For Paperwork Reduction Act Notice, see the separate instructions.

Department of the

DLN: 93493064006441

OMB No. 1545-0047

Return of Organization Exempt From Income Tax

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

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

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

Open to Public Inspection

Treasury Internal Revenue Service		ue Service	► Go to <u>www.irs.gov/Form990</u> for instructions and the latest information.					Inspection	
A For the 2019 calendar year, or tax year beginning 07-01-2019 , and ending 06-30-2020									
B Check if applicable: ☐ Address change ☐ Name change			C Name of organization TOWSON HIGH SCHOOL MUSIC BOOSTERS INC				D Employer identification number 52-1314060		
☐ Initial return ☐ Final return/terminated			Doing business as						
☐ Amended return ☐ Application pending			Number and street (or P.O. box if mail is not delivered to street address) Room/suite 69 CEDAR AVENUE				E Telephone number (410) 296-0265		
			City or town, state or province, country, and ZIP or foreign postal code TOWSON, MD 212867844			G Gross re	ceipts \$ 1	45,217	
			ANN HUTSON 402 ALABAMA RD suborc		Is this a group re subordinates? Are all subordinat		□Yes ☑No		
I Tax-exempt status:			include			included? If "No," attach a l		Yes No	
J W	ebsite	e:► N/A		1136(C110.) 1 4347(d)(1) 01 1 327	H(c) Group exemption num				
K Forr	n of org	ganization:	✓ Corporation ☐ Trust ☐ Asso	ciation ☐ Other ►	L Year of	f formation: 2009	M State	of legal domicile:	
Pa	art I	Sumi	marv						
	1 B	Briefly describe the organization's mission or most significant activities: SUPPLEMENT THE MUSIC PROGRAM AT A PUBLIC HIGH SCHOOL							
anc	=								
em e	-								
Governance								J 5	
								5	
Activities &	5 -	Total num	otal number of individuals employed in calendar year 2019 (Part V, line 2a)				5	0	
ξ	6 -	Total number of volunteers (estimate if necessary)					6	25	
Ă	7a -	Total unrelated business revenue from Part VIII, column (C), line 12					7a	0	
	b	Net unrel	ated business taxable income fron	1 Form 990-T, line 39	<u> </u>		7b	0	
						Prior Year	222	Current Year	
₫	l		Itions and grants (Part VIII, line 1h)		-		023	8,698 100,539	
Ravenue	l	-	•	ce revenue (Part VIII, line 2g)		61,8	11	11	
æ	l		, , , , , , , , , , , , , , , , , , , ,			17,0		20,572	
		Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)				85,9		129,820	
	13 (Grants and similar amounts paid (Part IX, column (A), lines 1–3)						0	
	14	Benefits paid to or for members (Part IX, column (A), line 4)						0	
&	l	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)						0	
Expenses	16a	Professio	ofessional fundraising fees (Part IX, column (A), line 11e)				\bot	0	
	l		I fundraising expenses (Part IX, column (D), line 25) ▶0						
		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)				91,		83,898	
		Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 18 from line 12				91,5		83,898 45,922	
Net Assets or Fund Balances					Begir	nning of Current Y		End of Year	
	20	Total asse	ets (Part X, line 16)			59,2	205	212,428	
	21	Total liabilities (Part X, line 26)				40,:	130	147,904	
			ssets or fund balances. Subtract line 21 from line 20				075	64,524	
Under know		lties of po and belie		ned this return, including accompanying Declaration of preparer (other than office					
		1	,			2024 02 02			
Here ANN HU		Signatu	**** 2021-02-02 patern of officer Date						
			UTSON TREASURER or print name and title						
		17	rint/Type preparer's name	Preparer's signature	Date		PTIN		
Paid Preparer Use Only							P01215174	1	
		r F	Firm's name ► LINZ & WRIGHT PA Firm's EIN ►						
		ly ြ	Firm's address ▶ 22 W PADONIA RD SUITE 308A Phone				667-6050		
			TIMONIUM, MD 21093						
May t	he IRS	discuss	this return with the preparer shov	vn above? (see instructions)				′es 🗌 No	

Cat. No. 11282Y

Form **990** (2019)