and-circumstances test—2011.						
	15 is 10% or more, and if the organization me						ıın in
	Part IV how the organization meets the "facts	-and-circumsta	nces" test The	organization qu	ualifies as a pul	olicly	
	supported organization						▶[]
18	Private foundation. If the organization did no	ot check a box o	on line 13, 16a.	16b, 17a, or 17	b, check this b	ox and see	
	instructions						▶□

23-6000615

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 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	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						0
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished						
	in any activity that is related to the						
	organization's tax-exempt purpose					İ	0
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						0
4	Tax revenues levied for the organization's						
	benefit and either paid to or expended on						
	its behalf						0
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge .						0
6	Total. Add lines 1 through 5	0	0	0	0	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	ŀ					
	exceed the greater of \$5,000 or 1% of the			•			
	amount on line 13 for the year						0
С	Add lines 7a and 7b	0	0	0	0	0	0
8	Public support (Subtract line 7c from						
	line 6)	新的電影問題		e nemona		Property (0
	tion B. Total Support	T		1			
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6	0	o	l o	0	o	0
10a	Gross income from interest, dividends,						
	payments received on securities loans,	ŀ					
	rents, royalties and income from similar sources						0
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975	1					0
С	Add lines 10a and 10b	0	0	0	0	0	0
11	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)						0
13	Total support. (Add lines 9, 10c, 11,					_	_
	and 12.)	0	0		0	0	0
14	First five years. If the Form 990 is for the organiz						. \Box
	organization, check this box and stop here						· P
Sec	tion C. Computation of Public Support						
15	Public support percentage for 2012 (line 8, column	• •	e 13, column (f))		•	15	0 00%
16	Public support percentage from 2011 Schedule A,			<u> </u>		16	0 00%
	tion D. Computation of Investment Inc						
17	Investment income percentage for 2012 (line 10c,		•			17	0 00%
18	Investment income percentage from 2011 Schedu					18	0 00%
19a	33 1/3% support tests—2012. If the organization						. —
	not more than 33 1/3%, check this box and stop h	-					▶∟
b	33 1/3% support tests—2011. If the organization						. \square
	line 18 is not more than 33 1/3%, check this box as	=					. ▶∐
20	Private foundation. If the organization did not che	eck a box on line	14, 19a, or 19b,	check this box a	nd see instructio	ns	▶□

Schedule A (Form 9	990 or 990-EZ) 2012	Mary Louise Curtis Bok Foundation	23-6000615	P <u>age 4</u>
Part IV	Part II, line 17a	Information. Complete this part to provide the explanations required or 17b; and Part III, line 12. Also complete this part for any additional	l by Part II, line	10;
	instructions).			
				
			. 	
			·	
•••				

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990,

OMB No 1545-0047

Open to Public Inspection

Employer Identification number

Department of the Treasury Internal Revenue Service

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990. ► See separate instructions. Name of the organization

