

Form **990**

Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047

2023

Open to Public Inspection

A For the **2023** calendar year, or tax year beginning 07/01/2023 and ending 06/30/2024

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization <u>STUDIO IN A SCHOOL ASSOCIATION, INC.</u>				D Employer identification number <u>13-3003112</u>	
	Doing Business As				E Telephone number <u>(212) 765-5900</u>	
	Number and street (or P.O. box if mail is not delivered to street address)		Room/suite			
	<u>75 WEST END AVENUE</u> City or town, state or province, country, and ZIP or foreign postal code <u>NEW YORK, NY 10023</u>				G Gross receipts \$ <u>14,543,836.</u>	
F Name and address of principal officer: <u>PATRICIA HEWITT</u> <u>75 WEST END AVENUE, NEW YORK, NY 10023</u>				H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
				H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No		
				If "No," attach a list. (see instructions)		
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527				J Website: ▶ <u>WWW.STUDIOINASCHOOL.ORG</u>		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶				L Year of formation: <u>1979</u> M State of legal domicile: <u>NY</u>		

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <u>TO FOSTER THE CREATIVE & INTELLECTUAL DEVELOPMENT OF STUDENTS OF ALL AGES & COLLABORATE WITH & SUPPORT EDUCATORS THROUGH QUALITY VISUAL ARTS PROGRAMS LED BY ARTS PROFESSIONALS</u>		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	<u>25</u>
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	<u>23</u>
	5 Total number of individuals employed in calendar year 2023 (Part V, line 2a)	5	<u>300</u>
	6 Total number of volunteers (estimate if necessary)	6	<u>23</u>
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	<u>NONE</u>
b Net unrelated business taxable income from Form 990-T, line 34	7b	<u>NONE</u>	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	<u>8,122,060.</u>	<u>10,155,601.</u>
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<u>507,231.</u>	<u>568,961.</u>
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<u>397,248.</u>	<u>1,240,186.</u>
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<u>-716,832.</u>	<u>-11,360.</u>
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<u>8,309,707.</u>	<u>11,953,388.</u>
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<u>654,210.</u>	<u>719,077.</u>
	14 Benefits paid to or for members (Part IX, column (A), line 4)	<u>NONE</u>	<u>NONE</u>
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<u>7,600,489.</u>	<u>8,313,961.</u>
	16a Professional fundraising fees (Part IX, column (A), line 11e)	<u>NONE</u>	<u>NONE</u>
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ <u>456,947.</u>		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<u>1,846,834.</u>	<u>2,385,794.</u>
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<u>10,101,533.</u>	<u>11,418,832.</u>	
19 Revenue less expenses. Subtract line 18 from line 12	<u>-1,791,826.</u>	<u>534,556.</u>	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	<u>22,813,587.</u>	<u>24,987,374.</u>
	22 Net assets or fund balances. Subtract line 21 from line 20	<u>878,104.</u>	<u>1,024,887.</u>
		<u>21,935,483.</u>	<u>23,962,487.</u>

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	<u>Patricia Hewitt</u>	<u>05/06/2025</u>
	Signature of officer Patricia Hewitt, Treasurer	Date
	Type or print name and title	

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN	
	<u>PAUL HAMMERSCHMIDT</u>	<u>PAUL HAMMERSCHMIDT</u>	<u>05/02/2025</u>		<u>P01384178</u>	
	Firm's name ▶ <u>BDO USA</u>	Firm's EIN ▶ <u>13-5381590</u>				
	Firm's address ▶ <u>200 PARK AVENUE 38TH FLOOR NEW YORK, NY 10166</u>	Phone no. <u>212-885-8000</u>				

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2023)

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission:

TO FOSTER THE CREATIVE & INTELLECTUAL DEVELOPMENT OF STUDENTS OF ALL AGES & COLLABORATE WITH & SUPPORT EDUCATORS THROUGH QUALITY VISUAL ARTS PROGRAMS LED BY ARTS PROFESSIONALS

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 2,372,705. including grants of \$ NONE) (Revenue \$ 278,832.)

