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332001 10-29-13

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ Do not enter Social Security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at www.irs.gov/form990

Open to Public Inspection

LOS ANGELES, CA 90015-0000 Finame and address of principal officer-ROBERT SANTELLI SAME AS C ABOVE Tax-exempt status: IXI 501(c)(3) 501(c)(3) 401(c)(3) 4047(a)(1) or 527 11 (b) 4047(a)(1) or 527 12 (b) 4047(a)(1) or 527	GRAMMY MUSEUM FOUNDATION, INC. Doing Business As Doing Business As Doing Business As Doing Business As Number and street (or P.O. box if mail is not delivered to street address) Recombusts E Telephone number A245 213 - 765 - 6800 Doing Business As Box W. OLYMPTC BLVD. A245 213 - 765 - 6800 A255 A232, 21 A255	A For th	2013 calendar year, or tax year beginning	and ending		
Check this box	Doing Business As Number and street (or P.0. box if mails not delivered to street address) Doing Business As Number and street (or P.0. box if mails not delivered to street address) Aza5	B Check If applicab	C Name of organization		D Employer identifica	ation number
Doing Business As 26-1447714 India Number and street (or P.O. box if mail is not delivered to street address) Room/sute A245 213-765-6800 1376 200 W. OLYMPIC BLVD. 140 1576 213-765-6800 150	Doing Business As Number and street (or P.0. box if mails not delivered to street address) Room/but E Telephone neumber 24.5 Room/but	Addre	GRAMMY MUSEUM FOUNDATION, INC.			
Number and street (pt-0) both miles for elevered to severe accuracy A245 213-765-6800	Aumber and street (RV protect, country, and 2) or foreign postal code City or town, state or province, country, and 2) or foreign postal code City or town, state or province, country, and 2) or foreign postal code City or town, state or province, country, and 2) or foreign postal code City or town, state or province, country, and 2) or foreign postal code Famma and address of principal officer-ROBERT SANTELLI	Name			26-14	47714
City or town, state or province, country, and ZIP or foreign postal code LOS ANGELES, CA 90015-0000 Rows readers Hol) is this a group return for subordinates? Yes Xive Yes Yes Yes Xive	City or town, state or province, country, and ZIP or foreign postal code City or town, state or province, country, and ZIP or foreign postal code City or town, state or province, country, and ZIP or foreign postal code City or town Cit		Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	
LOS ANGELES, CA 90015-0000 Fourmary Fourmary and address of principal officer.ROBERT SANTELLI H(b) we all subordinates encluded? Yes M(b) we all subordinates M(b) Group encludes M(b) Group encluded M(b) Group M(b) Group encluded M(b) Group M(b) Group	COS ANGELES, CA 9.0015-0.00 Flame and address of principal officer,ROEERT SANTELLI Flame and address of principal officer,ROEERT Flame and address of principal officer, ROEERT Flame and address of principal officer, ROEERT Flame and address Fl		800 W. OLYMPIC BLVD.	A245	213-7	
Name and address of principal officer-ROBERT SANTELLI for subordinates? Ves Net Name and address of principal officer-ROBERT Name and address of the government in disconfinured its operations or disposed of more than 25% of its net assets.	Fame and address of principal officer.ROBERT SANTELLI SAME AS C ABOVE Tax-exempt status: X 501(c)(3) 501(c)((mext no.) 4947(a)(1) or 527 H(c) Group exemption number N/A K form of organization: X 501(c)(3) 501(c)((mext no.) 4947(a)(1) or 527 H(c) Group exemption number N/A K form of organization: X 501(c)(1) Trust Association 0ther L Year of formation: C M State of legal domain N 1 1 1 1 1 1 1 1 1	return	City or town, state or province, country, and ZIP or foreign postal code)	G Gross receipts \$	8,232,284
F Name and address of principal officer. NO. SANTELLIT. SANTELLI	F Name and address of principal officer. NOBERT SAM SELDII Tax-exempt status:	Lltion				
Tax-exempt status:	Taxeexempt status: XI 5016(3)	pone	F Name and address of principal officer. RUDERT SANTELLLI			···
J Website: ▶ WWW .GRAMMYMUSEUM .ORG Form of organization: X Corporation	J Websites: ▶ WWW. GRAMMYMUSEUM. ORG Hick Group exemption number ► N/A			-V4)	1 ' '	
Report of organization: X Corporation Trust Association Other Lyear of formation: 20 07 M State of legal domicile:	Form of organization: X Corporation Trust Association Other L Year of formation: 2 0 0 7 M State of legal domicile Part I Summary			1)(1) or 52 <i>1</i>		
Briefly describe the organization's mission or most significant activities: THE GRAMMY MUSEUM CELEBRATES THE LEGACY OF MUSIC, THE RECORDING PROCESS, AND THE GRAMMY AWARDS. Briefly describe the organization's mission or most significant activities: THE GRAMMY MUSEUM CELEBRATES THE LEGACY OF MUSIC, THE RECORDING PROCESS, AND THE GRAMMY AWARDS. Check this box	Briefly describe the organization's mission or most significant activities: THE GRAMMY MUSEUM CELEBRATES THE LEGACY OF MUSIC, THE RECORDING PROCESS, AND THE GRAMMY AWARDS. Check this box I the organization discontinued its operations or disposed of more than 25% of its net assets.			I Voor		
Briefly describe the organization's mission or most significant activities: THE GRAMMY MUSEUM CELEBRATES THE LEGACY OF MUSIC, THE RECORDING PROCESS, AND THE GRAMMY AWARDS. 2. Check this box b. If the organization discontinued its operations or disposed of more than 25% of its net assets. 3. Number of voting members of the governing body (Part VI, line 1a) 4. Number of independent voting members of the governing body (Part VI, line 1b) 5. Total number of independent voting members of the governing body (Part VI, line 1b) 6. Total number of voting members of the governing body (Part VI, line 1b) 7. Total unrelated business revenue from Part VIII, column (C)(D) The Column (Part VIII) 8. Contributions and grants (Part VIII, line 1h) 9. Prior Year Current Year 7. Total unrelated business taxable income from Form SSOT_lines 10. Investment income (Part VIII, line 1h) 10. Investment income (Part VIII, line 1h) 11. Other revenue (Part VIII, column (A), lines 3, 4, land 74000000000000000000000000000000000000	1 Bitefly describe the organization's mission or most significant activities: THE GRAMMY MUSEUM CELEBRATES THE LEGACY OF MUSIC, THE RECORDING PROCESS, AND THE GRAMMY AWARDS. 2 Check this box			IL Teal	oriorination. 2007 M	State of legal dofficile.
LEGACY OF MUSIC, THE RECORDING PROCESS, AND THE GRAMMY AWARDS. 2 Check this box	LEGACY OF MUSIC, THE RECORDING PROCESS, AND THE GRAMMY AWARDS. Check this box Lift the organization discontinued its operations or disposed of more than 25% of its net assets. Number of independent voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2013 (Part V, line 2a) Total number of voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2013 (Part V, line 2a) To Total number of voting members of the governing body (Part VI, line 1b) Not unrelated business travable income from Form 950 T, Jine 27 To Total number of voting members of the governing body (Part VI, line 1b) Program service revenue (Part VIII, line 1h) NOV 2 4 2014 NOV 2 4 2014 To Check this box Program service revenue (Part VIII, line 1h) NOV 2 4 2014 NOV 2 4 2014 NOV 2 4 2014 To Check this box Program service revenue (Part VIII, line 1h) Program service revenue (Part VIII, line 1h) NOV 2 4 2014 NOV 2			E GRAMMY	MUSEUM CELE	BRATES THE
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11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 16e, and 11e) 9, 429, 504 7, 853, 37 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 9, 429, 504 7, 863, 37 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 0. 15 Salanes, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0. 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. 17 Other expenses (Part IX, column (A), line 25) 176, 183. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 10, 209, 605. 9, 872, 01. 19 Revenue less expenses. Subtract line 18 from line 12 10, 209, 605. 9, 872, 01. 20 Total assets (Part X, line 16) 19, 365, 857. 17, 092, 16. 21 Total liabilities (Part X, line 26) 11, 891, 734. 11, 626, 67. 22 Net assets or fund balances. Subtract line 21 from line 20 7, 474, 123. 5, 465, 48. Part II Signature Block Under penalties of perjury, I declar that have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it true, correct, and complete. Declaration of the preparation of which preparer has any knowledge. Sign Here ROBERT SANTELLI, EXECUTIVE DIRECTOR Type or print name and title	11 Other revenue (Part VIII, column (A), lines 5, 64, 8c, 9c, 16c, and 1167, 10 247, 859, 108, 2. 12 Total revenue add lines 8 through 11 (must equal Part VIII, column (A), line 12) 9, 429, 504, 7, 863, 3 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 15 Salanes, other compensation, employee benefits (Part IX, column (A), line 5-10) 0 16a Professional fundraising expenses (Part IX, column (A), line 11e) 0 17 Other expenses (Part IX, column (A), line 11e) 176, 183. 18 Total expenses (Part IX, column (A), line 11d, 11f-24e) 10, 209, 605, 9, 872, 0 19 Revenue less expenses. Subtract line 18 from line 12 10, 209, 605, 9, 872, 0 19 Revenue less expenses. Subtract line 18 from line 12 10, 209, 605, 9, 872, 0 19 Revenue less expenses. Subtract line 18 from line 12 10, 209, 605, 9, 872, 0 10 Total assets (Part X, line 16) 10, 209, 605, 9, 872, 0 11 Revenue less expenses. Subtract line 18 from line 12 11, 891, 734, 11, 626, 6 11 Revenue less of fund balances. Subtract line 21 from line 20 11, 891, 734, 11, 626, 6 11 Revenue less expenses. Subtract line 21 from line 20 7, 474, 123, 5, 465, 4 Part II Signature Block 10, 20, 20, 20, 20, 20, 20, 20, 20, 20, 2	<u>ۇ</u> 10	Investment income (Part VIII, column (A), lines 3, 4, and 7d Cornell (Part VIII, column (A), lines 3, 4, and 7d			
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Part II Signature Block Under penalties of perjury, I declare that have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it true, correct, and complete. Declaration of preparary (Afford than officer) is based on all information of which preparer has any knowledge. Sign Here ROBERT SANTELLI, EXECUTIVE DIRECTOR Type or print name and title	Part II Signature Block Under penalties of perjury, I declare that have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, true, correct, and complete. Declaration of preparative than officer) is based on all information of which preparer has any knowledge. Sign Signature of officer ROBERT SANTELLI, EXECUTIVE DIRECTOR Type or print name and title Print/Type preparer's name Preparer's signature Date 10-24-14 officer self-employed P0054565 Preparer Firm's name DELOITTE TAX LLP Firm's address 350 SOUTH GRAND AVE.	₹ 21			11,891,734.	,,
Under penalties of perjury, I declare that have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it true, correct, and complete. Declaration of preparer (Affect than officer) is based on all information of which preparer has any knowledge. Sign Here ROBERT SANTELLI, EXECUTIVE DIRECTOR Type or print name and title	Under penalties of perjury, I declare that have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, true, correct, and complete. Declaration of preparation of the preparer has any knowledge. Sign ROBERT SANTELLI, EXECUTIVE DIRECTOR Type or print name and title Print/Type preparer's name DIANA J. MCCUTCHEN Preparer's signature DIANA J. MCCUTCHEN Preparer's signature DIANA J. MCCUTCHEN Prim's name DELOITTE TAX LLP Firm's address 350 SOUTH GRAND AVE.	<u> </u>			7,474,123.	5,465,485
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Sign Here ROBERT SANTELLI, EXECUTIVE DIRECTOR Type or print name and title	Sign Here Signature of officer Date					knowledge and belief, it is
Sign Here ROBERT SANTELLI, EXECUTIVE DIRECTOR Type or print name and title	Sign Here Signature of officer ROBERT SANTELLI, EXECUTIVE DIRECTOR Type or print name and title Print/Type preparer's name DIANA J. MCCUTCHEN Preparer Prim's name DELOITTE TAX LLP Use Only Firm's address 350 SOUTH GRAND AVE.	true, corre	ct, and complete. Declaration of preparer (b) Her than officer) is based on all information	of which prepare	r has any knowledge.	
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Type or print name and title	Print/Type preparer's name Print/Type preparer's name Date 10-24-14 Print/Type preparer's name DIANA J. MCCUTCHEN Preparer Firm's name DELOITTE TAX LLP Use Only Firm's address 350 SOUTH GRAND AVE.		1	•	Date / ()	
Data Transfer of the Control of the	Print/Type preparer's name Print/Type preparer's name Date 10-24-14 Check PTIN	Here		-		<u> </u>
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	May the IRS discuss this return with the preparer shown above? (see instructions)	Mentalis	<u> </u>		Triiolie iiu. (2 1	

