For Paperwork Reduction Act Notice, see the separate instructions.

## Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

► Do not enter social security numbers on this form as it may be made public.

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

OMB No 1545-0047 2017

Open to Public

De Inte	partment o	f the Treasury lue Service	► Go to www.irs.g	gov/Form990 for ins	on this form as tructions and th	ne latest	e mace informa	tion.	<i>t07</i>	Inspec	
A			ndar year, or tax year beginning		<del></del>	nd endir		March	31	, 20 <sub>18</sub>	
В	Check if	applicable	C Name of organization Harvard Ba			÷				identification n	umber
	Address	change	Doing business as Harvard Ban							04-2799839	
	Name c	nange	Number and street (or PO box if m	nail is not delivered to sti	eet address)	Room/su	ııte	Ε	E Telephone number		
	Initial re	turn	P. O Box 381428						7	7 <u>81-929-7</u> 847	
	Final retu	rn/terminated	City or town, state or province, cou-	ntry, and ZIP or foreign	postal code						
	Amende	d return	Cambridge MA 02238-1428					G	Gross rec	eipts \$	23890
	Applicat	ion pending	F Name and address of principal offic	er		1	H(a) Is	this a grou	p return for su	bordinates? 🔲 Yes	✓ No
			Cammie Wynn, President, same			319	Н(b) /			ncluded? 🗌 Yes	
<u>I</u>		mpt status	501(c)(3) 501(c)	() <b>◄</b> (insert no )	4947(a)(1) <b>o</b> r	527	_			st (see instruction	ons)
<u>J</u>	Website					<u> </u>		<del>`</del> _	emption n		
K	_		Corporation Trust Associa	ation	L Yea	ar of forma	tion	1984	M State o	f legal domicile	MA
U	Part !	Summ				The Fe					
a)	1		escribe the organization's miss	=						<i>-</i>	rvaro
Ž			y Band (Marching Band, Jazz Ba								
Ë	2		<ul> <li>s, the commissioning of new miles</li> <li>lis box ►  if the organization</li> </ul>								
Š	3		of voting members of the gove	•		aposeu .	01 111010	manz	3	3 1101 433013	20
9	4		of independent voting membe			line 1h)	• •	•	4		20
ë	5		nber of individuals employed i					•	5		
Activities & Governance	6		mber of volunteers (estimate if	•					6	_ <del></del>	30
Act	7a		elated business revenue from		C), line_12	<b>1</b>			7a		0
	ь		lated business taxable income	from Form 990-T		<i>I</i> c			7b		
_	$\top$			1h) RECT		( <u>v</u> )	Pi	rior Year	•	Current Ye	ear
7 w	8	Contribu	tions and grants (Part VIII, line	1h) . K	2018	\?\.[			1753		6523
/ בַּ	9	Program	service revenue (Part VIII, line	2g) \ .		] <u>ir</u> ] [					
Sevenue	10	Investme	ent income (Part VIII, column (A	ال line), line) المنظمة		· · · . [			22137		25178
	11	Other rev	/enue (Part VIII, column (A), lin	es 5, 6 <b>₫₫</b> ₿¢, 9 <u>c</u> ∕10	c, and (1e)					<u>.</u>	
_	12	TOTALICA	chac add mics o through 11 (	must coddai'r arg wgg	JUNE OF THE PROPERTY OF THE PR	ne 12)			23890		31701
	13		nd similar amounts paid (Part I		•	·			33640	_ <del></del>	39063
	14		paid to or for members (Part I)		•						<del></del>
es	15		other compensation, employee	•		5–10)					
Expenses	16a		onal fundraising fees (Part IX, o		•						
X	b		draising expenses (Part IX, col								
	17 18		penses (Part IX, column (A), lin penses. Add lines 13-17 (must		•				5096		892
	19		less expenses. Subtract line 1		RECEIV	ED	_		38736	<del></del>	39955
-		Hevenue	less expenses. Subtract line	o nomine iz	TLOLIV		Beginning	of Curre	(14846) ent Year	End of Ye	(8254) ar
osta	20	Total ass	ets (Part X, line 16)	lol	250 200	n			255476		1330341
Ass	21		ollities (Part X, line 26)	8522	DEC 2.8	2010	<u></u>		0		0
Net Assets o	22		ts or fund balances Subtract I	ine 21 from line 20			<u> </u>	1	255476	·······	1330341
	art II		ture Block		OGDEN.	UT					
U	nder pena	Ities of perju	ry, I declare that I have examined this	return, including accom	panying schedules	and state	ments, ar	d to the	best of my	knowledge and	belief, it is
tr	ue, correc	t, and compl	ete Declaration of preparer (other than	officer) is based on all	nformation of white	ch prepare	r has any	knowled	ge /		<u> </u>
			Michael 1 Co	Allman					You	ewhle [	<u> 2 2012</u>
	gn	Sign	ature of officer	,	. / /			Date			•
H	ere		4. Michael Kud	erman C	lerk_				_		
_		<u> </u>	or print name and title	I Description		1-		-		lore:	
Pa	aid	Printity	pe preparer's name	Preparer's signature		Di	ate		Check _	f PTIN	
Pi	repare			L				<del>,  </del>	self-emplo	oyed	
U	se On							1	EIN ►	_	
NA.	av tha II		s this return with the preparer	shown above? /ee	inetructions\			Phone	no		
	<u> </u>		ction Act Notice, see the separa	<u></u>	ansuuciions)		1- 44000		· · ·		90 (2017)
гO	, rapen	vuik neau	onon Aoi Nouce, see the separa	เษ แเรนนบนบทร.		Uat N	lo 11282'	ī		rorm s	· • • (2017)

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	90 (2017)	Page 2
Part		
<u> </u>	Check if Schedule O contains a response or note to any line in this f	Part III
1	Briefly describe the organization's mission:	die e i Monde addition
	The Foundation supports the work of the Harvard University Band (Marching Ban grants for special projects, travel, instrument purchases, the commissioning of n	
	activities beyond the Band's budget.	
2	Did the organization undertake any significant program services during the y prior Form 990 or 990-EZ?	
	·	· · · · · · · · · · · Yes ✓ No
3	If "Yes," describe these new services on Schedule O  Did the organization cease conducting, or make significant changes in	how it conducts any program
	services?	· · · · · · · · · · · · · · · · · · ·
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of it	s three largest program services, as measured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to repo	ort the amount of grants and allocations to others
	the total expenses, and revenue, if any, for each program service reported.	
4a	(Code: ) (Expenses \$ 39955 including grants of \$	39063) (Revenue \$ 0)
70	Grants to the Harvard University Band, as described in Line 1.	33063) (Hevenue \$)
	Grants to the marvard Griver sity Danu, as described in Line 1.	
		·
		· <del></del>
4b	(Code:) (Expenses \$including grants of \$	) (Revenue \$)
		·
		······································
		,
		,
4c	(Code: ) (Expenses \$ including grants of \$	) (Revenue \$
70	(Code) (Expenses $\phi$	) (πονοπάο ψ
		,
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		OGDEN, UI
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ including grants of \$ ) (Revenue	e\$ )
4e	Total program service expenses	