THE RESIDENCY PROGRAM PROVIDES CUSTOMIZED VISUAL ARTS INSTRUCTION OFFERING SPECIFIC ART MEDIA CLASS-WIDE, OR ADDRESSING NEEDS OF PARTICULAR STUDENTS, SUCH AS MULTILINGUAL LEARNERS OR STUDENTS WITH DISABILITIES. RANGING FROM 6 TO 14 WEEKS, RESIDENCIES SERVE STUDENTS DURING AND AFTER SCHOOL. STUDIO ARTIST INSTRUCTORS PROVIDE HANDS-ON VISUAL ART INSTRUCTION FOR STUDENTS AS WELL AS TEACHER AND FAMILY ENGAGEMENT IN THE VISUAL ARTS. IN 2023-24, STUDIO NYC SERVED 17,453 STUDENTS THROUGH 207 RESIDENCIES, AT 94 SITES, ENGAGING WITH 1,224 TEACHERS.

4b (Code:) (Expenses \$ 1,636,139. including grants of \$ NONE) (Revenue \$ NONE)

THE LONG-TERM PROGRAM ESTABLISHES SEQUENTIAL, STANDARDS-BASED VISUAL ARTS CURRICULA IN NYC PUBLIC SCHOOLS WHICH LACK VISUAL ARTS INSTRUCTION. PARTNER SCHOOLS HAVE TITLE I STATUS, MAKE A 5-YEAR COMMITMENT, AND DEDICATE A SPACE FOR THE ART STUDIO. THE ARTIST INSTRUCTOR EMBEDS THE VISUAL ARTS INTO THE CURRICULUM AND CULTURE OF THE SCHOOL THROUGH INSTRUCTION ACROSS GRADES IN DIVERSE ART MEDIA, PROFESSIONAL DEVELOPMENT FOR CLASSROOM TEACHERS, FAMILY WORKSHOPS, AND SCHOOL-WIDE EXHIBITIONS. IN 2023-24 THE PROGRAM WORKED WITH 22 SCHOOLS CITYWIDE, SERVING 7,877 STUDENTS AND 488 TEACHERS.

4c (Code:) (Expenses \$ 1,367,545. including grants of \$ 324,940.) (Revenue \$ 34,500.)

TEEN PROGRAMS FOCUS ON BUILDING THEIR CAPACITY AS ARTISTS AND PARTICIPANTS IN THE ARTS. PROGRAMS INCLUDE ADVANCED VISUAL ARTS WORKSHOPS TO DEVELOP COLLEGE ADMISSION ART PORTFOLIOS AND PAID SUMMER ART INTERNSHIP PROGRAMS INCLUDING 1) TEEN APPRENTICESHIP PROGRAM, WHICH HAS A SPRING ARTS EDUCATION TRAINING COMPONENT LED BY ARTIST INSTRUCTORS WHO PREPARE TEENS TO DELIVER ARTS WORKSHOPS TO CHILDREN IN SUMMER CAMPS 2) BLOOMBERG ARTS INTERNSHIP, WHICH PROVIDES CULTURAL WORKPLACE PLACEMENTS AND BUILDS LIFE AND CAREER SKILLS WITH SUPPORT FROM TRAINED COLLEGE MENTORS, STAFF, AND CONSULTANTS. (SEE SCHEDULE O FOR MORE DETAILS)

4d Other program services (Describe on Schedule O.)

(Expenses \$ 2,788,460. including grants of \$ 394,137.) (Revenue \$ 255,629.)

4e Total program service expenses 8,164,849.

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question number, Yes, No. Rows 22-38 covering various organizational requirements and schedules.

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V []

Table with 3 columns: Question number, Yes, No. Rows 1a-1c regarding Form 1096, Forms W-2G, and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 300		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	X	
b	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i>	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . .		X
b	If "Yes," enter the name of the foreign country _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
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?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12 10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b		
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders 11a		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b		
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		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b		
c	Enter the amount of reserves on hand 13c		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
b	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.		X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.		X
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.		