Mary Louise Curtis Bok Foundation 23-6000615

Par	Organizations Maintaining Done the organization answered "Yes" t	or Advised Funds or Other Similar F	Funds or Accounts. Complete if
	the organization answered Tes t	(a) Donor advised funds	(b) Funds 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 do		
•	funds are the organization's property, subject		
6	Did the organization inform all grantees, done		
	used only for charitable purposes and not for purpose conferring impermissible private ben		
Par			Yes No
		plete if the organization answered "Yes	s to Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held to		
	Preservation of land for public use (e.g., recr		n of an historically important land area
	Protection of natural habitat	Preservation	n of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organizat	ion held a qualified conservation contribution	on in the form of a conservation
	easement on the last day of the tax year.		
	Table 1 6		Held at the End of the Tax Year
a	Total number of conservation easements		2a
b	Total acreage restricted by conservation ease Number of conservation easements on a cert		. 2b
d	Number of conservation easements included		20
4	historic structure listed in the National Registe		2d
3	Number of conservation easements modified		
	during the tax year ▶	,	
4	Number of states where property subject to c	onservation easement is located	
5	Does the organization have a written policy re	egarding the periodic monitoring, inspection	n, handling of
	violations, and enforcement of the conservati		Yes No
6	Staff and volunteer hours devoted to monitori	ng, inspecting, and enforcing conservation	easements during the year
_	·		
7	Amount of expenses incurred in monitoring, in	rspecting, and enforcing conservation ease	ements during the year
8	Does each conservation easement reported of	on line 2/d) above actions the requirements	of acation
0	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	on the 2(d) above satisfy the requirements	Yes No
9	In Part XIII, describe how the organization re	orts conservation easements in its revenue	
•	balance sheet, and include, if applicable, the		
	the organization's accounting for conservation	-	and a statement that describes
Par		ns of Art, Historical Treasures, or Other S	Similar Assets.
	Complete if the organization answered		
1a	If the organization elected, as permitted unde	r SFAS 116 (ASC 958), not to report in its r	revenue statement and balance sheet
	works of art, historical treasures, or other sim	· · · · · · · · · · · · · · · · · · ·	
	of public service, provide, in Part XIII, the text	•	
b	If the organization elected, as permitted unde		
	works of art, historical treasures, or other sim	lar assets held for public exhibition, educat	tion, or research in furtherance
	of public service, provide the following amour		
	(i) Revenues included in Form 990, Part VIII, (ii) Assets included in Form 990, Part X	line 1	> \$
	(-,		· · · · · · · · · · · · · · · · · · ·
2	If the organization received or held works of a		
	following amounts required to be reported uni-	der SFAS 116 (ASC 958) relating to these if	tems.
а	Revenues included in Form 990, Part VIII, line Assets included in Form 990, Part X	e 1	• \$
b	Assets included in Form 990, Part X		▶ \$

Pari	III Organizations Maintaining	Collections of A	Art, Histo	orical Tr	easures, o	r Othe	er Similar Ass	ets (cor	tinue	d)
3	Using the organization's acquisition, ac									
•	use of its collection items (check all tha	t apply).		·		•	_			
а	Public exhibition		d 🗌	Loan	or exchange	progra	ms			
b	Scholarly research		е	Other						
С	Preservation for future generatio	ns	·							
4	Provide a description of the organization Part XIII.		explain h	ow they fu	rther the org	anizati	on's exempt purp	ose in		
5	During the year, did the organization so assets to be sold to raise funds rather t							□ Y	es 🗍	No
Pari	IV Escrow and Custodial Arra	ngements. Com	plete if t	he organ	ization ans	wered	l "Yes" to Form	990, Pa	art	·
	IV, line 9, or reported an amo							,		
1a	Is the organization an agent, trustee, co				ibutions or o	ther as	sets not			
	included on Form 990, Part X?			•	•			Y	es 🗀	No
b	If "Yes," explain the arrangement in Pai	t XIII and complete	the follow	ving table						
								Amount		
C	Beginning balance	•			•	1				
d	Additions during the year .					1				
e	Distributions during the year		• •		•		e			
f	Ending balance		•		•	1	<u>f</u>			0
2a	Did the organization include an amount	on Form 990, Part	X, line 2	1? .	•	•	•	Y	es X	No
b	If "Yes," explain the arrangement in Pai	t XIII Check here i	f the expl	anation ha	as been prov	ided ın	Part XIII	•	L_	
Part	V Endowment Funds. Comple	ete if the organiza	ation ans	wered "\	es" to Forr	n 990	, Part IV, line 10	0		
		(a) Current year	(b) Pro	or year	(c) Two years	back	(d) Three years bac	k (e) F	our years	back
1a	Beginning of year balance .	90,928,866	89	,917,874	79,66	30,757	64,874,55	58	79,10	5,493
b	Contributions	8,038,336	9	,259,467	1,52	25,749	9,759,12	20	8,49	6,084
C	Net investment earnings, gains,									
	and losses .	14,866,431	3	3,792,323	12,84	15,892	8,937,57			57,132
d	Grants or scholarships	0		0		0	255,4	10	27	² 3,755
е	Other expenditures for facilities									
_	and programs	5,036,625	4	,456,152	4,11	4,524	3,655,08		3,69	36,132
f	Administrative expenses	0		0		0	70,000,7/	0	04.0	0
ď	End of year balance	108,797,008		,928,866		7,874	79,660,75	2/	64,87	4,558
2	Provide the estimated percentage of the	•	-	line 1g, co	numn (a)) ne	id as.				
a	Board designated or quasi-endowment Permanent endowment	28%	60%							
C	Temporarily restricted endowment	12%								
·	The percentages in lines 2a, 2b, and 2c		%							
3a	Are there endowment funds not in the p			n that are	held and ad	ministe	ered for the			
	organization by:		. 9						Yes	No
	(i) unrelated organizations							3a(i)		Х
	440							3a(ii)	Х	_
b	If "Yes" to 3a(II), are the related organiz	ations listed as req	uired on S	Schedule I	R? .			3b	Х	
4	Describe in Part XIII the intended uses	of the organization	' 's endowr	nent funds	3		_			
Part										
	Description of property	(a) Cost or oth			st or other s (other)) Accumulated depreciation	(d) B	ook valu	е
1a	Land		0		0			-	_	0
b	Buildings		0		0		0			0
С	Leasehold improvements .		0		0		0			0
d	Equipment		0		0		0			0
е	Other		0		0		0			0
Total	Add lines 1a through 1e (Column (d) m	ust equal Form 99	0 Part X	column (F	3) line 10(c))				0