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Part	Checklist of Required Schedules			
, `	In the organization described in section E01(oV2) or 4047(oV1) (other than a private foundation)? If "Ves."		Yes	No
'	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	✓	
2 3	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 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	2	✓_	
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.	3		<b>√</b>
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		<b>✓</b>
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		<b>✓</b>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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		1
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	<b>√</b>	_
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, 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		1
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		✓_
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 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	11e		✓ ✓
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		<b>✓</b>
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<b>✓</b>
14 a	, , , , ,	14a		<b>-</b>
ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
19	Did the organization report more than \$15,000 of gross income from garving activities of Rate of the sa?  If "Yes," complete Schedule G, Part III	19		1
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Part	Checklist of Required Schedules (continued)			
			Yes	No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	1	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			<u> </u>
	organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		1
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		1
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	_	1
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		✓
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .	24d		✓
25a	<b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		1
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		<b>√</b>
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 "Yes," complete Schedule L, Part II	26		1
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 of any of these persons? If "Yes," complete Schedule L, Part III	27		1
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? <i>If "Yes," complete Schedule L, Part IV</i>	28a		1
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		1
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		7
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		<b>√</b>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		/
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	<b>√</b>	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	_	1
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.	35b		_
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2.	36		1
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,	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O. and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	38	1	
	10. Hotel / M. / Gilli dad included to demplote contende of		<sup>n</sup> 88∪	(2017)
		LOU	., 550	(2017)
	OGDEN, UT			

Part	Statements Regarding Other IRS Filings and Tax Compliance				
	Check if Schedule O contains a response or note to any line in this Part V	<u>.</u> .	<u>.</u> .	. 🔲	
			Yes	No	
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a -0.				
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b -0-				
C	Did the organization comply with backup withholding rules for reportable payments to vendors and				
_	reportable gaming (gambling) winnings to prize winners?	1c	✓	<u> </u>	
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			<b>  </b>	
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		<del></del>	
20	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		<u> </u>	
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		<del></del>	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial	ļ			
	account)?	4a		<b>/</b>	
b	If "Ves" enter the name of the foreign country:	a	-	<del>-</del>	
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts	Ì			
	(FBAR)				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		<b>√</b>	
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		7	
C	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 any contributions that were not tax deductible as charitable contributions?	6a		✓	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or				
	gifts were not tax deductible?	6b		L	
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			البا	
	and services provided to the payor?	7a		<b>✓</b>	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	_7b		<del></del>	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>_</b> _			
	15/04 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	7c		<b>V</b>	
d e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			
f	Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?	7f		1	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<del>-</del>	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h			
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			Ī	
	sponsoring organization have excess business holdings at any time during the year?	8			
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a_			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? .	_9b_			_
10	Section 501(c)(7) organizations. Enter:	KE(	CE	IVE	_
а	Initiation fees and capital contributions included on Part VIII, line 12				_
ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . Section 501(c)(12) organizations. Enter	DE	2	8 2018	
11			<b>~</b> `		
a b	Gross income from members or shareholders	2	\	<del>                                     </del>	_
U	against amounts due or received from them.)	νG	ヒ	<u>٧, س</u>	ĺ
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year .   12b	120		<del>-</del>	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		<b>_</b>	
-	Note. See the instructions for additional information the organization must report on Schedule O			Ī	
b	Enter the amount of reserves the organization is required to maintain by the states in which	Į į		( <b>l</b>	
	the organization is licensed to issue qualified health plans				
С	Enter the amount of reserves on hand	1			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		✓	
<u>b</u> _	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b			
		Forr	n <b>990</b>	(2017)	

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S. Check if Schedule O contains a response or note to any line in this Part VI	ee ins		
Section	on A. Governing Body and Management			
	· · · · · · · · · · · · · · · · · · ·		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
ь 2	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 officer, director, trustee, or key employee?		<del></del>	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3	<b>√</b>	_
4 5	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?	4		<b>√</b>
6 7a	Did the organization have members or stockholders?	6 7a		√ ✓
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	_	1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8a	<b>√</b>	-
9	Each committee with authority to act on behalf of the governing body?	8b 9		_
Section	on B. Policies (This Section B requests information about policies not required by the Internal Reven		ode.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		1
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	<b>✓</b>	ļ.,
12a	Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers directors as fructure and law employees required to declare any officers that event that even that event that even that event that even that event that even	12a	<b>√</b>	
b c	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12b	1	
13 14	Did the organization have a written whistleblower policy?	13	<b>√</b>	
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 tielliperation and degision?			
a b	The organization's CEO, Executive Director, or top management official DEC 2.8 2018.	15a 15b		1
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?			
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	16a		<b>✓</b>
Coati	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
17	on C. Disclosure  List the states with which a copy of this Form 990 is required to be filed ► Massachusetts			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	501(	c)(3)s	only)
19	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)  Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of integration in the statements available to the public during the tax year.	erest (	policy	, and
20	State the name, address, and telephone number of the person who possesses the organization's books and red. A. Michael Ruderman (Clerk), 9 Alton Street, Arlington MA 02474 telephone 781-929-7847	cords	•	

Form	ann	1001	7

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

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

- 1a Complete this table for all persons required to be listed. 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.

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

Check this box if neither the organization no				(0	<b>C)</b>					
<b>(A)</b> Name and Title	(B) Average hours per week (list any	box, office	ot ch unles er and	eck s pe d a d	rson	than o is both or/trust	an ee)	(D)  Reportable compensation from	(E)  Reportable compensation from related	(F) Estimated amount of other
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Mark Bagley, Director	1	<b>✓</b>						o	0	
(2) James A. Bell, Director	1	<b>√</b>						0	0	
(3) Lauren Bell, Director	1	1						0		
(4) Scott A Berney, Director	1	1			_		_	0		
(5) John S Connolly Jr., Director	1	<b>→</b>						0		
(6) Sam Coppersmith, Director	1 1	·						0	-	
(7) Alisha Creel, Vice President and Director	1	· ·		<b>✓</b>				0		
(8) David S. Green, Director	1	<b>√</b>						0		
(9) Rachel Hawkins, Director	1	·						0		
10) Courtenay L Kessler, Director	1	<u> </u>			_			0		
11) Elizabeth Moroney, Director	1	· ·						0		
12) Elaine B Murphy, Director	1	<i>'</i>						0		
(3) Corey O'Hara, Director	1	<u> </u>					1		EIVED •	<del></del>
14) J. Mark Patek, Director	1	<b>V</b>							SCA	
<del></del>	<u></u>	L_ <b>-</b>	<u>i                                     </u>					DEC°	28 2018 8-SR	Form <b>990</b> (20
								OGD	EN, UT	

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Part VII Section A. Officers, Directors, Trust	tees, Key E	mploy	/ees			lighe	st C	ompensated E	mployees (co.	ntinued)
(A) Name and title	(B) Average hours per week (list any	box, i	ot ch unles	s per	tion more	e than o	an ee)	(D)  Reportable compensation from	(E) Reportable compensation fr	(F) Estimated om amount of other
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MIS	compensation
5) Shep Rainie, Director	1	1						0		0 0
6) A. Michael Ruderman, Clerk and Director	3	1		/				0		0 0
7) Marlowe A. Sigal, Director	1	1						0		0 0
8) Evelyn J Tate, Director	1	<i>'</i>						0		0 0
9) Cammie O'Connor Wynn, President and rector	3			<b>✓</b>				0		0 0
0) Timur Kaya Yontar, Treasurer and Director	3	1						0		0 0
1)				Ť						
2)										
3)										
4)						_				
5)										
1b Sub-total c Total from continuation sheets to Part d Total (add lines 1b and 1c)	VII, Sectio						<b>&gt; &gt; &gt;</b>	0		0 0 0 0
Total number of individuals (including but reportable compensation from the organi	not limited		ose	list	ed a	<u> </u>	_			
3 Did the organization list any former of employee on line 1a? If "Yes," complete s									est compens	Yes No
For any individual listed on line 1a, is the organization and related organizations individual	greater th		50,	000	? //	f "Ye	s, "			n the
5 Did any person listed on line 1a receive of for services rendered to the organization?									ation or indiv	idual 5
ection B. Independent Contractors										
1 Complete this table for your five highest compensation from the organization. Repyear.										
(A) Name and business add	ress			_		. <u>-</u>		(B) Description of s	ervices	(C)
										<u>UEOEIAE</u>
							_			
Total number of independent contractor	ors (includir	ng bu	it no	ot li	ımıt	ed to	th	ose listed abo	ove) who	OGDEN, UT