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2013)

Form	990 (2013) GRAMMY MUSEUM FOUNDATION, INC.	26-1447714	Page 2
Pai	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission:	·	
•	THE GRAMMY MUSEUM EXPLORES AND CELEBRATES THE ENDURING	LEGACTES OF	ALL
	FORMS OF MUSIC, THE CREATIVE PROCESS, THE ART AND TECHN		
	RECORDING PROCESS, AND THE HISTORY OF THE GRAMMY AWARDS		
		, THE PREMI	EK
	RECOGNITION OF RECORDED MUSIC ACCOMPLISHMENT.		
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ?	Y€	s 🛣 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?		s X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as	measured by eynens	202
•	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other		
		sis, the total expense	5, and
_	revenue, if any, for each program service reported. (Code) (Expenses \$ 6,415,172 • including grants of \$) (Reven	1 040	,976.)
4a			
	GENERAL ADMISSIONS: MAINTAINING AND OPERATING THE GRAM		
	PROVIDE A ONE-OF-A-KIND EXPERIENCE FOR THE PUBLIC THAT		
	CREATIVE PROCESS, THE HISTORY OF MUSIC AND THE GRAMMY A	WARDS, AS W	ELL
	AS CULTURAL UNDERSTANDING.		
		•	
			
	246 102	004	<u> </u>
4b	(Code) (Expenses \$ 246, 183. including grants of \$) (Reven		,612. ₎
	CURATORIAL SERVICES: SERVICES PROVIDED ON SETTING UP AN		
	TRAVELING EXHIBITS, WHICH WERE CONSTRUCTED FOR THE GRAM		URING
	THE YEAR OR A PRIOR PERIOD, AND THEN TRANSPORTED TO AND		
	TEMPORARILY IN ANOTHER MUSEUM-TYPE LOCATION. SERVICES	ALSO PROVID	ED IN
	ASSISTING THIRD PARTIES IN PROMOTING MUSIC EDUCATION AN	D DEVELOPME	NT
	OUTSIDE THE GRAMMY MUSEUM'S LOCATION IN LOS ANGELES, CA	•	,
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		 -	
			
			
	201 720	202	E70
4c	(Code) (Expenses \$ 201,728 · including grants of \$) (Revent		,570·)
	PUBLIC PROGRAM: THE GRAMMY MUSEUM HOSTS A WIDE RANGE OF		
	IN THE MUSEUM'S SOUND STAGE THEATRE AND THROUGHOUT THE		PUS,
	WHERE THE GRAMMY MUSEUM IS LOCATED. PROGRAMS INCLUDE AR'	<u> </u>	
	INTERVIEWS, LIVE PERFORMANCES, FILM SERIES, LECTURES,		
	ARTIST-IN-RESIDENCE PROGRAMS, CONTINUING EDUCATION CLAS	SES, TOWN H	ALL
	MEETINGS, SPECIAL CONCERT SERIES, RECORD LABEL SHOWCASE	S, AND	
	CURATORIAL-RELATED PROGRAMS. ALL PROGRAMS ARE RECORDED		T ₁
	PURPOSES TO SHARE WITH THE PUBLIC.		
	TORTOBLE TO BIRKE WITH THE TOREIC.		
	<u> </u>		
4d	Other program services (Describe in Schedule O.)		
	(Expenses \$ 435,356 • including grants of \$) (Revenue \$	576,186. ₎	
4e	Total program service expenses ► 7,298,439.	· · · · · · · · · · · · · · · · · · ·	
		Form	990 (2013)
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	990 (2013) GRAMMY MUSEUM FOUNDATION, INC. 26-1447	7714	Р	age 3
Pai	rt IV Checklist of Required Schedules			
	·		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	,	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3	<u> </u>	X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect		!	
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	<u> </u>	X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	1	 	
	Schedule D, Part III	8	X	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	х	
þ	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		X
C	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	1.10	\vdash	 -
4	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	x	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
þ	Was the organization included in consolidated, independent audited financial statements for the tax year?	Ì	i 1	Í
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	 	X
14a		14a	<u> </u>	Х
p	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	i		ĺ
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
4.5	or more? If "Yes," complete Schedule F, Parts I and IV	14b	 	X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	1	I	I

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X

16

17

18

19

20a

X

X

X

 $\overline{\mathbf{x}}$

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 of gross income from gaming activities on Part-Vill, line 9a? If "Yes,"

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines

complete Schedule G, Part III

foreign organization? If "Yes," complete Schedule F, Parts II and IV

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I

1c and 8a? If "Yes," complete Schedule G, Part II

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

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· ·	officerist of frequired seriodates (continues)			
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government 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 or 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		X
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 25a	24a		X
	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	İ		
	any tax-exempt bonds?	24c		
	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		X
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		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			
	complete Schedule L, Part II	26		X
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 entity or family member	ļ		٠,,
	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, 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		X
b		28b		
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,		v	ļ
	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		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			x
	contributions? If "Yes," complete Schedule M	30	_	
31	Did the organization liquidate, terminate, or dissolve and cease operations?	۱.,		x
	If "Yes," complete Schedule N, Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			x
	Schedule N, Part II	32	-	
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	22		x
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	24	х	
	Part V, line 1	34 35a		х
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	33a	├	
ь	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	35b		
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	330		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	36		x
	If "Yes," complete Schedule R, Part V, line 2	36	_	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
-00	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	\ <u> </u>	 	
38	Note. All Form 990 filers are required to complete Schedule O	38	х	
	Table: Will form too high air induling to combine controlling	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		

Par	Check if Schedule O contains a response or note to any line in this Part V			
	Onder it contours a respente of the court, the first term of the court		Yes	No
10	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 1b 0	. 1		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
·	(gambling) winnings to prize winners?	1c	x	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 0	. [
ь	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 (see instructions)			
За		3a	Х	
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b	X	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	.		
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country: ▶	. 1	-	
	See instructions for 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
þ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			7.7
	any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			ĺ
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).		х	ĺ
а	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 7b	X	
þ	If "Yes," did the organization notify the donor of the value of the goods or services provided?	70		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7c		Х
	to file Form 8282? If "Yes " indicate the number of Forms 8282 filed during the year 7d 7	-~ -		
ď	If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
e f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	N/	A
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	N/	A
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting N/A			
•	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		ĺ
9	Sponsoring organizations maintaining donor advised funds.			
а	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? N/A	9b		
10	Section 501(c)(7) organizations. Enter:			l
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders N/A 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)	1	 	
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b		,	l
13	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? N/A	13a		-
а	10 die organization noonood to record quantity present according to	138		
L	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			
_	organization is licensed to issue qualified health plans Enter the amount of reserves on hand 13c			
с 14а	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
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Part VI | Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 15 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 Х 2 officer, director, trustee, or key employee? Did the organization delegate control over management duties customanly performed by or under the direct supervision X of officers, directors, or trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? 5 5 6 X Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or X more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or Х persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8 X 8a a The governing body? X **b** Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the X organization's mailing address? If "Yes," provide the names and addresses in Schedule O 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes Nο X 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe X in Schedule O how this was done 12c X 13 13 Did the organization have a written whistleblower policy? X 14 Did the organization have a written document retention and destruction policy? 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? Х a The organization's CEO, Executive Director, or top management official 15a X 15b b Other officers or key employees of the organization 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 arrangement with a X 16a taxable entity during the year? b If "Yes." did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed CA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available 18 for public inspection. Indicate how you made these available. Check all that apply. X Upon request Another's website __ Own website Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial 19 statements available to the public during the tax year. State the name, physical address, and telephone number of the person who possesses the books and records of the organization: MAS MATSUMOTO - 213-742-7169 800 W. OLYMPIC BLVD SUITE 305, LOS ANGELES, 90015-0000

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

Employees, and Independent Contractors

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 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.

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

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

Nours per Nour	(A)	(B)	J. 3 0		((C)			(D)	(E)	(F)
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Delow Second Delow Second Sec			ordire			İ	page 1		organization	(W-2/1099-MISC)	
Delow Second Delow Second Sec			rstea	truste			bens		(W-2/1099-MISC)		_
(1) TIM LEWERE (THROUGH MAY 2013)			ualtr	Sonal		e de	E e d	١.			
(1) TIM LEWERE (THROUGH MAY 2013)		1	ndivid	nstitut	Жисви	(ey em	de la la la la la la la la la la la la la	- Giller			·
C2 SEAN DEE (THROUGH MAY 2013) D.20 X	(1) TIM LEIWEKE (THROUGH MAY 2013)	0.20	-					_			
BOARD MEMBER	VICE CHAIR	-	X		X	İ	İ	l	0.	0.	0.
Calif Forthow	(2) SEAN DEE (THROUGH MAY 2013)	0.20							İ		
CHAIR	BOARD MEMBER		X				İ		0.	0.	0.
(4) WAYNE ZAHNER	(3) NEIL PORTNOW										
BOARD MEMBER	CHAIR		X		X				0.	990,006.	65,330.
STAY MARCIANO DO.20 X	(4) WAYNE ZAHNER										
BOARD MEMBER	BOARD MEMBER		X						0.	285,863.	30,453.
GO NEN EHRLICH DO. 20 X DO. DO. DO. DO.	(5) JAY MARCIANO	0.20									
BOARD MEMBER	BOARD MEMBER		X						0.	0.	0.
TED PIKRE	(6) KEN EHRLICH	0.20									
ASSISTANT SECRETARY	BOARD MEMBER		X						0.	0.	0.
Card Member	(7) TED FIRRE	0.20						1			
BOARD MEMBER	ASSISTANT SECRETARY		X		X				0.	0.	0.
CAROLYN POWERS	(8) JOHN BRANCA	0.20				l					
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Tensor T	(9) CAROLYN POWERS								_		
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SECRETARY			X				<u> </u>		0.	0.	0.
(16) BRANDEN CHAPMAN 0.20 BOARD MEMBER 40.00 X 0.271,929.42,080. (17) GISELLE PERNANDEZ 40.00 X 0.00.0. BOARD MEMBER 1.00 X 0.00.0.			ا ا					1	1		
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(17) GISELLE FERNANDEZ 40.00 X 0. 0. 0.			, ,							071 000	40.000
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			,,			l					_
	BOARD MEMBER 332007 10-29-13	1.00	A			<u> </u>	<u> </u>		0.	0.	Form 990 (2013)