Part X	Other Liabilities. See Form	990, Part X, line 25.					
1.	(a) Description of liability	(b) Book value	*		The state of the s		
(1) Federal i	income taxes	0					3 77
(2)			' ' '	10 (20) 20 (20) 21 (20)	2007 S	~	:
(3)			\$5.		Take-paper	# 800 ·	, î,
_(4)							, , , , , , , , , , , , , , , , , , ,
(5)			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
(6)			\$	A A TAT T	*c*		
(7)					i j	•	
(8)			<u> </u>	* -		/, *v-	•
(9)			16				4.88
(10)					146,	170	kat Ny
(11)			. ' .	•,	•	,	
Total. (Column (b) r	must equal Form 990, Part X, ∞l (B) line 25)	▶ 0		•	**	1	

2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII.

Schedu	ule D (Form 990) 2012 Mary Louise Curtis Bok Foundation	23-6000615	Page 4
Part	XI Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return	
1	Total revenue, gains, and other support per audited financial statements	1	14,134,233
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments	, t	
b	Donated services and use of facilities		
C	Recoveries of prior year grants]	
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	9,016,975
3	Subtract line 2e from line 1.	3	5,117,258
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		•
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)	1 1	
C	Add lines 4a and 4b	4c	0
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	5,117,258
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses p	er Return	
1	Total expenses and losses per audited financial statements	1	4,639,500
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.		
а	Donated services and use of facilities 2a	•	
b	Prior year adjustments	1	
C	Other losses	1:	
d	Other (Describe in Part XIII)	11	
е	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	4,639,500
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)	٠٤٤٠	
С	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	4,639,500
Part	XIII Supplemental Information		
Comp	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV	, lines 1b and	2b,
Part \	I, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to prov	/ide any	
addıtı	onal information		
Part X	CLine 2 The Foundation is exempt from federal income taxes under Section 501(c)(3)		
of the	Internal Revenue Code. Tax filings for fiscal 2010, 2011 and 2012 are subject to		
exam	ination, generally for three years after they are filed		
Part V	/ Line 4 Endowment funds are used to provide operating and capital funding to the		
Curtis	Institute of Music		

Schedule D (Form	990) 2012	Mary Louise Curtis Bok Foundation	23-6000615	Page 5
Part XIII	Supple	emental Information (continued)		
				-
		•••••		-
				
		••••••		
				
				
				
				
				
				
	-			
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SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Mary Louise Curtis Bok Foundation

Part I

General Information on Grants and Assistance

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

OMB No 1545-0047 Inspection Employer Identification number

► Attach to Form 990.