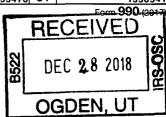
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Part	VIII		a rooponee er nets t		Dort VIII		
		Check if Schedule O contains	a response or note to	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
T.S	1a	Federated campaigns	1a	,			
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b				
s, C Am	С	Fundraising events	1c				
Gift lar	d	Related organizations	1d				
ini	e	Government grants (contributions)	1e				
tior er S	f	All other contributions, gifts, grants,					1
ig ¥		and similar amounts not included above	1f 6523				
th C	g	Noncash contributions included in lines 1a-	-1「\$				
	h	Total. Add lines 1a-1f .	<u> </u>	6523			
Program Service Revenue	_		Business Code				
eve	2a						<del></del>
еВ	b			<u> </u>		ļ	<del> </del>
Ş	C						<del> </del>
Se	d	•••••		_	<del></del>		<del></del>
ram	e	All		-			<del></del>
rog	f	All other program service revenu				<u> </u>	<u> </u>
	<u>g</u> 3	Total. Add lines 2a–2f				<del></del>	<del></del>
	"	and other similar amounts) .		25470			
	4	Income from investment of tax-exer		25178			<del> </del>
	5	<b>-</b>					<del> </del>
		Royalties		-	<del></del>	<del></del>	<del>                                     </del>
	6a	Gross rents	_ <del></del>	}			
	b	Less rental expenses					
	c	Rental income or (loss)		1			1
	ď	Not reptal in a series on (1)	<u> ▶ </u>	-			-
	7a	Gross amount from sales of (i) Securiti					1
		assets other than inventory		[			
	b	Less. cost or other basis		1			
		and sales expenses					
	С	Gain or (loss) .					
ļ	d	Net gain or (loss)	<u></u> . <b>&gt;</b>				
ence	Ва	Gross income from fundraising					
Other Reve		events (not including \$ of contributions reported on line 10	 c).				
her		See Part IV, line 18	· a				
ᅙ		Less. direct expenses .	. b				<u> </u>
		Net income or (loss) from fundra	·	<u> </u>			<del> </del> ;
	9a	Gross income from gaming activity					1
			· a				
Ì		Less: direct expenses .	. b	·			<u> </u>
		Net income or (loss) from gaming					<del>                                     </del>
	iva	Gross sales of inventory, I returns and allowances					
l			· a	1		<b></b>	TEARN TEA
	l	Less cost of goods sold Net income or (loss) from sales of				<b> <u>-</u>-</b>	ECEIVED
}	<u>c</u>	Miscellaneous Revenue	Business Code	<del>                                     </del>	- <del></del>	N	+
l	11a				<u></u>	3522	DEC-2-8-2018
	l la b					<del>  @ -</del>	
	C			-			10000
ļ	d	All other revenue		-		<del>                                     </del>	GDEN, UT
	e	Total. Add lines 11a-11d	·	<del>                                     </del>			
	12	Total revenue. See instructions		24704	<del></del> ·	<del></del>	<del> </del>

- Cúi	on 501(c)(3) and 501(c)(4) organizations must com				
	Check if Schedule O contains a response tinclude amounts reported on lines 6b, 7b, b, and 10b of Part VIII.	(A) Total expenses	e in this Part IX .  (B)  Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	39063	39063	general expenses	expenses
2	Grants and other assistance to domestic individuals. See Part IV, line 22	3333	55555		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages				
9 10	Other employee benefits				
11 a	Fees for services (non-employees).  Management				
b	Legal				
d e	Lobbying				
f g	Investment management fees Other (If line 11g amount exceeds 10% of line 25, column				
12	(A) amount, list line 11g expenses on Schedule O) .  Advertising and promotion				
13 14	Office expenses				
15 16	Royalties				
7  8	Travel				
9	Conferences, conventions, and meetings				RECEIVE
21	Payments to affiliates  Depreciation, depletion, and amortization			ଷ୍ଟ	DFC 2.8 201
23	Insurance			8522	UFL 4.0 2011
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24c It				OGDEN, U

а	Management				
b	Legal				
С	Accounting				
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column	-			
	(A) amount, list line 11g expenses on Schedule O) .				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .				DECENIED.
20	Interest			1 _	RECEIVED
21	Payments to affiliates				
22	Depreciation, depletion, and amortization			22	DFC 2.8 2018
23	Insurance			ĬĎ.	
24	Other expenses Itemize expenses not covered				OODEN UT
	above (List miscellaneous expenses in linc 24c It				OGDEN, UTI
	line 24e amount exceeds 10% of line 25, column			<b></b>	
	(A) amount, list line 24e expenses on Schedule O)				
а	Foreign fees on investments	857		8 <u>5</u> 7	
b					
C					
d					
е	All other expenses miscellaneous	35		35	
25_	Total functional expenses. Add lines 1 through 24e	39955	39063	892	
26	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation. Check here ▶ \				
	following SOP 98-2 (ASC 958-720)				
					Form <b>990</b> (2017)

	rtχ	Balance Sneet			
	<u>.                                    </u>	Check if Schedule O contains a response or note to any line in this Pai	tX		<u> </u>
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	22655	1	26931
	2	Savings and temporary cash investments		2	
1	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	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	
ļ	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 contributing employers and			
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
တ္က		organizations (see instructions) Complete Part II of Schedule L	<u> </u>	6	
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
•	10a	Land, buildings, and equipment cost or			
		other basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b		10c	
-	11	Investments—publicly traded securities	1232821	11	1303410
1	12	Investments—other securities. See Part IV, line 11 [	0	12	0
1	13	Investments – program-related. See Part IV, line 11		13	
1.	14	Intangible assets		14	
•	15	Other assets See Part IV, line 11		15	
-	16	Total assets. Add lines 1 through 15 (must equal line 34)	1255476	16	1303410
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	_ <del></del>
	19	Deferred revenue		19	<del></del>
1 -	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	
Liabilities	22	Loans and other payables to current and former officers, directors,			
<b>≣</b>		trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	<del></del>		
ia	2			22	
1 -	23 24	Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third		24	<del></del>
1	25	parties, and other liabilities not included on lines 17-24) Complete Part X		1	
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0	26	0
		Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and			
Se		complete lines 27 through 29, and lines 33 and 34.		- {	
ğ z	27	Unrestricted net assets	1224131	27	1293996
ag 2	28	Temporarily restricted net assets	- 31345	28	36345
교 2	29	Permanently restricted net assets		29	
声		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and □			
ᇹ		complete lines 30 through 34.			
\$ 3	30	Capital stock or trust principal, or current funds		30	
SSe	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds		32	
<u> </u>	33	Total net assets or fund balances	1255476	33	1330341
3	34	Total liabilities and net assets/fund balances	1255476	34	1330341
					50m_990_(2017 CEIVED



RECEIVED
DEC 2.8 2018
OGDEN, UT

Form 990 (2017)

# SCHEDULE A (Form 990 or 990-EZ)

**Public Charity Status and Public Support** 

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

Attach to Form 990 or Form 990-EZ.