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Part VII Section A. Officers, Directors, Tru		ploy	/ees	, an	d Hi	ighe	st (Compensated Employe	es (continued)	—-			
` (A)	(B)				C)	_		(D)	(E)	1		(F)	
Name and title	Name and title Average hours per box, unless pers week Average floa not check for and a dire			more	than	one	Reportable	Reportable			timate		
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	(list any	<u></u>	Π	Г	Г	Τ	T	from the	from related organizations			other pensa	tion
	hours for	dieci					1	organization	(W-2/1099-MIS			om th	
	related	10 88	stee	l		nsate		(W-2/1099-MISC)	(~		anızat	
	organizations	trust	를	1	8	Ē	ĺ	()		ĺ	_	d relat	
	below	Individual trustee or director	Institutional trustee	 <u> </u>	Key employee	Highest compensated employee	Former			ŀ	orga	ınızatı	ons
	line)	亨	重) Jige	ě	물통	ফ						
(18) TODD GOLDSTEIN	0.20	ļ	ļ	l						_			_
BOARD MEMBER	1 10 00	X	ļ	_	<u> </u>	<u> </u>	┡	0.		0.			0.
(19) ROBERT SANTELLI	40.00			١.,				447 156		_			
EXECUTIVE DIRECTOR	1 2 00	╄	<u> </u>	X	▙	┞	┝	447,156.		0.	4	0,5	77.
(20) MAS MATSUMOTO	2.00	4	Ì		l		ł			_			_
CFO CFO	40.00	-	├	X	⊢		┡	0.		0.			0.
(21) RITA GEORGE	40.00	-]	l	ļ	x	}	152 250		۱ ۸	2	2 2	20
DEPUTY DIRECTOR (22) LYNNE SHERIDAN	40.00	-	-	_	-	1	├	153,358.		0.		2,3	30.
•	40.00	┨	ŀ		1	X		106,589.		0.	2	4,4	70
SENIOR MANAGER, PUBLIC PROGRAMS	 	-	⊢	├	H	<u> </u>	←	100,309.		- 1		4,4	13.
		┨	ŀ		l		1			- 1			
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	 	ĺ	1			l	ľ						
1b Sub-total	<u></u>			Ь				707,103.	1,547,79	8.	22	5,2	57.
c Total from continuation sheets to Part V	/II. Section A		•		•		•	0.		0.		,	0.
d Total (add lines 1b and 1c)	,						•	707,103.	1,547,79	8.	22	5,2	57.
2 Total number of individuals (including but	not limited to th	nose	liste	ed a	bove	e) w	ho r	eceived more than \$100					
compensation from the organization	•					•		·	,				3
												Yes	No
3 Did the organization list any former officer	r, director, or tn	uste	e, ke	y er	mplo	yee	, or	highest compensated e	mployee on	Γ			
line 1a? If "Yes," complete Schedule J for	such individual									L	3		Х
4 For any individual listed on line 1a, is the s	um of reportab	le c	omp	ensa	atior	n and	d ot	her compensation from	the organization	П]	_
and related organizations greater than \$15	50,000? If "Yes,	," со	mpl	ete S	Sche	edul	e J	for such individual		L	4	Х	
5 Did any person listed on line 1a receive or							relat	ted organization or indiv	dual for services		1		
rendered to the organization? If "Yes," cor	nplete Schedul	e <i>J</i> 1	or s	uch	pers	son					5	X	
Section B. Independent Contractors													
1 Complete this table for your five highest c	•	•							•	pensa	ation f	rom	
the organization. Report compensation for	r the calendar y	ear	end	ng v	vith	or w	nthii		year.				
(A) Name and busines:	o addrasa	B.T.	~ & T 1				J	(B) Description of s	onicos	<u> </u>	(C		_
Ivalité di di Dusirles	s address	14(INC	<u> </u>			\dashv	Description of s	ervices		omper	isatio	<u> </u>
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							ł		ł				
2 Total number of independent contractors	(including but r	not li	mıte	d to	tho	se li	ster	d above) who received m	ore than				_
\$100,000 of compensation from the organ		"				0		,					
										·	Form	990 (2013)

26-1447714 GRAMMY MUSEUM FOUNDATION, INC. Page 9 Form 990 (2013) Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D)
Revenue excluded from tax under sections
512 - 514 (B) (C) Related or Unrelated Total revenue exempt function business revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a 251,957. 1b **b** Membership dues 521,000. c Fundraising events 1c 234,000. 1d d Related organizations 184,000. e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 1f 3,856,063 141,570. g Noncash contributions included in lines 1a-1f \$ 5,047,020 h Total. Add lines 1a-1f Business Code 2 a GENERAL ADMISSION 900099 1,040,976 1,040,976 Program Service Revenue 900099 CURATORIAL SERVICES 924,612 924,612. 293,570. 900099 PUBLIC PROGRAM 293,570. FACILITY RENTAL 900099 271,297 271,297. EDUCATION 900099 133,698 133,698 f All other program service revenue 2,664,153. g Total. Add lines 2a-2f ▶ Investment income (including dividends, interest, and 43,980 43,980. other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 6 a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) (ii) Other 7 a Gross amount from sales of (i) Securities assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) \triangleright 8 a Gross income from fundraising events (not Revenue 521,000. of including \$ contributions reported on line 1c). See Part IV, line 18 29,500 Other 175,257 b Less: direct expenses -145,757. -145,757. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See

7,863,374. 2,835,344. 82,787. -101,777. Form **990** (2013)

82,787

198,787

55,191

55,191,

а

392,440

193,653

Business Code

900099

Part IV, line 19

and allowances

11 a MISCELLANEOUS

d All other revenue

b

332009 10-29-13 b Less: cost of goods sold

e Total. Add lines 11a-11d

Total revenue. See instructions.

b Less: direct expenses

c Net income or (loss) from gaming activities

c Net income or (loss) from sales of inventory

Miscellaneous Revenue

10 a Gross sales of inventory, less returns

116,000

55,191

Form 990 (2013) GRAMMY MUSEUM
Part IX Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must com	plete all columns. All oth	ner organizations must co	omplete column (A).	
	Check if Schedule O contains a respon	nse or note to any line in			
	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	· -			
	organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in]		
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified		İ		
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				,
7	Other salaries and wages			·	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroli taxes				
11	Fees for services (non-employees):	886,096.	664 572	221,524.	
	Management	45,595.	664,572. 45,595.		
b	Legal	81,068.	43,393.	81,068.	
	Accounting	01,000.			
a	Lobbying Professional fundraising services. See Part IV, line 17				
e	Investment management fees				
	Other. (If line 11g amount exceeds 10% of line 25,				
9	column (A) amount, list line 11g expenses on Sch 0.)	44,858.	44,858.		
12	Advertising and promotion	44,858. 349,507.	44,858.	87,377.	
13	Office expenses	122,119.	89,759.	29,920.	2,440.
14	Information technology	41,407.	31,055.	10,352.	
15	Royalties				
16	Occupancy	2,179,559.	1,634,336.	544,779.	444.
17	Travel .	184,434.	133,430.	44,475.	6,529.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials		···		
19	Conferences, conventions, and meetings	0.1.5 0.0.0		160 615	
20	Interest	215,808.	55,191.	160,617.	
21	Payments to affiliates	2 022 701	1 505 343	500 440	
22	Depreciation, depletion, and amortization	2,033,791.	1,525,343.	508,448.	E177
23	Insurance	651,437.	488,190.	162,730.	517.
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	LEASED WORKFORCE	1,815,618.	1,291,097.	430,366.	94,155.
ь	EVENT OPERATING	757,779.	685,681.		72,098.
c	SPONSORSHIP FULFILLMENT	347,284.	260,463.	86,821.	
d	VALUE IN KIND - GOODS	86,261.	64,696.	21,565.	
е	All other expenses	29,391.	22,043.	7,348.	
25	Total functional expenses. Add lines 1 through 24e	9,872,012.	7,298,439.	2,397,390.	176,183.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined]		
	educational campaign and fundraising solicitation.		į		
	Check here if following SOP 98-2 (ASC 958-720)	<u> </u>	<u> </u>		

Pa	rt X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X .			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	1,538,162.	1	1,528,674.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net	1,857,792.	3	1,096,048.
	4	Accounts receivable, net	1,173,517.	4	1,428,294.
	5	Loans and other receivables from current and former officers, directors,		 	
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under	· -		
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contribution			
		employers and sponsoring organizations of section 501(c)(9) voluntary	9		
Ø		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use	73,767.	8	80,592.
	9	Prepaid expenses and deferred charges	66,356.	9	72,971.
	10a	Land, buildings, and equipment: cost or other		<u> </u>	
	100	basis. Complete Part VI of Schedule D 10a 19,912,418			
	ь	Less: accumulated depreciation 10b 10,597,057		10c	9,315,361.
	11	Investments - publicly traded securities	 	11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	3,556,222.	15	3,570,222.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	19,365,857.	16	17,092,162.
	17	Accounts payable and accrued expenses	633,330.	17	725,726.
	18	Grants payable		18	
	19	Deferred revenue	592,577.	19	526,700.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	·
Š	22	Loans and other payables to current and former officers, directors, trustees,			
ij		key employees, highest compensated employees, and disqualified persons			
Liabilities		Complete Part II of Schedule L		22	
Ξ	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
	1	parties, and other liabilities not included on lines 17-24). Complete Part X of			
		Schedule D	10,665,827.		10,374,251.
	26	Total liabilities. Add lines 17 through 25	11,891,734.	26	11,626,677.
	1	Organizations that follow SFAS 117 (ASC 958), check here			ļ
es		complete lines 27 through 29, and lines 33 and 34.	1		
anc	27	Unrestricted net assets	5,570,605.		4,325,303.
Bal	28	Temporanly restricted net assets	1,903,518.	28	1,140,182.
2	29	Permanently restricted net assets		29	0.
Œ.	[.	Organizations that do not follow SFAS 117 (ASC 958), check here		[
ğ	1	and complete lines 30 through 34.			
30ts	30	Capital stock or trust principal, or current funds		30	
As	31	Paid-in or capital surplus, or land, building, or equipment fund	ļ	31	ļ
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds	7 47 4 100	32	F 465 405
~	33	Total net assets or fund balances	7,474,123.	33	5,465,485.
	34	Total liabilities and net assets/fund balances	19,365,857.	34	17,092,162.

Form 990 (2013)

Form	990 (2013) GRAMMY MUSEUM FOUNDATION, INC.	26-14	47714	Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1 2 3 4 5 6 7 8 9	Total revenue (must equal Part VIII, column (A), line 12) Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) Net unrealized gains (losses) on investments Donated services and use of facilities Investment expenses Prior period adjustments Other changes in net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,	1 2 3 4 5 6 7 8 9	7,86 9,87 -2,00 7,47	2,0 8,6	12. 38.
	column (B))	10	5,46	5,4	85.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
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	e O.		Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X_
b	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant?	d on a	2ъ	x	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separation consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the separate basis.	·			
U	review, or compilation of its financial statements and selection of an independent accountant?	io audit,	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O	20		-
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si Act and OMB Circular A-133?		3a		х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audits, explain why in Schedule O and describe any steps taken to undergo such audits.	ured audit	3b		

Form **990** (2013)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

➤ Attach to Form 990 or Form 990-EZ.