23-6000615

-	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 criteria used to award the grants or assistance?	X Yes No
7	ig the use of grant funds in the United Stal]
Pan	Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990	ed "Yes" to Form 990
	Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Curtis institute of Music 1726 Locust Street Philadelphia, PA 19	23-1585611	501(c)(3)	4,120,955	0	Book		Operating grant
(2)							
(3)							
(4)							
(9)							
(9)							
σ)							
(8)							
(6)							
(10)							
(11)							
(12)							
	1 501(c)(3) and g	overnment organiza	itions listed in the line 1	table			
s Enter total number of other organizations listed in the line 1 tab	rganizations liste	d in the line 1 table			•	•	

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

Schedule I (Form 990) (2012)

Page 2

(f) Description of non-cash assistance Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional (e) Method of valuation (book, FMV, appraisal, other) non-functionally integrated supporting organization that is subject to regulations that require the Foundation to distribute annually exceptionally gifted musicians for performing careers on the highest professional level. The Foundation qualifies as a Type III Part I Line 2 Grants made to the Curtis Institute of Music, a tuition free school of music that strives to educate and train (d) Amount of non-cash assistance 5% of the net aggregate fair market value of its assets using the valuation methods set forth in the regulations (c) Amount of cash grant Part III can be duplicated if additional space is needed. (b) Number of recipients (a) Type of grant or assistance information. Part III Part IV ß 9

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

20**12**Open to Public

Department of the Treasury Internal Revenue Service Name of the organization 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 990-EZ.

Open to Public Inspection

Employer identification number

Mary Louise Curtis Bok Foundation	23-6000615
Form 990 Part VI Section B Line 11A The form 990 was discussed by the Board of Directors of	
the Foundation at their guarterly 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 Director's annually	
Form 990 Part VI Section C Line 19 Governing documents, conflict of interest policy and	
financial statements of the Foundation are made available to the public upon request	
Form 990 Part XI Line 5 Change in unrealized gains (losses) for the year	
······································	
	······

Odredue & (10111 330 01 330 12) (2012)	Page .	<u> </u>
Name of the organization	Employer identification number	
Mary Louise Curtis Bok Foundation	23-6000615	_
	·	
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SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Department of the Treasury Internal Revenue Service

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ► See separate instructions. ▶ Attach to Form 990.

tion	numbe
spect	iffication
_	yer ident
	Emplo

(f)
Direct controlling entity Identification of Related Tax-Exempt Organizations (Complete If the organization answered "Yes" to Form 990, Part IV, line 34 because it had 23-6000615 End-of-year assets <u>e</u> **Identification of Disregarded Entities** (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) (d) Total income (c)
Legal domicile (state or foreign country) Primary activity (a)
Name, address, and EIN (f applicable) of disregarded entity Mary Louise Curtis Bok Foundation Name of the organization Part II Part I € 9 9 3 3 **©**

(g) Section 512(b)(13) controlled entity? Schedule R (Form 990) 2012 Yes No × (f)
Direct controlling
entity ٤ Public chanty status (if section 501(c)(3)) ◉ Line 2 (d) Exempt Code section 501(c)(3) Legal domicile (state or foreign country) Æ one or more related tax-exempt organizations during the tax year.) Primary activity Music School For Paperwork Reduction Act Notice, see the Instructions for Form 990. $_{\rm HTA}$ Name, address, and EIN of related organization 1726 Locust Street Philadelphia, PA 19103 (1) Curtis Institute of Music 23-1585611 3 3 **€** 3 9 3