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

2017
Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.  The organization is not a private foundation because it is, for lines 1 through 12, check only one box.)  1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(ii).  2 A school described in section 170(b)(1)(A)(ii), Attach Schadule E Form 990 or 990-EZ).  3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).  4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii).  5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv).  6 A leteral, state, or local government or governmental unit described in section 170(b)(1)(A)(iv).  7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(iv). Complete Part II)  8 A community frust described in section 170(b)(1)(A)(iv). Complete Part II)  9 An agricultural research organization described in section 170(b)(1)(A)(iv). Complete Part II)  9 An organization internation organization described in section 170(b)(1)(A)(iv). Complete Part II)  10 An organization internation organization described in section 170(b)(1)(A)(iv). Complete Part II)  11 A organization organization organization described in section 170(b)(1)(A)(iv). Complete Part II)  12 An organization internation organization described in section 170(b)(1)(A)(iv). Complete Part II)  12 An organization organization organization described in section 170(b)(1)(A)(iv). Complete Part II)  12 An organization organization artificial in 31, 975. See section 590(a)(iv) or section 590(a)(iv) or one than 33/4% of its support from gross investment income and unrelated business taxable income (less section 590(a)(iv). See section 590(a)(iv). See section 590(a)(iv) or section 590(a)(iv). See sect	· ·						
The organization is not a private foundation because it is. [For lines 1 through 12, check only one box,]    A school described in section 170(b)(1)(A)(ii), (Attach Schedule E (Form 990 or 990-E2))   A school described in section 170(b)(1)(A)(ii), (Attach Schedule E (Form 990 or 990-E2))   A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii),   A hospital or a cooperative hospital service organization objected in section 170(b)(1)(A)(iii),   A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii),   A community in the section of the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv), (Complete Part II)   A community institute of the section 170(b)(1)(A)(iv), (Complete Part II)   A community institute organization described in section 170(b)(1)(A)(iv), (Complete Part II)   A community institute organization described in section 170(b)(1)(A)(iv), (Complete Part II)   A community institute organization described in section 170(b)(1)(A)(iv), (Complete Part II)   An arganization institute organization described in section 170(b)(1)(A)(iv), (Complete Part II)   An arganization institute organization described in section 170(b)(1)(A)(iv), (Complete Part II)   An organization institute organization described in section 170(b)(1)(A)(iv), (Complete Part II)   An organization institute organization described in section 170(b)(1)(A)(iv), (Complete Part II)   An organization institute organization described in section 170(b)(1)(A)(iv), (Complete Part II)   An organization institute organization and complete live organization organization and complete live organization and complete organization organizatio	Harvard Band Foundation, Inc.					04-27	199839
A church, convention of churchs, or association of churches described in section 170(b)(1)A(ii),   A church, convention of churchs, or association of churches, or association in section 170(b)(1)A(iii),   A chapter of the section 170(b)(1)A(iii),   Complete Part II.)   A regardation that normally receives a substantial part of its support from a governmental unit described in section 170(b)(1)A(iii),   Complete Part II.)   A community trust described in section 170(b)(1)A(iii),   Complete Part II.)   A community trust described in section 170(b)(1)A(iii),   Complete Part II.)   A community trust described in section 170(b)(1)A(iii),   Complete Part II.)   A community trust described in section 170(b)(1)A(iii),   Complete Part II.)   A community trust described in section 170(b)(1)A(iii),   Complete Part II.)   A community trust described in section 170(b)(1)A(iii),   Complete Part II.)   A community trust described in section 170(b)(1)A(iii),   Complete Part II.)   A magnetization that normally receives (1) more than 33'x3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33'x3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33'x3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33'x3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject for machipation of gross and subject of certain exception of gross and subject	Part I Reason for Public Ch	arity Status (All	organizations must	comple	te this p	art.) See instruction	ons.
Section 170(b)(1)(A)(iv), (Complete Part II.)    An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(v). (Complete Part II.)   An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(v). (Complete Part II.)   An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(v). (Complete Part II.)   An organization in a complete Part II.)   An agricultural research organization described in section 170(b)(1)(A)(v), operated in conjunction with a land-grant college or university:   An organization that normally receives (1) more than 33°/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33°/3% of its support from gross investment income and unrelated business taxable income (less section 509(a)(4).   An organization organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)   An organization organized and operated exclusively to test for public safety. See section 509(a)(4).   An organization organized and operated exclusively to test for public safety. See section 509(a)(4).   Check the box in lines 12a through 12d that describes the type of supporting organizations of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3).   Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.   Type I. A supporting organization supervised or ore ore dect a majority of the directors or trustees of the supported organization (s) the purpose organization organization organization organization organization organization organization organi	<ol> <li>A church, convention of church</li> <li>A school described in section</li> <li>A hospital or a cooperative hundred</li> <li>A medical research organiza</li> </ol>	rches, or associati in 170(b)(1)(A)(ii). iospital service org tion operated in co	ion of churches descr (Attach Schedule E (F ganization described i	ibed in <b>s</b> e orm 990 n <b>sectio</b> i	ection 17 or 990-E n 170(b)(1	<b>(O(b)(1)(A)(i).</b> Z).) <b>()(A)(iii).</b>	(iii). Enter the
7	5 An organization operated fo	r the benefit of a	college or university	owned o	r operate	ed by a government	tal unit described in
An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:  10	7 An organization that normal	y receives a subs	stantial part of its sup				m the general public
or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university;  10	8	in section 170(b	)(1)(A)(vi). (Complete	Part II)			
receptbs from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)  11	9 An agricultural research orga or university or a non-land-g university:	inization described rant college of agr	d in <b>section 170(b)(1)</b> riculture (see instruction	(A)(ix) op ons) Ente	er the nan	ne, city, and state of	f the college or
12	receipts from activities related support from gross investme acquired by the organization	ed to its exempt fuent income and un after June 30, 19	inctions—subject to c irelated business taxa 75. See <b>section 509(</b> a	ertain exi ble incon a)(2). (Coi	ceptions, ne (less se mplete Pa	and (2) no more tha ection 511 tax) from art III.)	in 331/3% of its
of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.  a		•	•	•			
Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.  a		•	-				• • •
the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.  b	Check the box in lines 12a th	rough 12d that de	scribes the type of sup	porting	organizati	on and complete line	es 12e, 12f, and 12g.
control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.  Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.  d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.  e Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization.  f Enter the number of supported organizations  g Provide the following information about the supported organization(s).  (ii) Name of supported organization  (iii) EIN  (iii) Type of organization  (iv) Is the organization  (iv) Amount of monetary support (see instructions)  (iv) Amount of monetary support (see instructions)  (iv) Amount of other support (see instructions)	the supported organization	on(s) the power to	regularly appoint or e	elect a ma	ajority of t	• ' '	
Its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.  d	control or management of	of the supporting o	organization vested in	the same			
that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V.  e    Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization.  f    Enter the number of supported organizations							ally integrated with,
functionally integrated, or Type III non-functionally integrated supporting organization.  f Enter the number of supported organizations	that is not functionally int	egrated. The orga	inization generally mu	st satisfy	a distribu	ution requirement ar	
f Enter the number of supported organizations							e II, Type III
(i) Name of supported organization (ii) EIN (iii) Type of organization (described on lines 1–10 above (see instructions))  (A) Harvard University Band (CC) (CD) (DD)  (DD)  (III) Type of organization (listed in your governing document?  (IV) Is the organization (iv) Amount of monetary support (see instructions)  (Vi) Amount of monetary support (see instructions)  (Vii) Amount of monetary support (see instructions)  (IV) Amount of monetary support (see instructions)  (Vii) Amount of monetary support (see instructions)  (IV) Amount of monetary support (see instructions)					. ,		. 1
(described on lines 1–10 above (see instructions))    Support (see instructions)   Support (see instructions)	g Provide the following informati	on about the supr	ported organization(s).	•			
(A) Harvard University Band 04-3009105 (in) 7 / 39063 (B) (C) (C) (D) DEC 28 2018	(i) Name of supported organization	(II) EIN	(described on lines 1-10	listed in yo	ur governing	support (see	other support (see
Harvard University Band 04-3009105 Line 7 39063  (B) RECEIVED  (C) DEC 28 2018				Yes	No	1	
(B) RECEIVED (C) DEC 28 2018	A) Harvard University Band	04-3009105	Cine 7	,		39063	
(C) (D)    C)   CD   CD   CD   CD   CD   CD   CD   CD							
(D) DEC 28 2018			ļ				RECEIVED
	(C)			1	1	اما	
						88	DEC 28 2018
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Total