Information about Schedule A (Form 990 or 990-EZ) and its Instructions is at www irs qov/form990.

2013

Open to Public Inspection

Name of	the organizati	ion						E	Employer	identification number
		GRAMMY	MUSEUM FOUNI	DATION	I, INC	! .				6-1447714
Part I	Reason	for Public Char	rity Status (All organiz	zations mu	st comple	te this par	t.) See ins	tructions.		
The organ		~	because it is: (For lines							
1 🔲	A church, co	nvention of churche	s, or association of chui	rches desc	nbed in se	ction 170	(b)(1)(A)(i) .		
2 🗀	A school des	cnbed in section 17	70(b)(1)(A)(ii). (Attach Sc	chedule E.)						
з 🗀	A hospital or	a cooperative hospi	rtal service organization	described	ın section	170(b)(1)	(A)(iii).			
4 🗀	A medical res	search organization	operated in conjunction	with a hos	spital desc	nbed in se	ction 170	(b)(1)(A)(i	iii). Enter	the hospital's name,
	city, and stat	e:								
5	An organizati	on operated for the	benefit of a college or u	niversity o	wned or or	perated by	a govern	mental ur	nit describ	oed in
	section 170	(b)(1)(A)(iv). (Comple	ete Part II.)							
6	A federal, sta	ite, or local governm	nent or governmental uni	it describe	d in sectio	n 170(b)(1)(A)(v).			
7 📖	An organizati	ion that normally rec	eives a substantial part	of its supp	ort from a	governme	ental unit o	or from the	e general	public described in
	section 170(b)(1)(A)(vi). (Comple	ete Part II.)							
8 🖳	A community	trust described in s	section 170(b)(1)(A)(vi).	(Complete	Part II.)					
9 📖	An organizati	ion that normally rec	eives: (1) more than 33	1/3% of its	support f	rom contri	butions, n	nembersh	np fees, a	and gross receipts from
	activities rela	ted to its exempt fui	nctions - subject to certa	aın exceptı	ons, and (2) no more	than 33	1/3% of rt	s suppor	t from gross investment
			axable income (less sec	tion 511 ta	ix) from bu	sinesses a	acquired b	y the org	anızation	after June 30, 1975.
		509(a)(2). (Complete	•							
10	-	•	perated exclusively to te	-	-			•		_
11 X	_	-	perated exclusively for the		· ·				•	•
			ations described in secti				2). See se d	ction 509	(a)(3). Ch	eck the box that
			organization and compl		_		_		111 - 11-	- 6
•	a X Type I		ype II	ype III - Fu	•	•				n-functionally integrated
e 📖	-	•	than one or more publicl							
f		=	tten determination from)3(a)(1) UI	36C11011 303(a)(z).
•	_	rganization, check th		uie ii io uii	at it is a 1y	pe i, Type	ii, or Typi	5 111		
g		•	organization accepted a	ny aift or c	ontobution	· from anv	of the foll	owina ne	rsons?	<u></u>
9	•		directly controls, either a			-				, Yes No
			upported organization?		,041,07 11141	pe. e e		(,	(, 20.01.	11g(i) X
	-	•	n described in (i) above?	?						11g(ii) X
		,	person described in (i)		e?					11g(iii) X
h			about the supported or							
		,		•						
(i) Name	of supported	(ii) EIN	(iii) Type of organization	(iv) Is the o	organization		ı notify the	(vi) [s the	(vii) Amount of monetary
	anization	(-,,	(described on lines 1-9	in col. (i) i			ion in col.	organizat (i) organi	zed in the	support
		}	above or IRC section (see instructions))	governing	document?	(i) oi youi	r support?	0.8	S.?	
		<u> </u>	(000 111011 00110110))	Yes	No	Yes	No	Yes	No	
NATIO				İ			İ	İ	1	
ACADE	MY OF R	95-6052058	501(C)(6)	X			 	X		0.
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		<u> </u>		<u> </u>	<u> </u>		<u> </u>			
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Total	1		J II	1	}		1	ł	1	0.
Total		duction Act Notice	e, see the Instructions 1	for	<u> </u>		L	Schod	IA A (Ear	m 990 or 990-EZ) 2013
	The MANY UA	,	, 550 are manucuons l	· • · ·				Solican	~ (FUI	・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・

332021 09-25-13

Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2013 GRAMMY MUSEUM FOUNDATION, INC. 26-1447714 Page 2

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

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

Sec	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total	
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")				L			
2	Tax revenues levied for the organ-							
	ization's benefit and either paid to		i					
	or expended on its behalf							
3	The value of services or facilities							
	furnished by a governmental unit to			Ì				
	the organization without charge							
4	Total. Add lines 1 through 3				ļ	<u> </u>		
5	The portion of total contributions			Ì				
	by each person (other than a							
	governmental unit or publicly			ļ				
	supported organization) included				1			
	on line 1 that exceeds 2% of the			1				
	amount shown on line 11,	1						
	column (f)				ļ	ļ		
	Public support. Subtract fine 5 from line 4			<u> </u>	<u> </u>			
	tion B. Total Support		7,2010		1 1 2 2 2 2	1 1 2 2 2 2	40.7	
	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total	
-	Amounts from line 4							
8	Gross income from interest,			1		}		
	dividends, payments received on							
	securities loans, rents, royalties	ļ		İ				
_	and income from similar sources				ļ	 		
9	Net income from unrelated business				İ			
	activities, whether or not the							
40	business is regularly carried on							
10	Other income. Do not include gain							
	or loss from the sale of capital							
44	assets (Explain in Part IV.) Total support. Add lines 7 through 10			 				
	Gross receipts from related activities,	etc (see instructs	one)			12		
	First five years. If the Form 990 is for			rd fourth or fifth t	av vaar as a soctu			
13	organization, check this box and stor	•	3 m3t, 3600ma, tm	ia, ioarai, or mart	ax your as a scott	3/1 30 1 (0)(0)		
Sec	tion C. Computation of Publ	ic Support Pe	rcentage		. 			
14	Public support percentage for 2013 (line 6. column (f) d	ryided by line 11.	column (fl)		14	%	
	Public support percentage from 2012					15	%	
	Ga 33 1/3% support test - 2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and							
	stop here. The organization qualifies as a publicly supported organization							
þ	b 33 1/3% support test - 2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box							
	and stop here. The organization qual	lifies as a publicly s	supported organiz	ation			▶□	
17a	10% -facts-and-circumstances tes	•	• •		e 13, 16a, or 16b,	and line 14 is 10%	or more,	
	and if the organization meets the "fac	cts-and-circumstan	ces" test, check t	his box and stop !	here. Explain in Pa	rt IV how the organ	ization	
	meets the "facts-and-circumstances"				•	J	ightharpoons	
b	10% -facts-and-circumstances tes	t - 2012. If the org	anization did not	check a box on lin	e 13, 16a, 16b, or	17a, and line 15 is	10% or	
	more, and if the organization meets ti	ne "facts-and-circu	ımstances" test, o	heck this box and	stop here. Explai	n in Part IV how the	•	
	organization meets the "facts-and-cire	cumstances" test.	The organization	qualifies as a publ	icly supported org	anızation	ightharpoons	
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17	b, check this box	and see instruction	s >	
					Sch	edule A (Form 990	or 990-FZ\ 2013	

	(Complete only if you checked			organization tailed	to quality under P	art II. If the organiza	ation fails to	
Se	qualify under the tests listed be ction A. Public Support	elow, please com	plete Part II.)					
_	endar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total	
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")							
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose							
3	Gross receipts from activities that are not an unrelated trade or bus-			}	: : :			
	iness under section 513							
4	Tax revenues levied for the organ- ization's benefit and either paid to							
	or expended on its behalf				ļ			
5	The value of services or facilities furnished by a governmental unit to							
_	the organization without charge Total. Add lines 1 through 5	<u> </u>		 		 		
	Amounts included on lines 1, 2, and			 		 	· · · · · · · · · · · · · · · · · · ·	
,,	3 received from disqualified persons							
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year		<u> </u>				-	
	Add lines 7a and 7b							
8	Public support (Subtract line 7c from line 6)							
Se	ction B. Total Support							
Cale	endar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total	
	Amounts from line 6 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
t	Unrelated business taxable income]			
	(less section 511 taxes) from businesses acquired after June 30, 1975							
	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on							
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)		L			1		
14	First five years. If the Form 990 is for	r the organization's	s first, second, thi	rd, fourth, or fifth t	ax year as a secti	on 501(c)(3) organiz	ration,	
	check this box and stop here				<u></u>		<u> </u>	
<u>Se</u>	ction C. Computation of Publ	ic Support Pe	rcentage					
15	Public support percentage for 2013 (line 8, column (f) d	livided by line 13,	column (f))		15	%	
_	Public support percentage from 2012					16	%	
Se	ction D. Computation of Inve	stment Incom	e Percentage	<u> </u>				
17	•	013 (line 10c, column (f) divided by line 13, column (f))						
18	• • • • • • • • • • • • • • • • • • • •					18	<u>%</u>	
	a 33 1/3% support tests - 2013. If the more than 33 1/3%, check this box a	and stop here. The	organization qua	lifies as a publicly	supported organi	zation	▶□	
	33 1/3% support tests - 2012. If the	-						
20	line 18 is not more than 33 1/3%, che Private foundation. If the organization		-				5 5	

Schedule A	(Form 990 or 990-E	Z) 2013 GRAMMY	MUSEUM	FOUNDATION,	INC.	26-1447714 Page 4
Part IV	Supplemental	Information, Prov	ride the explai	nations required by Par	t II. line 10: Pa	26-1447714 Page 4 It II, line 17a or 17b, and Part III, line 12.
<u> </u>	Also complete this	part for any additiona	l information	(See instructions)	,	,,,,,,,,
	Also complete this	part for any additions	i inomation.	(Oce ilistractions).	 .	
				·	·	
		·				
				·- -		
						
						
						
						
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	 	* ***				
				· · · · · · · · · · · · · · · · · · ·		

SCHEDULE D

(Form 990)

Supplemental Financial Statements

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

➤ Attach to Form 990.

➤ Information about Schedule D (Form 990) and its instructions is at www.us.gov/fprm990.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

GRAMMY MUSEUM FOUNDATION, INC.