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a (25), 1b (23), 2 (X), 3 (X), 4 (X), 5 (X), 6 (X), 7a (X), 7b (X), 8a (X), 8b (X), 9 (X).

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a (X), 10b, 11a (X), 11b, 12a (X), 12b (X), 12c (X), 13 (X), 14 (X), 15a (X), 15b (X), 16a (X), 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed NY,
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records.
GREG PIERSON, 75 WEST END AVENUE, NEW YORK, NY 10023

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.

See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) THOMAS CAHILL PRESIDENT - STUDIO INSTITUTE	35.00 NONE	X		X				339,973.	NONE	27,109.
(2) ALISON SCOTT-WILLIAMS PRESIDENT - STUDIO NYC	35.00 NONE	X		X				270,977.	NONE	38,224.
(3) GREGORY PIERSON DIRECTOR OF FINANCE	35.00 NONE			X				181,325.	NONE	17,814.
(4) TRICIA BLANCHARD DIRECTOR OF DEVELOPMENT	35.00 NONE					X		166,303.	NONE	NONE
(5) LIN WANG DIRECTOR OF HR	35.00 NONE					X		114,176.	NONE	734.
(6) AGNES GUND FOUNDER	2.00 NONE	X		X				NONE	NONE	NONE
(7) HASNA MUHAMMAD, ED.D. CHAIR	2.00 NONE	X		X				NONE	NONE	NONE
(8) KENNETH COOPER VICE CHAIR	2.00 NONE	X		X				NONE	NONE	NONE
(9) DOROTHY LICHTENSTEIN VICE CHAIR	2.00 NONE	X		X				NONE	NONE	NONE
(10) MARY MATTINGLY SECRETARY	2.00 NONE	X		X				NONE	NONE	NONE
(11) PATRICIA HEWITT TREASURER	2.00 NONE	X		X				NONE	NONE	NONE
(12) JYOTSNA BEAN DIRECTOR	2.00 NONE	X						NONE	NONE	NONE
(13) TONY BECHARA DIRECTOR	2.00 NONE	X						NONE	NONE	NONE
(14) PHONG BUI DIRECTOR	2.00 NONE	X						NONE	NONE	NONE

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) JENNIFER CECERE DIRECTOR	2.00 NONE	X					NONE	NONE	NONE	
(16) GREGORY CLARICK DIRECTOR	2.00 NONE	X					NONE	NONE	NONE	
(17) ERIKA FAUST DIRECTOR	2.00 NONE	X					NONE	NONE	NONE	
(18) ISABELLA HUTCHINSON DIRECTOR	2.00 NONE	X					NONE	NONE	NONE	
(19) LUCY JOFFE DIRECTOR (AS OF 10/2023)	2.00 NONE	X					NONE	NONE	NONE	
(20) JANE KLEIN DIRECTOR	2.00 NONE	X					NONE	NONE	NONE	
(21) TATIA MAYS-RUSSELL DIRECTOR	2.00 NONE	X					NONE	NONE	NONE	
(22) KATHRYN MCAULIFFE DIRECTOR	2.00 NONE	X					NONE	NONE	NONE	
(23) JOANNA MILSTEIN DIRECTOR	2.00 NONE	X					NONE	NONE	NONE	
(24) SHANE NEUFELD DIRECTOR	2.00 NONE	X					NONE	NONE	NONE	
(25) HILARY PECK DIRECTOR	2.00 NONE	X					NONE	NONE	NONE	
1b Sub-total							1,072,754.	NONE	83,881.	
c Total from continuation sheets to Part VII, Section A							NONE	NONE	NONE	
d Total (add lines 1b and 1c)							1,072,754.	NONE	83,881.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **▶** 5

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>		
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **▶**