Part	Support Schedule for Organiza (Complete only if you checked th						
	Part III. If the organization fails to						
	on A. Public Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4			1			
	on B. Total Support						
_	dar year (or fiscal year beginning in)	(a) 2013	<b>(b)</b> 201⁄4	(c) 2015	(d) 2016	(e) 2017	(f) Total
7	Amounts from line 4			<u> </u>	<del></del>		
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources		/				
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10			1			
12	Gross receipts from related activities, etc.	;		· /.		12	
13	First five years. If the Form 990 is for the organization, check this box and stop he	re	· · · · ·	d, third, fourth	n, or fifth tax y	ear as a section	on 501(c)(3)
	on C. Computation of Public Suppor			1 12			
14	Public support percentage for 2017 (line 6 Public support percentage from 2016 Sch		•	1, column (t))		15	% %
15 16a	331/3% support test—2017. If the organi			x on line 13 ai	 nd line 14 is 3:		
	box and <b>stop here</b> . The organization qua						. , <b>▶</b> □
b	331/3% support test—2016. If the organithis box and stop here. The organization	zation did not	check a box o	on line 13 or 16		ıs 33 <sup>1</sup> /3% or m	nore, check
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization me Part VI how the organization meets the " organization	ets the "facts	-and-circumst	ances" test, cl	heck this box :	and <mark>stop here</mark>	Explain in supported
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organiza	ition meets th	e "facts-and-o	circumstances	" test, check	this box and	stop here.
18	Explain in Part VI how the organization in supported organization $\int_{-\infty}^{\infty} \frac{1}{2\pi} dx$ . Private foundation. If the organization di						<b>&gt;</b> 🗆
	instructions	<u> </u>	<u> </u>	DEAL	VEN	<u> </u>	<u> </u>
	$\sqrt{}$		B522	DEC 28	O	hedule A (Form 99	0 or 990-EZ) 2017
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### Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sacti	on A. Public Support			, , , , , , , , , , , , , , , , , , , ,					—
	dar year (or fiscal year beginning in)	(a) 2013	<b>(b)</b> 2014	(a) 201E	(4) 2016	(5) 0	017	(f) Total	
Calen 1	Gifts, grants, contributions, and membership fees	(a) 2013	(0) 2014	(c) 2015	(d) 2016	(e) 2	<del>""-</del> +	(i) Total	<u> </u>
•	received (Do not include any "unusual grants")			,			ļ		
2	Gross receipts from admissions, merchandise					_/_	+		
_	sold or services performed, or facilities				1	/			
	furnished in any activity that is related to the	1			/	, 	ŀ		
2	organization's tax-exempt purpose .		<del></del>		/-		<del></del> +		
3	Gross receipts from activities that are not an unrelated trade or business under section 513			,	/ /		1		
4	Tax revenues levied for the			1					
	organization's benefit and either paid to			1			1		
_	or expended on its behalf			1					
5	The value of services or facilities			\	/				
•	furnished by a governmental unit to the			\ /	7				
_	organization without charge .		-	<del>                                     </del>					
6 70	Total. Add lines 1 through 5			<del>-                                    </del>					—
<i>r</i> a	Amounts included on lines 1, 2, and 3 received from disqualified persons			/					
		<u> </u>		<del>- \</del>	<del>   </del>			<del></del>	—
b	Amounts included on lines 2 and 3			A'					
	received from other than disqualified								
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	ı		/ 1			}		
_	· · · · · · · · · · · · · · · ·			<u> </u>	<del> </del>		$-\!-\!+$	<del></del>	
С 8	Add lines 7a and 7b		<del> </del> -	1			+		
0	line 6.)		. /	<b>\</b>			j		
Secti	on B. Total Support			+	L				
	dar year (or fiscal year beginning in)	(a) 2013	(b) 201/4	(c) 2015	(d) 2016	(-) 2	017 T	(f) Total	
Galen 9	Amounts from line 6 .	(a) 2013	(6) 2014	(6) 2015	(0) 2016	<b>(e)</b> 2	+	(I) 10la	<u></u>
10a	Gross income from interest, dividends,		<del>                                     </del>	<del>                                     </del>			<del></del>		—
iva	payments received on securities loans, rents,		/	\			Ì		
	royalties, and income from similar sources.		/	\					
b	Unrelated business taxable income (less	<del></del>	<del>'</del>	<del>                                     </del>	<del>-</del>		<del></del>		
J	section 511 taxes) from businesses		/	\					
	acquired after June 30, 1975		/	Ì	\				
~	Add lines 10a and 10b		/	<u> </u>	\				
11	Net income from unrelated business	<del></del> ,		<del>-</del> -	<del>-\ - </del>	<u>-R</u>	ECE	IVED	<del>)</del> —
••	activities not included in line 10b, whether	<i> </i>			\	[			٦Ö
	or not the business is regularly carried on	/					ובר ין	8 2018	S
12	Other income Do not include gain or	<del></del>	<del> </del>			저	the fe	O CUID	RS-OSC
	loss from the sale of capital assets				<u>\                                   </u>	L		<del></del>	
	(Explain in Part VI.)	/			1	0	GDE	N, UT	
13	Total support. (Add lines 9, 10c, 11,	<del>' ' ' '</del>				$\overline{}$			
	and 12.)	<i> </i>							
14	First five years. If the Form 990 is for the	ne organization	n's first, secon	d, third. fourth	, or fifth tax ve	ear as a	section	501(c)(3)	
	organization, check this box and stop he	- 1			,			— . ►	
Section	on C. Computation of Public Suppor		e						
15	Public support percentage for 2017 (line 8			3, column (fl)	<del></del>	15			%
16	Public support percentage from 2016 Sch					16			<del>%</del>
	on D. Computation of Investment In								_
17	Investment income percentage for 2017 (			y line 13, colur	nn (f))	17			%
18	Investment income percentage from 2016			•		18			%
19a	331/3% support tests-2017. If the organ				nd line 15 is m		n 33¹/3%	, and line	<del>,</del> —
	17 is not more than 331/3%, check this box								
b	331/3% support tests - 2016. If the organiz	ation∖did not c	heck a box on	line 14 or line 1	19a, and line 16	is more	e than 30	3 <sup>1</sup> /3%, and	
-	line 18 is not more than 331/3%, check this l								
20	Private foundation. If the organization di		-				-		