Employer identification number 26-1447714

Pai			or Accounts.Complete if the
	organization answered "Yes" to Form 990, Part IV, line		
		(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 donor advisors in	writing that the assets held in donor advised	d funds
	are the organization's property, subject to the organization's	exclusive legal control?	└─ Yes └─ No
6	Did the organization inform all grantees, donors, and donor a		sed only
	for chantable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose co	onferring
	impermissible private benefit?		Yes No
Pai	t II Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990, Pai	rt IV, line 7.
1	Purpose(s) of conservation easements held by the organization	ion (check all that apply).	
	Preservation of land for public use (e.g., recreation or e	education) Preservation of an histo	rically important land area
	Protection of natural habitat	Preservation of a certific	ed histonc structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualr	fied conservation contribution in the form of	a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str		2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structur	e
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the o	organization during the tax
	year ▶		
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the pe	nodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements i		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170(h	
	and section 170(h)(4)(B)(ii)?		L Yes
9	In Part XIII, describe how the organization reports conservat		
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes th	e organization's accounting for
	conservation easements.		0:1
Pa	rt III Organizations Maintaining Collections o		ier Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (AS		
	historical treasures, or other similar assets held for public ex		ce of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descr		
b	If the organization elected, as permitted under SFAS 116 (AS		
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of publ	ic service, provide the following amounts
	relating to these items:		
	(i) Revenues included in Form 990, Part VIII, line 1	•	
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical tre		gain, provide
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
b	Assets included in Form 990, Part X		> \$

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

Schedule D (Form 990) 2013

		MUSEUM FOU	NDAT	ION,	INC.			26-14	4771	4 P	age 2
Pai	t III Organizations Maintaining C	ollections of A	rt, His	torical T	reasures,	or Othe	er Simi	lar Asse	ts/conti	าued)	
3	Using the organization's acquisition, accessi	on, and other recor	ds, chec	k any of the	following that	at are a si	ignificant	use of its	collectio	n item	IS
	(check all that apply):										
а	X Public exhibition	•	╸ᆜᆜ	Loan or exc	change progr	ams					
þ	Scholarly research	•		Other							
C	Preservation for future generations										
4	Provide a description of the organization's co	ollections and expla	in how t	hey further	the organizati	ion's exe	mpt purp	ose in Pai	t XIII.		
5	During the year, did the organization solicit of	r receive donations	of art, h	istorical trea	asures, or oth	er similar	assets	_	_		_
	to be sold to raise funds rather than to be m								Yes		No
Par	t IV Escrow and Custodial Arran		lete if the	organizatı	on answered	"Yes" to	Form 990), Part IV,	line 9, or		
	reported an amount on Form 990, Pa										
1a	is the organization an agent, trustee, custod	an or other interme	diary for	contribution	ns or other as	sets not	included		7		7
	on Form 990, Part X?				. •			L	J Yes	L	J No
þ	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing	table:							
									Amoun	<u>t</u>	
С	Beginning balance						1c	<u> </u>			
d	Additions during the year						1d	ļ <u></u>			
е	Distributions during the year				•		1e	 			
f	Ending balance			•			1f	L	Т.		T
	Did the organization include an amount on Fo						•	_	J Yes	<u> </u>	J No
Par	If "Yes," explain the arrangement in Part XIII t V Endowment Funds. Complete i							·			<u></u>
rai	t V Endowment runds. Complete		T .		(c) Two year			years back	(=) Four		haok
4	Danis are of ward along	(a) Current year	(D) F	nor year	(c) IWU year	IS DACK	(a) Three	years back	(e) Four	years	0.
1a	Beginning of year balance		 		 						
р	Contributions				 			~			
C	Net investment earnings, gains, and losses		 		 						
d	Grants or scholarships		 								
е	Other expenditures for facilities		l								
	and programs		 		 						
'-	Administrative expenses				 						
9 2	End of year balance Provide the estimated percentage of the cur	ront year and halan		a column (all hold an:				l		
_	Board designated or quasi-endowment	ent year end balan	%	g, column (ajj rielu as.						
b	Permanent endowment	%									
C	Temporarily restricted endowment	^ %									
·	The percentages in lines 2a, 2b, and 2c shou										
32	Are there endowment funds not in the posse	•	ration th	at are held a	and administe	red for th	ne organi	zation			
Ja		331077 OF END OFGERINZ	-41011111		2110 001111111010	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	io organi	2011011	[Yes	No
	(i) unrelated organizations								3a(i)		
	(ii) related organizations								3a(ii)		
b	If "Yes" to 3a(ii), are the related organizations	s listed as required of	on Sche	dule R?					3b	\neg	
4	Describe in Part XIII the intended uses of the	·				•			لــــــــــــــــــــــــــــــــــــــ		
	t VI Land, Buildings, and Equipm										
	Complete if the organization answere	d "Yes" to Form 990), Part IV	/, line 11a. S	See Form 990	, Part X, I	line 10.				
	Description of property	(a) Cost or o	other	(b) Cos	t or other	(c) Ac	cumulat	ed	(d) Boo	k valu	
	. , ,	basis (invest			(other)		preciation				
1a	Land										
	Buildings								_		
С	Leasehold improvements				24,067.		97,9		8,12		
d	Equipment			8,68	8,351.	7,4	199,1		1,18		
<u>e</u>	Other										
	Add has to through to (Column (d) must s	Co 000 Do-	V	(D) to	10/-11		_	-	9 31	E 3	۲1

Schedule D (Form 990) 2013

Part VII	Investments -	Other Securities

Complete if the organization answered "Yes" to	o Form 990, Part IV, line	11b. See Form 990, Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)	·····	
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		
Part VIII Investments - Program Related.		
Complete if the organization answered "Yes" to		
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)	 -	
(6)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		
Part IX Other Assets.		
Complete if the organization answered "Yes" to	Form 990, Part IV, line 1	11d. See Form 990, Part X, line 15
(a) D	escription	(h) Book value

(a) Description	(b) Book value
(1) MEMORABILIA & EXHIBITS	3,570,222.
(2)	
(3)	
(4)	
(5)	
(6)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15.)	3,570,222.

Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	LOAN PAYABLE WITH LA ARENA LAND CO	4,095,749.
(3)	DEFERRED RENT LIABILITY	3,279,291.
(4)	RELATED PARTY PAYABLE WITH	
(5)	ANSCHUTZ ENTERTAINMENT GROUP, INC.	
(6)	& SUBSIDIARIES	1,798,229.
(7)	INTEREST PAYABLE WITH ANSCHUTZ	
(8)	ENTERTAINMENT GROUP, INC. & SUBS	1,200,982.
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	10,374,251.

2. Liability for uncertain tax positions. 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

Schedule D (Form 990) 2013

Schedule D (Form 990) 2013 GRAMMY MUSEUM FOUNDATION, INC. 26-14

Part XI | Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.	, , , , , , , , , , , , , , , , , , ,		
	Total revenue, gains, and other support per audited financial statements		1	8,846,882.
1	Amounts included on line 1 but not on Form 990, Part VIII, line 12.	•	┝╌	0,010,0021
2		2a		
a		2b 852,231.	1	
b	Donated services and use of facilities	26 052,231.	i	
C	Recovenes of prior year grants	2d 175,257.	ł	
đ		20 175,257.	-	1 027 488
e	•		2e 3	1,027,488. 7,819,394.
3	Subtract line 2e from line 1	•	-3	7,017,374.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 4-1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a 43,980.	ł	
D	Other (Describe in Part XIII.)	4b 43,980.		13 080
	Add lines 4a and 4b		4c 5	43,980.
5 Da	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Stateme	ents With Evnenses per		
Га		ents with Expenses per	neu	41 1 1.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.		· .	10,683,692.
1	Total expenses and losses per audited financial statements		1	10,003,094.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 - 1 952 221] .	,
а	Donated services and use of facilities	2a 852,231.		
ь	Pnor year adjustments	2b		i
С	Other losses	2c 175 257		
d	Other (Describe in Part XIII.)	2d 175,257.	·	1 007 400
е	Add lines 2a through 2d	•	2е	1,027,488. 9,656,204.
3	Subtract line 2e from line 1		3	9,030,204.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 . 1	1	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a 21 5 000		
þ	Other (Describe in Part XIII.)	4b 215,808.		015 000
C	Add lines 4a and 4b		4c_	215,808.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	9,872,012.
	rt XIII Supplemental Information.			
	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part		4; Parl	: X, line 2; Part XI,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional and additional and additional and additional and additional and additional and additional and additional and additional and additional and additional and additional and additional and additional and additional and additional and additional and additional additional and additional additional additional additional and additional addition	itional information.		
וגם	om ttt itmm 1%.			
PAJ	RT III, LINE 1A:			
TI W 1	DIAMANTON, ALI MEMODADILTA AMD EVUIDIME ADI	E DECEMBED ON M	LJ TJ	DATAMOR
<u>C</u> A	PLANATION: ALL MEMORABILIA AND EXHIBITS ARI	E PRESENTED ON I	ne	DADANCE
cu1	EET. DURING 2013, THE FOUNDATION ACQUIRED	¢1/ 000 TN MEMOD	ART	T. T A
SII.	SEI. DORING 2015, THE FOONDALION ACQUIRED	514,000 IN MEMOR	AD I	niv.
—				
ובס	RT III, LINE 4:			
LAI	AT TIT, DIME 4.			
EX.	PLANATION: THE GRAMMY MUSEUM BOASTS FOUR F	LOORS OF EXHIBIT	SP	ልሮድ ጥዝልጥ
EA.	HANATION: THE GRAMMI MODEON BOADIS FOOR FI	BOOKS OF EXHIBIT		ACE TIMI
OF	FER VISITORS ONE-OF-A-KIND EXPERIENCE THROU	ПСН СОМТЕМТ-ВІСН	TN	ͲϜŖϪϹͲͳϒϜϤ
01	THE VIDITORD OND OF A KIND DATERIBROUTHROUTE	odi contini nich		THROTTY HD,
rT:	LMS, OVERSIZE IMAGERY, ARTIFACTS, THE GRAM	MV ARCHIVES & HA	т.т.	OF FAME
r I	JMD, OVERBIZE IMAGERI, ARTIFACID, THE GRAM	A ARCHIVED & HA		OF FAME.
ጥፔነ	E MUSEUM ALSO HAS A SOUND STAGE/THEATRE WHI	פר פפקקר יין קקק	DOD	פעדיידותויי
111	- HODEON AUDO IAD A DOUND STAGE/INEATRE WIL	LICE II OFFERS UP	LOR	TONTITED
₽∩፣	R VISITORS TO MEET MUSIC ARTISTS FROM A BRO	OAD RANGE OF GEN	RFC	AND ERAS
	. TELLORD TO HELL MODIC INCIDED PROM A DIN	C. D. GER	*·~D	THE DIETO!
ינויף	E VISITORS WILL ALSO HAVE AN OPPORTUNITY TO	יי ייווחמג מאגאו ה	E A	RT AND
* * * * * *	TIDITATION THE BY BY BY BY CETTING IN OFFICE I	C DECEMBER ADOUT IN	<u> </u>	7/1 (7/17)
ጥድ	CHNOLOGY OF THE RECORDING PROCESS THROUGH A	AN ARRAY OF EXHT	ВТТ	S AND
33205 09-25		TA INCOLL OF DAIL		
υ9-25	-13		Scue	dule D (Form 990) 2013

SCHEDULE G

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

Attach to Form 990 or Form 990-EZ.