Part VIII Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants, and Other Similar Amounts	1a	Federated campaigns	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c	102,450.				
	d	Related organizations	1d					
	e	Government grants (contributions) . .	1e	2,164,087.				
	f	All other contributions, gifts, grants, and similar amounts not included above .	1f	7,889,064.				
	g	Noncash contributions included in lines 1a-1f	1g	\$ 911,380.				
	h	Total. Add lines 1a-1f		10,155,601.				
	Program Service Revenue				Business Code			
2a		FEES FROM SCHOOL FUNDS AND CBO'S		900099	568,961.	568,961.		
b								
c								
d								
e								
f		All other program service revenue						
g	Total. Add lines 2a-2f			568,961.				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		443,613.		-3,932.	447,545.	
	4	Income from investment of tax-exempt bond proceeds . . .		NONE				
	5	Royalties		NONE				
	6a	Gross rents	6a	(i) Real				
				(ii) Personal				
	b	Less: rental expenses	6b					
	c	Rental income or (loss)	6c	NONE	NONE			
	d	Net rental income or (loss)			NONE			
	7a	Gross amount from sales of assets other than inventory	7a	(i) Securities	3,003,753.	367,033.		
				(ii) Other				
	b	Less: cost or other basis and sales expenses	7b	2,574,213.				
	c	Gain or (loss)	7c	429,540.	367,033.			
	d	Net gain or (loss)			796,573.		796,573.	
8a	Gross income from fundraising events (not including \$ 102,450. of contributions reported on line 1c). See Part IV, line 18	8a		550.				
b	Less: direct expenses	8b	16,235.					
c	Net income or (loss) from fundraising events			-15,685.		-15,685.		
9a	Gross income from gaming activities. See Part IV, line 19	9a		NONE				
b	Less: direct expenses	9b	NONE					
c	Net income or (loss) from gaming activities			NONE				
10a	Gross sales of inventory, less returns and allowances	10a		NONE				
b	Less: cost of goods sold	10b	NONE					
c	Net income or (loss) from sales of inventory			NONE				
Miscellaneous Revenue				Business Code				
	11a	MISCELLANEOUS REVENUE		900099	4,325.		4,325.	
	b							
	c							
	d	All other revenue						
e	Total. Add lines 11a-11d			4,325.				
12	Total revenue. See instructions				11,953,388.	568,961.	-3,932.	1,232,758.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.				
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	681,265.	681,265.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	37,812.	37,812.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	NONE			
4 Benefits paid to or for members	NONE			
5 Compensation of current officers, directors, trustees, and key employees	883,070.	692,821.	148,863.	41,386.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	NONE			
7 Other salaries and wages	6,149,018.	4,862,373.	999,469.	287,176.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	122,093.	88,349.	27,826.	5,918.
9 Other employee benefits	525,951.	380,588.	119,868.	25,495.
10 Payroll taxes	633,829.	458,651.	144,454.	30,724.
11 Fees for services (nonemployees):				
a Management	NONE			
b Legal	74,927.		74,927.	
c Accounting	88,897.		87,522.	1,375.
d Lobbying	NONE			
e Professional fundraising services. See Part IV, line 17	NONE			
f Investment management fees	3,633.		3,633.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)	577,428.	320,761.	250,169.	6,498.
12 Advertising and promotion	43,557.	7,509.	34,723.	1,325.
13 Office expenses	91,929.	20,783.	61,313.	9,833.
14 Information technology	NONE			
15 Royalties	NONE			
16 Occupancy	489,829.	57,550.	432,279.	
17 Travel	165,877.	119,840.	39,181.	6,856.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	NONE			
19 Conferences, conventions, and meetings	14,742.	278.	14,464.	
20 Interest	NONE			
21 Payments to affiliates	NONE			
22 Depreciation, depletion, and amortization	106,114.		106,114.	
23 Insurance	35,398.		35,398.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a PROGRAM SUPPLIES	390,149.	389,494.	632.	23.
b DUES & SUBSCRIPTIONS	101,945.	12,167.	74,742.	15,036.
c REPAIRS AND MAINTENANCE	72,330.		72,330.	
d BAD DEBT EXPENSE	22,482.	16.	22,466.	
e All other expenses	106,557.	34,592.	46,663.	25,302.
25 Total functional expenses. Add lines 1 through 24e	11,418,832.	8,164,849.	2,797,036.	456,947.
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	1,046,905.	1	2,398,570.
	2 Savings and temporary cash investments	912,272.	2	682,634.
	3 Pledges and grants receivable, net	638,960.	3	908,710.
	4 Accounts receivable, net	1,446,369.	4	1,200,532.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	NONE	5	NONE
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	NONE	6	NONE
	7 Notes and loans receivable, net	NONE	7	NONE
	8 Inventories for sale or use	NONE	8	NONE
	9 Prepaid expenses and deferred charges	124,064.	9	54,294.
	10 a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,523,115.		
	b Less: accumulated depreciation	10b 1,427,614.	201,615.	10c 95,501.
	11 Investments - publicly traded securities	NONE	11	NONE
	12 Investments - other securities. See Part IV, line 11	18,119,515.	12	19,211,768.
	13 Investments - program-related. See Part IV, line 11	NONE	13	NONE
	14 Intangible assets	NONE	14	NONE
	15 Other assets. See Part IV, line 11	323,887.	15	435,365.
16 Total assets. Add lines 1 through 15 (must equal line 33)	22,813,587.	16	24,987,374.	
Liabilities	17 Accounts payable and accrued expenses	545,890.	17	573,777.
	18 Grants payable	NONE	18	NONE
	19 Deferred revenue	8,525.	19	8,525.
	20 Tax-exempt bond liabilities	NONE	20	NONE
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	NONE	21	NONE
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	NONE	22	NONE
	23 Secured mortgages and notes payable to unrelated third parties	NONE	23	NONE
	24 Unsecured notes and loans payable to unrelated third parties	NONE	24	NONE
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	323,689.	25	442,585.
	26 Total liabilities. Add lines 17 through 25	878,104.	26	1,024,887.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. <input checked="" type="checkbox"/>			
	27 Net assets without donor restrictions	13,862,868.	27	14,793,458.
	28 Net assets with donor restrictions	8,072,615.	28	9,169,029.
	Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. <input type="checkbox"/>			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	21,935,483.	32	23,962,487.
33 Total liabilities and net assets/fund balances	22,813,587.	33	24,987,374.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	11,953,388.
2	Total expenses (must equal Part IX, column (A), line 25)	2	11,418,832.
3	Revenue less expenses. Subtract line 2 from line 1	3	534,556.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	21,935,483.
5	Net unrealized gains (losses) on investments	5	1,490,467.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	1,981.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	23,962,487.