### Part IV Supporting Organizations

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

ecu	on A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.			
_		1	<b>√</b>	-
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).			<u>_</u>
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			-
	(b) and (c) below	3a		_/
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use	3c		
4a		4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.			
_		4b	<u> </u>	
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
	purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action			
_	was accomplished (such as by amendment to the organizing document)	5a		✓
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or		-	
	benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6		>
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with			
_	regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	7		✓
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	8		1
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more	۳		
	disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .	9a	<del></del>	<b>✓</b>
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .	9b		· •
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI.</b>	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			
	supporting organizations)? If "Yes," answer 10b below	10a		<b>\</b>
<b>b</b>	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b		>
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Part	Supporting Organizations (continued)			_
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		<b>V</b>
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in <b>Part VI.</b>	11c		7
	on B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			,
	tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization			
Secti	on C. Type II Supporting Organizations	2	L.	<u> </u>
30011	on c. Type it Supporting Organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			1
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
Coot	the supported organization(s)	1_		
Secu	on D. All Type III Supporting Organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		163	110
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	<u> </u>		
_	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1_	✓_	L.,
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how			
	the organization maintained a close and continuous working relationship with the supported organization(s)	2		<del></del>
3	By reason of the relationship described in (2), did the organization's supported organizations have a			Ì
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard			
<u></u>		3	✓_	
Secti	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i	nstru	ction	s).
a	The organization satisfied the Activities Test. Complete line 2 below			
b C	<ul> <li>☐ The organization is the parent of each of its supported organizations. Complete line 3 below.</li> <li>☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity.</li> </ul>		otri i ot	اممما
C	The organization supported a governmental entity. Describe in Fait VI how you supported a government entity (	366 111		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			1
	that these activities constituted substantially all of its activities.	2a	<b>-</b>	
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in the resolution in Part VI the			
	reasons for the organization's position that its supported organizations would have engaged these activities but for the organization's involvement			لـــــــــــــــــــــــــــــــــــــ
3	Parent of Supported Organization's involvement  Parent of Supported Organizations Answer (a) and (b) below.	2b	✓_	
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
_	trustees of each of the supported organizations? Provide details in Part (DGDEN, UT	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

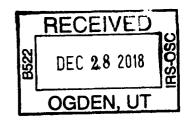
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jani	zations	
1 · Check here if the organization satisfied the Integral Part Test as a qualifying			ain in Part VI). See
instructions. All other Type III non-functionally integrated supporting organ			
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
<b>b</b> Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI)			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functionall instructions)	y int	tegrated Type III supporti	ng organization (see

Schedule A (Form 990 or 990-EZ) 2017



Part	Type III Non-Functionally Integrated 509(a)(3	) Supporting Organi	zations (continued)	
Secti	on D - Distributions			Current Year
1_	Amounts paid to supported organizations to accomplish	exempt purposes		
2	Amounts paid to perform activity that directly furthers exe	mpt purposes of suppo	rted	
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purp	nizations		
4	Amounts paid to acquire exempt-use assets			<del></del>
5	Qualified set-aside amounts (prior IRS approval required)	<del></del> _		
6	Other distributions (describe in Part VI) See instructions.			<del></del>
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to whic	h the organization is res	ponsive	
	(provide details in Part VI) See instructions	•		
9	Distributable amount for 2017 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Se	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2017 (reasonable cause required—explain in <b>Part VI</b> ) See instructions.			
3	Excess distributions carryover, if any, to 2017	•		I
а				
b	From 2013			
C	From 2014			
d	From 2015			
е	From 2016			1
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2017 distributable amount			
i	Carryover from 2012 not applied (see instructions)			
<u>j</u>	Remainder. Subtract lines 3g, 3h, and 3i from 3f			į
4	Distributions for 2017 from Section D, line 7. \$		e#	
a	Applied to underdistributions of prior years			<u></u> _
b	Applied to 2017 distributable amount			
С	Remainder Subtract lines 4a and 4b from 4	,		
5	Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2. For result greater than zero, explain in <b>Part VI.</b> See instructions.			
6	Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in <b>Part VI.</b> See instructions.	٠		
7	Excess distributions carryover to 2018 Add lines 3 <sub>j</sub> and 4c			1
8	Breakdown of line 7			
а	Excess from 2013			
b	Excess from 2014 .			
С	Excess from 2015			
d	Excess from 2016 .			
е	Excess from 2017			
	· — — — — — — — — — — — — — — — — — — —			

Schedule A (Form 990 or 990-EZ) 2017



Part VI

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Part IV, Section D, Question 2 Nearly all of the Harvard Band Foundation (HBF)'s directors were, in their student days, either Managers (the
chief executive officer) or members of the Senior Staff of the Harvard University Band (HUB), which together constitute the governing body of
the HUB (the supported organization). HBF directors maintain a close and continuous working relationship with today's HUB Manager and
Senior Staff through twice-yearly HBF Board of Directors meetings, the Manager and Senior Staff attending and contributing their views,
more frequent committee meetings (HBF's directors committees include and consult with their student counterparts for Alumni Relations,
Investments and the like), and numerous, casual contacts between Directors and undergraduates at HUB performances. Additionally, the
music directors of the HUB attend HBF board meetings, provide reports and consult frequently with the board of directors.
IV, D, 3 Aside from its operating overhead, the HBF spends no money from its funds for anything other than the grants as specifically
requested by the HUB, thus ensuring that the HUB has a significant voice in directing the use of the HBF's assets. The HBF's investment
policies are structured to provide ongoing, reliable resources for the purposes proposed by the HUB
IV, E, 2a The HBF has no independent undertakings or Board-selected projects. We fund specific activities, and underwrite the specific
costs, of our one and only supported organization, the HUB Examples include the repair and purchase of musical instruments, uniforms,
office technology and sound recording equipment, along with the costs of travel to performance venues and the securing of rights to perform
specific compositions Every grant request is scrutinized by the Grants committee before funding and must be found to be in keeping with
the HUB's mission as a student performing organization
IV, E, 2b: But for the HBF's funding of specifically requested needs of the HUB, as identified by the HUB, the HUB would have to spend its
own money on all and the same expenses, AND would have to engage in the same fundraising, donor cultivation, and investing the HBF
performs to make these funds available.
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## SCHEDULE D. (Form 990)