2013

Open To Public Inspection

Name of the organization	2001 Oct (Calle Of 1 01111 250 01 550 CE)	and id	, 111300	I WWW II S	117/11		ntification number
	MUSEUM FOUNDATION,					26-1447	
Part I Fundraising Activities required to complete this par	Complete if the organization answer t.	ered "Y	es" to	Form 990, Part IV, I	ine 1	7. Form 990-EZ	filers are not
Indicate whether the organization rais Mail solicitations Internet and email solicitations Phone solicitations	e Solicita	tion of tion of	non-g gover	overnment grants nment grants	•		
d In-person solicitations 2 a Did the organization have a written of key employees listed in Form 990, P	or oral agreement with any individual	(ınclu	dıng o	fficers, directors, tru		or Yes	No
b If "Yes," list the ten highest paid indicompensated at least \$5,000 by the	ividuals or entities (fundraisers) purs					undraiser is to	be
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	or con	Did raiser sustody atrol of utions?	(iv) Gross receipts from activity	to (c	Amount paid or retained by) fundraiser red in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No				
			ļ 			=	
		_	<u> </u>			····	
		-	<u> </u>				
							
			-			-	
		-					
	<u> </u>	<u> </u>	L				
Total 3 List all states in which the organization or licensing.	on is registered or licensed to solicit	contrib	outions	s or has been notified	d it ıs	exempt from re	egistration
LHA For Paperwork Reduction Act Not	ice, see the Instructions for Form	990 or	990-	EZ. 9	chec	lule G (Form 9	90 or 990-EZ) 2013

Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events CHEAP TRICK NONE (add col. (a) through GALA CONCERT col. (c)) (event type) (event type) (total number) 542,500 8,000 550,500. 1 Gross receipts 521,000 521,000. 2 Less: Contributions 21,500 8,000 29,500. Gross income (line 1 minus line 2) 4 Cash prizes 0. Noncash prizes Direct Expenses 77,372. 77,372. Rent/facility costs 40,566. 40,566. Food and beverages 29,050. 1,540 30,590. 8 Entertainment 26,167. 563 26,730. Other direct expenses 175,258. 10 Direct expense summary. Add lines 4 through 9 in column (d) -145,758. 11 Net income summary. Subtract line 10 from line 3, column (d) Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col. (a) through col. (c)) 1 Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes Rent/facility costs 5 Other direct expenses Yes Yes Yes % 6 Volunteer labor 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) 9 Enter the state(s) in which the organization operates gaming activities: a Is the organization licensed to operate gaming activities in each of these states? b If "No," explain 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

Schedule G (Form 990 or 990-EZ) 2013

b If "Yes," explain:

332082 09-12-13

Schedule G (Form 990 or 990-EZ) 2013 GRAMMY MUSEUM FOUNDATION, INC.	26-1447714 Page 3
11 Does the organization operate gaming activities with nonmembers?	Yes No
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed	
to administer charitable gaming?	Yes No
13 Indicate the percentage of gaming activity operated in:	1
a The organization's facility	13a%
b An outside facility	13b %
14 Enter the name and address of the person who prepares the organization's gaming/special events books and reco	rds:
Name ▶	
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes No
b If "Yes," enter the amount of gaming revenue received by the organization ▶\$ and the amount	ount
of gaming revenue retained by the third party > \$	
c If "Yes," enter name and address of the third party:	,
Name	
Address >	
16 Gaming manager information:	
Name	
0	
Gaming manager compensation > \$	
Description of services provided	
Description of services provided P	
Director/officer Employee Independent contractor	
17 Mandatory distributions:	
a Is the organization required under state law to make charitable distributions from the gaming proceeds to	
retain the state gaming license?	└─ Yes └─ No
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent	in the
organization's own exempt activities during the tax year ▶ \$	
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and	
15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instruct	tions).
	
332083 09-12-13 Schedule	G (Form 990 or 990-EZ) 2013

SCHEDULE-J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

➤ Attach to Form 990. ➤ See separate instructions.

Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990

2013

Open to Public Inspection

Schedule J (Form 990) 2013

Name of the organization

Department of the Treasury

Internal Revenue Service

GRAMMY MUSEUM FOUNDATION, INC.

Employer identification number 26-1447714

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel			
	Travel for companions Payments for business use of personal residence	ļ		
	Tax indemnification and gross-up payments Health or social club dues or initiation fees		ŀ	l
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation pnor to reimbursing or allowing expenses incurred by all directors,		. '	
	trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		<u> </u>
		İ		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's]		l
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to	ŀ	!	
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract		[!	
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee	ĺ	!	
	Duran the ware did now name listed in Familian Road VIII. Seption A. Jing 15, with respect to the films]		
4				
_	organization or a related organization:	4a		х
_	Receive a severance payment or change-of-control payment?	4b		X
b		40 4c		X
C	Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	40		<u> </u>
	The storage of lines 44.0, list the persons and provide the applicable amounts for each item in Fart in.]	ļ	
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	1	ł	1
	contingent on the revenues of:			
а	The organization?	5a		X
b	Any related organization?	5b		X
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	ŀ		
	contingent on the net earnings of:			l
а	The organization?	6a		X
b	Any related organization?	6Ь		X
	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments	}		
	not described in lines 5 and 6? If "Yes," describe in Part III	7	Х	
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			_
	Regulations section 53.4958-6(c)?	9		<u> </u>

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

Schedule J (Form 990) 2013 GRAMMY MUSEUM FOUNDATION,

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of W.	V-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Trite		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	California	(a)-(i)(a)	in prior Form 990
(1) NEIL PORTNOW	ε	0	0		1	1 1		
CHAIR	(II)	943,47	0	46,535.	52,434.	12,896.	1,055,33	0
(2) WAYNE ZAHNER	Ξ		0	l l		ı.		
BOARD MEMBER	(1)	280,73	1,750.	3,378.	14,000.	16,453.	316,31	
(3) BRANDEN CHAPMAN	ε		l I			1	ļ	
BOARD MEMBER	<u>(ii)</u>	266,813.	•	3,366.	21,231.	20	314,	
(4) ROBERT SANTELLI	Ξ	Ш	100,000.	1,980.	17	23,07	487,73	0
EXECUTIVE DIRECTOR	(ii)			0.				
(5) RITA GEORGE	Ξ	134,018.	19,238.	102.	15,424.	6,914.	175,696.	0.
DEPUTY DIRECTOR		0	0	0.	0	•0	• 0	0.
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332112				33			Sched	Schedule J (Form 990) 2013

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332112 09-13-13 Page 3

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information Part III Supplemental Information

ART I, LINE 7: XPLANATION: ROBERT SANTELLI WAS COMPENSATED WITH A CRITERIA BONUS ASED UPON SPECIFIC PERFORMANCE GOALS ESTABLISHED AND APPROVED BY ROBERT
ND HIS DIRECT SUPERVISOR. IN ADDITION, ROBERT SANTELLI AND RITA GEORGE TERE EACH COMPENSATED WITH DISCRETIONARY BONUSES SUBJECT TO THE DISCRETION
F THEIR DIRECT SUPERVISOR.
Schedule J (Form 990) 2013

SCHEDULE L

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Transactions With Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs gov/form990.

OMB No 1545-0047

Open To Public Inspection

Name of the organization

Employer identification number

		USEUM FOU						26	-14	477	14		
Part I Excess Bene	efit Transac	tions (section 5	01(c)(3) and :	section 501(c)(4) org	aniz	ations only).						
Complete if the	organization an	swered "Yes" on	Form	990, Pa	art IV, line 25a or 25l	b, o	Form 990-EZ, F	art V,	line 40)b			
1 (2) Name of discussions of	(b)	Relationship bet			infied	- 1 D					(d)	Corre	cted?
(a) Name of disqualified p	person	person and o	rganiz	ation	(0	S) D(escription of trar	isactic	УП	_	Y	es	No
		·											
							·						
2 Enter the amount of tax	incurred by the	organization mai	nagers	or disc	qualified persons du	ring	the year under						
section 4958									▶ \$				
3 Enter the amount of tax,	ıf any, on line 2	2, above, reimbur	sed by	the or	ganization				\$				
Part II Loans to and	Vor From Ir	nterested Per	eone										
					/ D-+V I 00		- 000 B-4 N/ L	- 00					
•	•				, Part V, line 38a or F	-om	n 990, Part IV, IIr	ne 26,	or IT T	ne orga	anızatı	on	
(a) Name of	(b) Relationship	90, Part X, line 5,		oan to or	(e) Onginal	15) Balance due	(g)	· In	(h) Ap	proved	(i) W	ritten
interested person	with organizatio		fro	n the	principal amount	l '') Dalai ice que		ult?	by bo	ard or	,,	ment?
·			To	From				Yes	No	Yes	No	Yes	No
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Total		24.1			\$			<u></u>		<u> </u>		<u> </u>	
		enefiting Inte			-								
		swered "Yes" on	Form	990, Pa									
(a) Name of interested (person	(b) Relationship interested per			(c) Amount of assistance		(d) Type assistan		}) Purp assista		f
		the organiz		iu			aosistai				2001011	21100	
													
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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990 or 990-EZ) 2013

Schedule L (Form 990 or 990-EZ) 2013 GRAMMY Part IV Business Transactions Involved	ing Interested Persons.		26-1447		
Complete if the organization answered	"Yes" on Form 990, Part IV, line 28a, 2	8b, or 28c.			
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction		iring of ation's ues?
				Yes	No
ANSCHUTZ ENTERTAINMENT GRO			AEG MUSEUM,		X
ANSCHUTZ ENTERTAINMENT GRO	CERTAIN DIRECTORS A	1,858,702.	GRAMMY MUSE		Х
	·				
Dort V Complemental Information					
Part V Supplemental Information Provide additional information for response	onses to questions on Schedule L (see	instructions).			
SCH L, PART IV, BUSINESS T	RANSACTIONS INVOLVI	NG INTEREST	ED PERSONS:	<u>-</u>	
(A) NAME OF INTERESTED PER	SON:				
ANSCHUTZ ENTERTAINMENT GRO	UP, INC. & SUBSIDIA	RIES			
(B) RELATIONSHIP BETWEEN I	NTERESTED PERSON AN	D ORGANIZAT	ION:		
CERTAIN DIRECTORS ALSO SER	VE AS OFFICERS OF A	NSCHUTZ ENT	ERTAINMENT	GROU:	P, I
(D) DESCRIPTION OF TRANSAC	TION: AEG MUSEUM, L	LC (A SUBSI	DIARY OF		
ANSCHUTZ ENTERTAINMENT GRO	UP, INC.) IS ENGAGE	D TO PERFOR	M CERTAIN		
MANAGEMENT SERVICES IN CON	NECTION WITH THE OP	ERATION OF	THE GRAMMY	MUSE	JM_
ON BEHALF AND FOR THE BENE	FIT OF THE FOUNDATI	ON. THE FO	UNDATION RE	TAIN	5
ULTIMATE RESPONSIBILITY FO	R SUPERVISING THE O	PERATIONS O	F THE GRAMM	Υ	
MUSEUM AND MAKING POLICY D	ECISIONS. THIS AMO	UNT REPRESE	NTS THE	- -	
FOUNDATION'S ACCRUAL FOR P	AYMENTS TO AEG MUSE	UM, LLC REP	RESENTING		
REIMBURSEMENT OF EXPENSES	RELATING TO THE MAN	AGEMENT OF	THE FOUNDAT	ION.	
(A) NAME OF INTERESTED PER	SON:				
ANSCHUTZ ENTERTAINMENT GRO	UP, INC. & SUBSIDIA	RIES		-	
(B) RELATIONSHIP BETWEEN I	NTERECTED DERCON AN	п орсантуат	TON		

- CERTAIN DIRECTORS ALSO SERVE AS OFFICERS OF ANSCHUTZ ENTERTAINMENT GROUP, INC.
- (D) DESCRIPTION OF TRANSACTION: GRAMMY MUSEUM FOUNDATION LEASES PROPERTY

FROM LA LIVE PROPERTIES (A SUBSIDIARY OF ANSCHUTZ ENTERTAINMENT GROUP,

Schedule L (Form 990 or 990-EZ) 2013

332132 09-25-13

Schedule L	(Form 990 or	990-EZ)	GRAMMY M	JSEUM FOU	NDAT.TOV	1, 1	NC.	26-1447714	Page 2
Part V	Supplem	ental Infor	nation						
				mation for respon	nses to auest	ions on	Schedule L (see instruc	tions).	
	<u> </u>	,					1		
INC.).	THIS	TUITOMA	INCLUDES	PARKING	RENT.	AND	MAINTENANCE	TTEMS.	
<u> </u>	711110	7117001VI	THEDODED	TIMELING,	102111	1212	THISTIT DIVIDICE	1101	
									
							 		
									
									
								 	
									
									
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SCHEDULE M (Form 990).