23-6000615

Mary Louise Curtis Bok Foundation

Schedule R (Form 990) 2012

Part III

Page 2 Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(k) Percentage ownership						·-							art	(I) Section 512(b)(13) controlled entity?	Yes	-							Schedule R (Form 990) 2012
(l) General or managing partner?	Yes No		+		\dashv		-	-		1		_	990, Pa	(h) Percentage S ownership									e R (For
Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)													as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part nizations treated as a corporation or trust during the tax year.)	(9) Share of Serce end-of-year assets owne									Schedul
(h) Disproportionate allocations?	Yes No			 									answered ear.)	_									
(g) Share of end-of- year assets													ganization the tax y	y Share frust) inco				<u> </u>					
Share of total Sha													ete if the org ir trust during	(e) Type of entry (C corp, S corp, or frust)		:							
													rust (Complored or corporation o	(d) Direct controlling entity									
(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)													tion or Treed as a contract	micale gn country)									
(d) Direct controlling entry													a Corpora ations treat	(c) Legal domicile (state or foreign country)									
(c) Legai domicile (state or foreign country)													Taxable as ated organiz	(b) Pnmary activity									
ctivity										. !			anizations or more rel	<u>.</u>									
(b) Prmary activity													elated Organic it had one o	organization									
(a) Name, address, and EIN of related organization													Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answard, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	(a) Name, address, and EIN of related organization									
Name, reli		(1)	2	 (3)		(4)	(5)		(9)		(D)		Part IV	Nam		(1)	(2)	(3)	(4)	(5)	(9)	(7)	

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Note	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule			Yes	ş
-	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	irts II–IV?	Ĵ;	1.	31 g t
æ	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity.		1a		×
٩	Gift, grant, or capital contribution to related organization(s)		1b	×	
ပ	Gift, grant, or capital contribution from related organization(s).		10		×
ס	Loans or loan guarantees to or for related organization(s)		19		×
0	Loans or loan guarantees by related organization(s)		1 e		×
			ئ. د د د		ζς γ, ι. υ, «*
•	Dividends from related organization(s)		1		×
0	Sale of assets to related organization(s)	•	10		×
Ē	Purchase of assets from related organization(s).		ŧ		×
-	Exchange of assets with related organization(s).		=		×
-	Lease of facilities, equipment, or other assets to related organization(s).		7		×
¥	Lease of facilities, equipment, or other assets from related organization(s)		1		×
-	Performance of services or membership or fundraising solicitations for related organization(s).		=		×
Ε	Performance of services or membership or fundraising solicitations by related organization(s).		12	×	
E	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		1n		×
0	Sharing of paid employees with related organization(s)		9		×
٥	Reimbursement paid to related organization(s) for expenses		đ	×	
σ	Reimbursement paid by related organization(s) for expenses.		19		×
					2
_	Other transfer of cash or property to related organization(s)		11		×
S	Other transfer of cash or property from related organization(s)		18		×
7	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	nships and transaction	n thresho	olds.	
	(4)	(c)		9	
	Organization Tran type	Amount involved	Method of determining amount involved	determir	guin p
(1)				:	
(2)					
(3)					
(4)					
(5)					
(9)					
		Schedule R (Form 990) 2012	a R /For	(060 #	201

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Unrelated Organizations Taxable as a Partnership (Complete of the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

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(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile		(e) Are all partn			(h) Disproportionate			(k)
		(state or foreign country)	_8. ≤	section 501(c)(3) organizations?	total income	end-of-year assets	aflocations	of Schedule K-1 (Form 1065)	managing partner?	
				Yes No	T.		Yes	2	Yes	2
(1)										
(2)										
(3)										
(4)										
(9)										
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(15)										
(16)										

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Part VII	Supplem	ental Information		
,	Complete instruction	this part to provide additional information for responses to qu	estions on Schedule R (see	
	711000000	10).		
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