Department of the Treasury Internal Revenue Service

## **Supplemental Financial Statements**

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

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

OMB No 1545-0047
2017
Open to Public

Inspection

Name of the organization Employer identification number Harvard Band Foundation Inc. 04-2799839 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year . , . Aggregate value of contributions to (during year) 2 3 Aggregate value of grants from (during year) . 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 funds are the organization's property, subject to the organization's exclusive legal control? . ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used 6 only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No Conservation Easements. Part II Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area ☐ Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified 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 Total number of conservation easements . 2a Total acreage restricted by conservation easements . . . 2b Number of conservation easements on a certified historic structure included in (a) . . . Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register . . . . 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 violations, and enforcement of the conservation easements it holds? 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? . . . . . . . . . . . . . . . . In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue works of art, historical treasures, or other similar assets held for public pub br research in furtherance of public service, provide the following amounts relating to these items. (i) Revenue included on Form 990, Part VIII, line 1 . If the organization received or held works of art, historical treas Perfollowing amounts required to be reported under SFAS 110 (100) DEC 28 2018 \$ or other similar asset financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) re Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

	lie D (Form 990) 2017					Page ∠
Par						
3	'Using the organization's acquisition, collection items (check all that apply).		her records, chec	k any of the follo	wing that are a sig	Inificant use of its
а	Public exhibition			or exchange pro	grams	
b	Scholarly research		e 🗌 Othei	, <del></del>		
С	☐ Preservation for future generations					
4	Provide a description of the organiza XIII.	tion's collections a	and explain how t	ney further the or	ganızatıon's exemp	ot purpose in Part
5	During the year, did the organization assets to be sold to raise funds rather					☐ Yes ☐ No
Part	IV Escrow and Custodial Arra	angements.	_			
	Complete if the organization 990, Part X, line 21.				·	
1a	Is the organization an agent, trustee included on Form 990, Part X? .		er intermediary fo		or other assets not	☐ Yes ☐ No
b	If "Yes," explain the arrangement in P	art XIII and comple	ete the following to	able:	Δm	ount
_	December halouse				_+	
C	Beginning balance	•	· · · ·	. 1	_ <del></del>	<del></del>
d	3 ,				_ <del></del>	<del></del>
e	Distributions during the year .	• • •				
f	Ending balance			<u>1</u>	<del></del>	
2a	Did the organization include an amount					
b		art XI <u>II.</u> Check here	e if the explanation	n has been provid	led on Part XIII .	<u> Ll</u>
Par	t V Endowment Funds.					
	Complete if the organization		" on Form 990, f	Part IV, line 10.		
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance .	1255476	11 <u>62</u> 531	1242818	1235842	1148805
b	Contributions	6523	1753	7044	16693	31594
С	Net investment earnings, gains, and losses	108297	129928	(43680	) 43472	138040
ď	Grants or scholarships	(39063)	(33640)	(39551		(78171)
e	Other expenditures for facilities and programs	(33003)	(33040)	(39331	(37000)	
f	Administrative expenses	(892)	(5096)	(4100	(1323)	(4426)
g	End of year balance	1330341	1255476			
2	Provide the estimated percentage of t					1200012
a	Board designated or quasi-endowmer		, -	, 55,411 (4), 1.5,4		
b	Permanent endowment ►	%	/ 0			
c	Temporarily restricted endowment ▶	2 73%				
Ū	The percentages on lines 2a, 2b, and		00%.			
3a	Are there endowment funds not in the			at are held and a	dministered for the	<del></del>
	organization by:					Yes No
	(i) unrelated organizations					3a(i) ✓
	(ii) related organizations			•	•	3a(ii) ✓
b	If "Yes" on line 3a(ii), are the related o	rganizations listed	as required on So	chedule R? .		3b
4	Describe in Part XIII the intended uses	s of the organization	n's endowment fo	ınds.		
Parl	VI Land, Buildings, and Equip	ment.				
	Complete if the organization	answered "Yes'	' on Form 990, F	Part IV, line 11a.	See Form 990, F	art X, line 10.
	Description of property	(a) Cost or oti	<del></del>		Accumulated	(d) Book value
	<del></del>	(investmi		ther)	depreciation	
1a	Land	<u>.                                    </u>				
þ	Buildings	·				<del></del>
С	Leasehold improvements					<u>_</u>
d	Equipment					
е	Other					
Total.	Add lines 1a through 1e (Column (d) n	nust egual Form 99	90, Part X, column	(B), line 10c.)		
					Sched	ule D (Form 990) 2017
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Part VII	Investments—Other Securities.			
	Complete if the organization answ	vered "Yes" on For	m 990, Part IV, line	11b. See Form 990, Part X, line 1
	(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				
	neld equity interests			
<b>3)</b> Other				
(A)				
(B)				
(C)				
(D)				
(E)				<del></del>
(F) (G)			<del></del>	
(H)				
	h) must say of Farm 000. Part V and /D line 10.)			
Part VIII	b) must equal Form 990, Part X, col. (B) line 12 ) ► Investments—Program Related		<u> </u>	
ait VIII	Complete if the organization answ		m 000 Part IV line	11c See Form 990 Part V line 1
	(a) Description of investment	vered res offici	(b) Book value	(c) Method of valuation
	(a) Description of investment		(b) Book value	Cost or end-of-year market value
(1)			<del></del>	<del></del>
(2)				· · · · · · · · · · · · · · · · · · ·
(3)				
(4)				
(5)				
(6)			-	
(7)	<del></del>		-	
(8)				
(9)			_	
	b) must equal Form 990, Part X, col (B) line 13 ) ▶			
Part IX	Other Assets.		<u></u>	
	Complete if the organization answ	vered "Yes" on For	m 990, Part IV, line	11d. See Form 990, Part X, line 1
	(a)	Description		(b) Book value
(1)				
(2)				
(3)	_ <del></del>			
(4)				
(5)		<del></del>		
(6)				
(7)				
(8)	<del>-</del>		<del></del>	·
(9)	mn (b) must equal Form 990, Part X, co	1 /P) lino 15 )	<del></del>	
Part X	Other Liabilities.	i. (b) line 13.)	<u> </u>	· · · · · · · · · · · · · · · · · · ·
rartA	Complete if the organization answ	ered "Ves" on For	m 000 Part IV line	11e or 11f See Form 990 Part Y
	line 25.	TOTOG TES UITFUL	in 330, raitiv, ilile	The of This occionniaso, Part A
	(a) Description of liability	(b) Book value		
1) Federal in				
2)		<del></del>		
3)				DEOF
(4)				RECEIVE
(5)				<b>N</b>
( <del>6)</del>			<del></del>	B DEC 2.8 20
<del>(7)</del> (7)			<del></del>	[B] DEC 20 20
(8)	<del>-</del>			
(9)				OGDEN, U
	b) must equal Form 990, Part X, col. (B) line 25.) ▶			

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

Part			er Return.
	Complete if the organization answered "Yes" on Form 990,	, Part IV, line 12a.	
1	Total revenue, gains, and other support per audited financial statements	3	. 1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.		
а	Net unrealized gains (losses) on investments	2a	``
b	Donated services and use of facilities	2b	
С	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d		. 2e
3	Subtract line 2e from line 1		. 3
, 4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	·
C	Add lines <b>4a</b> and <b>4b</b>		. 4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		.   5
Part			per Return.
	Complete if the organization answered "Yes" on Form 990,	, Part IV, line 12a.	
1	Total expenses and losses per audited financial statements		. 1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.	10-1	
a	Donated services and use of facilities	2a	<u> </u>
b	Prior year adjustments	2b	<del> </del>
C	Other losses	2c	<u> </u>
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d		. 2e
3	Subtract line 2e from line 1	· · · · · · · · ·	. 3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	4-	
a	Investment expenses not included on Form 990, Part VIII, line 7b . Other (Describe in Part XIII.)	4a   4b	<u> </u>
b			<del> </del>
С 5	Add lines 4a and 4b		.   4c
Part			.   3
2; Part Part V	e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a ai XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this par ine 4: the purpose of the endowment is to be invested and provide income for Band, as described in Form 990 Part I Line 1; and to provide income for part II.	rt to provide any additiona or grants to, and supporting	Il Information. g the work of the Harvard
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# SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