Noncash Contributions

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

► Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Inspection Employer identification number

		GRAMMY MUSEU	M FOUN	DATION, I	NC.		26-	1447	714	
Par	t Types	of Property								
			(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contr amounts repor Form 990, Part V	ted on	Method of noncash contri		-	s
1	Art - Works of a	art								
2	Art - Historical 1	•				i	· · · · · · · · · · · · · · · · · · ·			
3	Art - Fractional									
4	Books and pub									
5		ousehold goods			 					
6	Cars and other	· ·					 			
7	Boats and plan		-							
8	Intellectual pro					1				-
9	Securities - Put	•								
		•		1				•		
10		sely held stock								
11		tnership, LLC, or								
	trust interests		-			-				
12	Securities - Mis									
13		ervation contribution -								
	Historic structu				 	-	· · · · · · · · · · · · · · · · · · ·			
14		ervation contribution - Other								
15	Real estate - Re						* .			
16	Real estate - Co	•						-		
17	Real estate - O	ther						-		
18	Collectibles		<u>-</u>							
19	Food inventory				-					
20	Drugs and med	dical supplies		-						
21	Taxidermy ·	•								
22	Historical artifa				-					
23	Scientific spec							_		
24	Archeological a		<u></u>		0.3	260	OMITED			
25	Other (HARMAN)	X	1			OTHER			
26	Other (SONGWRITERS H)	X	1			OTHER			
27	Other (ROLAND, SONY	Х	6	40,	261.	OTHER			
28	Other ()	<u> </u>	<u> </u>	L	,				
29		ms 8283 received by the organ				l i			0	
	for which the o	rganization completed Form 82	83, Part IV,	Donee Acknowled	gement	29				
									Yes	No
30a		r, did the organization receive b						1 1		
	-	ears from the date of the initial	contribution	, and which is not	required to be use	ed for exem	pt purposes for		1	v
	the entire holdi	•,						30a		Х
b		ibe the arrangement in Part II								v
31	_	nization have a gift acceptance					utions?	31		X
32a	-	nization hire or use third parties	or related o	rganizations to sol	ıcıt, process, or se	li noncash				v
	contributions?							32a		X
b	If "Yes," descri									l
33	If the organizat	tion did not report an amount in	column (c)	for a type of prope	erty for which colur	nn (a) is ch	ecked,			l
	describe in Par			···			 			
ΙНΔ	For Danerus	ork Reduction Act Notice, see	the Instruc	tions for Form 90	20		Schedule I	M (Form	990) (2013

Schedule N	M (Form 990) (20	13) GRAM	MY MUSE	UM FOUNI	DATION,	INC.		26-1447714	Page 2
Part II	Supplemer	ntal Inform	ation. Provid	de the informat	tion required l	by Part I. lines 30b	. 32b. and 33. a	nd whether the organiz	ation
	is reporting in	Part I, columr	า (b), the numb	er of contribut	tions, the num	nber of items recen	ved, or a combin	nation of both. Also cor	nplete
	this part for an	ıy addıtional i	nformation.						
				·		· - ·			
SCHEDI	ULE M, PA	RТ Т. (COLUMN	(B):					
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332142 09-03-13

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ complete to provide information for responses to specific questions on

Form 990 or 990-EZ or to provide any additional information.

➤ Attach to Form 990 or 990-EZ.

Open to Public

OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

Name of the organization GRAMMY MUSEUM FOUNDATION, INC. Employer identification number 26-1447714

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

RENTAL OF FACILITY: GRAMMY MUSEUM MARKETS THE RENTAL OF ITS FACILITY FOR SPECIAL EVENTS WHERE ATTENDEES ARE ADMITTED INTO THE MUSEUM TO VIEW MUSEUM EXHIBITS. PROGRAM EXPENSES INCLUDE THE COST OF A DEDICATED STAFF FOR COORDINATING AND EXECUTING FACILITY RENTALS AND EVENTS. (EXPENSES:

\$96,115; REVENUE: \$271,297)

GRAMMY MUSEUM RETAIL STORE: THE GRAMMY MUSEUM RETAIL STORE SPECIALIZES IN CARRYING A VARIETY OF ITEMS THAT REFLECT THE MULTIPLE GENRES OF MUSIC THAT THE GRAMMY AWARD SYMBOLIZES AS EXCELLENCE IN RECORDED MUSIC. PRODUCT LINES INCLUDE MUSEUM BRANDED MERCHANDISE OF SOFT GOODS, NOVELTY ITEMS, AND COLLECTIBLES. HIGHLIGHTED OFFERINGS INCLUDE LITERATURE. RECORDED AUDIO AND VIDEO SELECTIONS; WHICH REFLECT THE HISTORY OF THE AWARDS, ARTISTS & BANDS, AND THE INDUSTRY PIONEERS. SPECIAL PRODUCTS ACCOMPANY ONGOING FEATURED ARTISTS AND THEMED EXHIBITIONS. THE RANGE OF ITEMS FOR SALE ARE FROM SOUVENIR BUTTONS TO T-SHIRTS AND APPAREL THAT CELEBRATE THE MUSIC MAKERS AND ARE FOR FANS OF ALL TYPES OF MUSIC. FOR PURPOSES OF PART III, LINE 4D, REVENUE GENERATED BY THE GRAMMY MUSEUM RETAIL STORE IS THE NON-UBI PORTION OF REVENUE. THE REVENUE IS ALSO REPORTED NET OF COSTS OF GOODS SOLD TO MATCH THE REPORTING FOR FINANCIAL STATEMENT PURPOSES. THE PROGRAM EXPENSES REPORTED FOR PART III, LINE 4D REPRESENT PROGRAM EXPENSES THAT ARE INDIRECTLY RELATED TO THE GRAMMY MUSEUM RETAIL STORE OPERATIONS. (EXPENSES: \$111,220; **REVENUE:** \$116,000)

EDUCATION: THE GOAL OF THE GRAMMY MUSEUM'S EDUCATION PROGRAM IS TO

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 332211 09-04-13

Schedule O (Form 990 or 990-EZ) (2013)

Name of the organization **Employer identification number** GRAMMY MUSEUM FOUNDATION, INC. 26-1447714 EDUCATE AND INSPIRE, THROUGH EXPOSURE TO ALL MUSIC AND THE CREATIVE PROCESS, ALL VISITORS BUT MOST SPECIFICALLY SCHOOL GROUPS AND FAMILIES. THE PROGRAMS INCLUDE TEACHER WORKSHOPS, MUSEUM TOURS, SEMINARS, SYMPOSIA, MASTER MUSIC CLASSES, MENTORING PROGRAMS, MUSIC FORUMS, SCHOOL OUTREACH AND MUSICAL DEMONSTRATIONS, "MEET AND GREET" WITH ARTISTS, AND SATURDAY MORNING MUSIC LESSONS. (EXPENSES: \$172,830; REVENUE: \$133,698) IMPUTED INTEREST REVENUE - THE FOUNDATION AND ANSCHUTZ ENTERTAINMENT GROUP, INC. AND SUBSIDIARIES (AEG) HAVE A FINANCIAL SUPPORT AGREEMENT, WHEREBY AEG AGREED TO FINANCE APPROVED COST OVERRUNS AND FOUNDATION DEFICITS (AS DEFINED IN THE AGREEMENT). UNDER THE TERMS OF THE FINANCIAL SUPPORT AGREEMENT, CERTAIN ADVANCES FROM AEG, WHICH HAVE NOT BEEN REPAID TO AEG AT THE END OF THE FISCAL YEAR, NO LONGER BEAR INTEREST AND CONVERT INTO NONINTEREST BEARING AFFILIATE LOAN PAYABLE. INTEREST WAS IMPUTED ON THE AFFILIATE LOAN PAYABLE, AND ACCORDINGLY, THERE IS IMPUTED INTEREST REVENUE OF \$55,191 RELATED TO THE DISCOUNT ON THE AFFILIATE LOAN PAYABLES RECORDED IN 2013. (EXPENSES: \$55,191; REVENUE: \$55,191) EXPENSES \$ 435,356. INCLUDING GRANTS OF \$ 0. REVENUE \$ 576,186. FORM 990, PART VI, SECTION A, LINE 2: EXPLANATION: BUSINESS RELATIONSHIP: NEIL PORTNOW, BRANDEN CHAPMAN, WAYNE ZAHNER, JAMES "JIMMY JAM" HARRIS, TERRY LICKONA, PHIL RAMONE, JOEL KATZ, CAROLYN POWERS, GISELLE FERNANDEZ BUSINESS RELATIONSHIP: TED FIKRE, KEN EHRLICH, JOHN BRANCA, DAN BECKERMAN, TODD GOLDSTEIN, JAY MARCIANO.

FORM 990, PART VI, SECTION A, LINE 3:

332212 09-04-13

EXPLANATION: THE FOUNDATION ENTERED INTO AN OUTSOURCING SERVICES AGREEMENT BETWEEN GRAMMY MUSEUM FOUNDATION INC. AND AEG MUSEUM, LLC EFFECTIVE JANUARY 2008, IN WHICH AEG MUSEUM, LLC WAS ENGAGED TO PERFORM CERTAIN MANAGEMENT SERVICES IN CONNECTION WITH THE OPERATION OF THE GRAMMY MUSEUM ON BEHALF AND FOR THE BENEFIT OF THE FOUNDATION. THE FOUNDATION RETAINS ULTIMATE RESPONSIBILITY FOR SUPERVISING THE OPERATIONS OF THE MUSEUM AND MAKING POLICY DECISIONS.

FORM 990, PART VI, SECTION A, LINE 6:

EXPLANATION: THE MUSEUM HAS ONE CLASS A MEMBER (NATIONAL ACADEMY OF RECORDING ARTS & SCIENCES, INC.) AND ONE CLASS B MEMBER (L.A. ARENA LAND CO, A MAJORITY OWNED SUBSIDIARY OF ANSCHUTZ ENTERTAINMENT GROUP, INC.).

FORM 990, PART VI, SECTION A, LINE 7A:

EXPLANATION: THE CLASS A MEMBER SHALL DESIGNATE ALL CLASS A DIRECTORS. THE CLASS B MEMBER SHALL DESIGNATE ALL CLASS B DIRECTORS. AT ALL TIMES, THERE SHALL BE ONE MORE CLASS A DIRECTOR THAN THERE ARE CLASS B DIRECTORS ON THE BOARD.

FORM 990, PART VI, SECTION A, LINE 7B:

EXPLANATION: DECISIONS OF THE GOVERNING BODY ARE SUBJECT TO APPROVAL BY THE NATIONAL ACADEMY OF RECORDING ARTS & SCIENCES, INC.