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

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

	2017	Open to Pub Inspection
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OMB No 1545-0047

RS-OSC B522 **%** □ BIOS 87 DEd Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form (h) Purpose of grant or assistance Employer identification number **NED** See note, Part IV BECEL 04-2799839 ✓ Yes Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (g) Description of noncash assistance (e) Amount of non-cash assistance (book, FMV, appraisal, other) Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 39063 (d) Amount of cash grant Enter total number of other organizations listed in the line 1 table (c) IRC section (if applicable) the selection criteria used to award the grants or assistance? General Information on Grants and Assistance 501(c)(3) 04-3009105 (p) EIN 1 (a) Name and address of organization 74 Mt Auburn St, Cambridge MA (1) Harvard University Band Harvard Band Foundation Inc or government (2) 02138 Part II Part! € ପ 8 6 (12) N (2) 9 8 9

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Schedule I (Form 990) (2017)

Cat No 50055P

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

art III	art III Grants and Other Assistance to Domestic Individua Part III can be duplicated if additional space is needed	omestic Individua al space is needed	als. Complete if the	e organization answ	ividuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. seded.	Part IV, line 22.
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance  OSO-SHI
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art IV	Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.	the information re	equired in Part I, Irr	ne 2; Part III, columi	(b), and any other additi	onal information.
ive key	and, Link 2. We fromto the use of grant bridging be sold and of the Directors of this Foundation and account for the money granted to them, the reports then becoming permans	ort to meetings of the	Directors of this Four	ndation and account fo	r the money granted to them,	of the Directors of this Foundation and account for the money granted to them, the reports then becoming permanent
arts of th	irts of the minutes of our meetings					
II	ยน II, Line 1(h). repair and purchase of musical instruments, subsidy	nents, subsidy of unif	form and travel expen	ses; commissions of n	of uniform and travel expenses: commissions of new works, sponsorship of concerts.	certs.
			,			
			1			
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•						Schedule I (Form 990) (2017)

#### 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.

2017
Open to Public Inspection

Employer identification number

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.

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

Harvard Band Foundation Inc.	
990 Part VI line 11(b): we have distributed by email a copy of this 990 and its schedules to the Director	s and have solicited their comments
prior to the filing deadline.	
990 Part VI line 12(c) all officers, directors and committee members are aware of their duty to disclose	a possible conflict of interest to the
Board of Directors whenever the Foundation is contemplating entering into a transaction or arrangem	ent that might benefit private interests
of such a person. The conflict of interest policy is affirmed annually by the the newly-elected officers of	of the Foundation, and is re-affirmed
triennially by each Director of the Foundation upon the commencement of his or her term of office.	
Part VI line 19: the Foundation's Articles of Incorporation, Bylaws, Conflict of Interest Policy and most	recent Audited Financial
Statements (If prepared) are available upon request. We will provide these free of charge in electronic	files, or for a nominal copying charge
If in hard copy. The Foundation is an all-volunteer organization and requires five business days for su	ch a request.
990 Part VI line 2: directors Jamie Bell and Lauren Bell are married to each other	
Schedule R Part VI line 1(n) the Foundation shares the Harvard University Band's mailing list and mee	eting space. We value this sharing as
below the threshold for reporting in Schedule R Part V line 2.	
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# SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Related Organizations and Unrelated Partnerships

▶ Attach to Form 990.

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

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

OMB No 1545-004
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**Employer identification number** Inspection

(f)
Direct controlling
entity DSO-SHI Schedule R (Form 990) 2017 (g) Section 512(b)(13) ž controlled 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 organizations during the tax year. RECEIVED DEC 28 2018 OGDEN, UT Yes 04-2799839 (f)
Direct controlling
entity (e) End-of-year assets 8255 (f) (f) (f) (e) Public charity status (f) section 501(c)(3)) 509(a)(2) (d) Total income Identification of Disregarded Entities. Complete of the organization answered "Yes" on Form 990, Part IV, line 33. (d) Exempt Code section 501(c)(3) (c)
Legal domicile (state
or foreign country) Cat No 50135Y (c) Legal domicile (state or foreign country) Massachusetts (b) Primary activity Music Performance (b)
Primary activity For Paperwork Reduction Act Notice, see the Instructions for Form 990. (1)Harvard University Band, 74 Mount Auburn Street, (a) Name, address, and EIN (if applicable) of disregarded entity (a) Name, address, and EIN of related organization Cambridge MA 02138 EIN 04-3009105 Harvard Band Foundation Inc 3 ල Part I Part II 9 8 € 2 ව € Ξ 9 9 9

2	(2)	(P)	(a) (b) (c) (d) (e) (t)	-	€	(b)	ε	3	9	(8)
Primary activity	(c)  Legal domicile (state or foreign country)	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512 – 514		total ne	Share of end-of- Disproportionate year assets allocations?	(n) - Disproportiona allocations?	Code amount of Sche (Forn	Gener Gener mana partn	- Perc
							Yes No	0	Yes	o <sub>Z</sub>
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rganiza or more	tions Taxable	Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, Inne 34, because it had one or more related organizations treated as a corporation or trust during the tax year.	ntion or las a co	frust. Comp	elete if the trust durir	organizatic	on answer ear.	ed "Yes" on	Form 990	, Part IV,
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)		(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)		Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	-,
										Yes No
	ļ			!						
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						į				

Comprese to a ray sharty stated in refairst any state of the following transactions with one or more related organizations listed in Parts I—IV7  Recept of (interest, (ii) anothers, (iii) organization of the following transactions with one or more related organization for netated organization for netated organization(s)  Chit, grant, or capital contribution for netated organization(s)  Exchange of sease to or netated organization(s)  Exchange of sease the related organization(s)  Exchange of task for property to related organization(s)  Exchange	Schedule B (Form 900) 2017
11 10 10 10 10 10 10 10 10 10 10 10 10 1	
11	DEC 2.8 2.018
11	
11	none BFCFIVED
18	cash
16	(d) Method of determining amount involved
	ships and transaction thresholds.
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11a 12	10
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or 50.	34, 35b, or 36.

Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37. Part VI 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.

מ שניסטו וכעמונים לוומר אמים ווער מים וומרמים החשובים ווער מים וומרמים ווער מים וומרמים ווער מים וומרמים החשובים ווער מים וומרמים ווער מים ווע	garization. Occ	o cononciona de la cono	igning cyclus		בונשון	Stillielit pai	ı	;	- 1		
(a) Name, address, and EIN of entity	(D) Primary activity	(c) Legal domicile	(a) Predominant	(e) Are all part		(r) Share of	(9) Share of	(n) Disproportionate	(e) Code V—UBI		(K) Percentage
•	`		- 70	section 501(c)(3)		total income	_	allocatrons?	10 -	managing	
			from tax under	organizatio	ns?				(Form 1065)		
			sections 512-514)	Yes No	9			Yes No	T -	Yes No	
(1)	,										
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