FORM 990, PART VI, SECTION B, LINE 11:

EXPLANATION: AFTER THE FORM 990 IS PREPARED, IT IS SUBMITTED TO THE AUDIT COMMITTEE FOR REVIEW. THE BOARD HAS DESIGNATED THE AUDIT COMMITTEE TO REVIEW AND APPROVE THE FILING OF THE TAX RETURN ON ITS BEHALF. AFTER ALL COMMENTS AND QUESTIONS FROM THE AUDIT COMMITTEE HAVE BEEN ADDRESSED AND Schedule O (Form 990 or 990-EZ) (2013) Name of the organization GRAMMY MUSEUM FOUNDATION, INC. **Employer identification number** 26-1447714

INCORPORATED, THE AUDIT COMMITTEE APPROVES THE FILING WITH THE IRS.

EXPLANATION: EACH DIRECTOR, PRINCIPAL OFFICER AND MEMBER OF A COMMITTEE

FORM 990, PART VI, SECTION B, LINE 12C:

WITH POWERS DELEGATED BY THE BOARD OF DIRECTORS NEEDS TO SIGN A STATEMENT UPON HIRING OR APPOINTMENT AFFIRMING THAT HE/SHE 1) HAS RECEIVED A COPY OF THE CONFLICTS OF INTEREST POLICY, 2) HAS READ AND UNDERSTANDS THE POLICY, 3) HAS AGREED TO COMPLY WITH THE POLICY, AND 4) UNDERSTANDS THAT THE MUSEUM IS A NON-PROFIT ORGANIZATION AND IN ORDER TO MAINTAIN ITS FEDERAL TAX EXEMPTION STATUS, IT MUST ENGAGE PRIMARILY IN ACTIVITIES WHICH ACCOMPLISH ONE OF MORE OF ITS TAX-EXEMPT PURPOSES.

PERIODIC REVIEWS ARE CONDUCTED BY THE HUMAN RESOURCES DEPARTMENT TO ENSURE COMPLIANCE WITH THE POLICY. THIS FUNCTION IS PERFORMED BY AEG MUSEUM, LLC AS PART OF ITS OUTSOURCING AGREEMENT WITH GRAMMY MUSEUM FOUNDATION. PERIODICALLY, A CONFLICT OF INTEREST QUESTIONNAIRE IS DISTRIBUTED TO SELECTED EMPLOYEES FOR COMPLETION AND SIGNATURE, AND THEN REVIEWED BY HUMAN RESOURCES. COPIES OF THESE FORMS ARE MAINTAINED BY HUMAN RESOURCES IN PERSONNEL FILES. ANNUALLY, THE CORPORATE SECRETARY DISTRIBUTES THE ANNUAL DISCLOSURE STATEMENT AT A BOARD MEETING. THE STATEMENTS ARE COLLECTED BY THE CORPORATE SECRETARY AND THEN A SUMMARY REPORT IS GIVEN TO THE CHAIR OF THE AUDIT COMMITTEE. ACCORDINGLY, THE CHAIR OF THE AUDIT COMMITTEE IS RESPONSIBLE FOR BOTH MONITORING AND ENFORCING THE CONFLICT OF INTEREST POLICY BASED ON THE STATEMENTS THAT ARE PROVIDED.

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

EXPLANATION: DURING THE 2013 TAX YEAR, ROBERT SANTELLI, EXECUTIVE DIRECTOR, WAS COMPENSATED IN ACCORDANCE WITH THE OUTSOURCING SERVICES AGREEMENT

BETWEEN GRAMMY MUSEUM FOUNDATION INC. AND AEG MUSEUM, LLC DATED JANUARY 1. 332212 09-04-13 Schedule O (Form 990 or 990-EZ) (2013)

GRAMMY MUSEUM FOUNDATION, INC.	26-1447714
2008. PURSUANT TO EXHIBIT A OF ARTICLE 2, SECTION 2.2(A),	AEG MUSEUM, LLC
IS TO "IN ACCORDANCE WITH ARTICLE 7 OF THE AGREEMENT, HIR	E OR OTHERWISE
ENGAGE, PAY, SUPERVISE, AND DIRECT ALL PERSONNEL IN CONNE	CTION WITH THE
OPERATION OF THE MUSEUM AND CONDUCT RETENTION AND TRAININ	G PROGRAMS AS
REQUESTED BY FOUNDATION IN ITS REASONABLE DISCRETION." A	CCORDINGLY, ALL
FORM W-2S WERE ISSUED BY AEG MUSEUM, LLC. MR. SANTELLI'S	COMPENSATION WAS
DETERMINED BY REVIEWING AND COMPARING WITH THE COMPENSATI	ON OF OTHER
NON-PROFIT MUSEUM DIRECTORS IN THE GENERAL AREA. BASED U	PON THIS
COMPARISON AND THE TERMS OF THE AGREEMENT WITH AEG, AN AM	OUNT WAS
DETERMINED BY DISCUSSION AND APPROVAL OF SELECTED BOARD M	EMBERS OF THE
MUSEUM.	
TORY OLD DARREST GRANTON A LINE 10	
FORM 990, PART VI, SECTION C, LINE 19:	
EXPLANATION: THE ORGANIZATION DOES NOT MAKE ITS GOVERNING	DOCUMENTS,
EXPLANATION: THE ORGANIZATION DOES NOT MAKE ITS GOVERNING	
EXPLANATION: THE ORGANIZATION DOES NOT MAKE ITS GOVERNING FINANCIAL STATEMENTS, AND CONFLICT OF INTEREST POLICY AVA	
EXPLANATION: THE ORGANIZATION DOES NOT MAKE ITS GOVERNING FINANCIAL STATEMENTS, AND CONFLICT OF INTEREST POLICY AVA	
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EXPLANATION: THE ORGANIZATION DOES NOT MAKE ITS GOVERNING FINANCIAL STATEMENTS, AND CONFLICT OF INTEREST POLICY AVA	

SCHEDULE R (Form 990) Name of the organization

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Related Organizations and Unrelated Partnerships

► Attach to Form 990.

► See separate instructions.

2013

OMB No 1545-0047

▶Information about Schedule R (Form 990) and its instructions is at www is gov/form990

Open to Public Inspection

Employer identification number . 26-1447714(g) Section 5 12(b)(13) ŝ × controlled Direct controlling Yes entity Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt Direct controlling $\boldsymbol{arepsilon}$ End-of-year assets N/A status (if section <u>e</u> Public charity 501(c)(3)) Total income Exempt Code section (9)(C)(e) ਉ Legal domicile (state or Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Legal domicile (state or foreign country) foreign country) CALIFORNIA ORGANIZATION OF MUSICIANS, TO HOLD REAL PROPERTY AND GRAMMY MUSEUM FOUNDATION, INC. PRODUCERS, RECORDING Primary activity Pnmary activity ENGINEERS AND OTHER SCIENCES, INC. - 95-6052058, 3030 OLYMPIC NATIONAL ACADEMY OF RECORDING ARTS AND Name, address, and EiN (if applicable) BLVD., SANTA MONICA, CA 90404-0000 NARAS PROPERTIES, INC. - 95-4516666 organizations during the tax year. Name, address, and EIN of related organization of disregarded entity 3030 OLYMPIC BLVD. Part II Parl

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

332161 09-12-13 LHA

Schedule R (Form 990) 2013

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N/A

501(C)(2)

CALIFORNIA

COLLECT RENT FOR NARAS

SANTA MONICA, CA 90404-5073

26-1447714 Page 2

Schedule R (Form 990) 2013 GRAMMY MUSEUM FOUNDATION, INC.

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

Olganizations treated as a partitioning the tax year.	and a second second	y year.	1	3		9	3	1			5	. 3
(a) Name, address, and EIN	(b) Primary activity	Legal	olling	Predominan		(1) Share of total	Share of	Dispir		N-UBI	U) seneral or	Percentage
of related organization		(state or foreign country)	entity	(related, unrelated, excluded from tax under sections 512-514)	nrelated, 1 tax under 12-514)	ілсоше	end-of-year assets	Yes No	amount in box 20 of Schedule 40 K-1 (Form 1065)	in box thedule in 1065) ₩	partner?	partner? ownership
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Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete of the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related part IV organizations treated as a condition or frust during the tax year.	ganizations Taxable	as a Corp	oration or Trust Co	mplete if the	organization	answered "Yes	on Form 990,	, Part IV, line	34 because	ıt had one	or mo	e related
(a)		,	(g)	(9)	Ð	(0)		E	(b)		3	8
The sadded and E		Prid	ctivity		Direct controlling			Share of total	Share of		entade	
of related organization	 : c			(state or	entity	(C corp, S corp,		Income	end-of-year		ownership	controlled entity?
				country)		 ਹਾ ਹਾ			assets		•	Yes No
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332162 09-12-13				40					Ø	chedule F	R (Forn	Schedule R (Form 990) 2013

4 Page 3

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.			Yes No
1 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?	ns with one or more r	elated organizations listed	
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity	•		
b Grft, grant, or capital contribution to related organization(s)	,		The X
c Gift, graint, or capital contribution from related organization(s)			1 1 1 X
d Loans or loan guarantees to or for related organization(s)		•	1d X
e Loans or loan guarantees by related organization(s)		•	Te X
f Dividends from related organization(s)			X
g Sale of assets to related organization(s)			X 61
h Purchase of assets from related organization(s)			X ++
i Exchange of assets with related organization(s)			X
j Lease of facilities, equipment, or other assets to related organization(s)	•	•	X
k Lease of facilities, equipment, or other assets from related organization(s)			1k X
I Performance of services or membership or fundraising solicitations for related orga	related organization(s)		X
m Performance of services or membership or fundraising solicitations by related orga	elated organization(s)		X wh
n Shanng of facilities, equipment, mailing lists, or other assets with related organization(s)	tion(s)		X
 Shanng of paid employees with related organization(s) 			To Y
			Q
q Reimbursement paid by related organization(s) for expenses.			V 10
r Other transfer of cash or property to related organization(s)		:	1
s Other transfer of cash or property from related organization(s)			1s X
2 If the answer to any of the above is "Yes," see the instructions for information on v	who must complete t	his line, including covered	mation on who must complete this line, including covered relationships and transaction thresholds.
(a) Name of related organization	(b) Transaction	(c) Amount involved	(d) Method of determining amount involved
	iype (a-s)		
NATIONAL ACADEMY OF RECORDING ARTS AND	ບ	234,000.	CASH
	ტ	50,000.	GALA TABLE AT FACE VALUE
NATIONAL ACADEMY OF RECORDING ARTS AND (3) SCIENCES	, # 	146,400.	GRAMMY AWARDS TICKETS AT FACE VALUE
(4)			
(5)			
(9)			
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Schedule R (Form 990) 2013

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on 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

Schedule R (Form 990) 2013 GRAMMY MUSEUM FOUNDATION, INC.	26-1447714 Page 5
Part VII Supplemental Information	
Provide additional information for responses to questions on Schedule R (see instructions).	
SCHEDULE R, PART V	
EXPLANATION: THE RECORDING ACADEMY MADE NONCASH (VALUE-IN	-KIND)
COMMUNICATIONS NO MUR MISSIM OF \$744 620 DIDING 2013	
CONTRIBUTIONS TO THE MUSEUM OF \$744,620 DURING 2013.	
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