Part XII Financial Statements and Reporting

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

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits . . .

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

**SCHEDULE A
(Form 990)**

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

**Open to Public
Inspection**

Name of the organization STUDIO IN A SCHOOL ASSOCIATION, INC.	Employer identification number 13-3003112
---	---

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)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990).)
- 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)**. Enter the hospital's name, city, and state: _____
- 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)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 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)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 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 An organization that normally receives (1) more than 33 1/3 % 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 1/3 % 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 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions 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 on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving 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 **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having 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.**
 - 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 I, Type II, 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).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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

Schedule A (Form 990) 2023

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Table with 7 columns: Calendar year (or fiscal year beginning in), (a) 2019, (b) 2020, (c) 2021, (d) 2022, (e) 2023, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total. Add lines 1 through 3; 5 The portion of total contributions by each person; 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: Calendar year (or fiscal year beginning in), (a) 2019, (b) 2020, (c) 2021, (d) 2022, (e) 2023, (f) Total. Rows include: 7 Amounts from line 4; 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; 10 Other income. Do not include gain or loss from the sale of capital assets; 11 Total support. Add lines 7 through 10; 12 Gross receipts from related activities; 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Rows include: 14 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f)) 73.71%; 15 Public support percentage from 2022 Schedule A, Part II, line 14 78.41%; 16a 33 1/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. [X]; 16b 33 1/3% support test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. []; 17a 10%-facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization. []; 17b 10%-facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization. []; 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions. []

Part III Support Schedule for Organizations Described in Section 509(a)(2)
 (Complete only if you checked the box on line 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2022 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f)),	17	%
18 Investment income percentage from 2022 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2023. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization . . .

b 33 1/3% support tests - 2022. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization . .

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions . .

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c 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)? <i>If "Yes," explain in Part VI 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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, 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).</i>		
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?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
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? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as 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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
b A family member of a person described on line 11a above?		
c A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If "No," describe in Part VI 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 officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
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? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		

Section C. Type II 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 or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section 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 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 organization's governing documents in effect on the date of notification, to the extent not previously provided?		
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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3 By reason of the relationship described on line 2, above, did the organization's supported organizations have a 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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section 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 instructions).			
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).			
2 Activities Test. Answer lines 2a and 2b below.		Yes	No
a 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? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>			
b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>			
3 Parent of Supported Organizations. Answer lines 3a and 3b below.			
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? <i>If "Yes" or "No," provide details in Part VI.</i>			
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>			

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

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	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 (<i>explain in detail in Part VI</i>):		
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 0.015 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 0.035.	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 0.85 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	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Schedule A (Form 990) 2023

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2023 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2023 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3	Excess distributions carryover, if any, to 2023			
a	From 2018			
b	From 2019			
c	From 2020			
d	From 2021			
e	From 2022			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2023 distributable amount			
i	Carryover from 2018 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2023 from Section D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2023 distributable amount			
c	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6	Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7	Excess distributions carryover to 2024. Add lines 3j and 4c.			
8	Breakdown of line 7:			
a	Excess from 2019			
b	Excess from 2020			
c	Excess from 2021			
d	Excess from 2022			
e	Excess from 2023			

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.)

SCHEDULE A, PART II - OTHER INCOME

DESCRIPTION	2019	2020	2021	2022	2023	TOTAL
MISCELLANEOUS REVENUE	1,110.	62,178.	NONE	114.	4,325.	67,727.
TOTALS	1,110.	62,178.	NONE	114.	4,325.	67,727.

**Schedule B
(Form 990)**

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023

Name of the organization

Employer identification number

STUDIO IN A SCHOOL ASSOCIATION, INC.

13-3003112

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization <p style="text-align: center;">STUDIO IN A SCHOOL ASSOCIATION, INC.</p>	Employer identification number <p style="text-align: center;">13-3003112</p>
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Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution						
1	N/A <hr/> <hr/> <hr/>	\$ 2,412,000.	<table style="width:100%; border-collapse: collapse;"> <tr><td style="width:30%;">Person</td><td style="text-align: center;"><input checked="" type="checkbox"/></td></tr> <tr><td>Payroll</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Noncash</td><td style="text-align: center;"><input type="checkbox"/></td></tr> </table> <p style="font-size: small; margin-top: 5px;">(Complete Part II for noncash contributions.)</p>	Person	<input checked="" type="checkbox"/>	Payroll	<input type="checkbox"/>	Noncash	<input type="checkbox"/>
Person	<input checked="" type="checkbox"/>								
Payroll	<input type="checkbox"/>								
Noncash	<input type="checkbox"/>								
2	N/A <hr/> <hr/> <hr/>	\$ 1,751,077.	<table style="width:100%; border-collapse: collapse;"> <tr><td style="width:30%;">Person</td><td style="text-align: center;"><input checked="" type="checkbox"/></td></tr> <tr><td>Payroll</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Noncash</td><td style="text-align: center;"><input type="checkbox"/></td></tr> </table> <p style="font-size: small; margin-top: 5px;">(Complete Part II for noncash contributions.)</p>	Person	<input checked="" type="checkbox"/>	Payroll	<input type="checkbox"/>	Noncash	<input type="checkbox"/>
Person	<input checked="" type="checkbox"/>								
Payroll	<input type="checkbox"/>								
Noncash	<input type="checkbox"/>								
3	N/A <hr/> <hr/> <hr/>	\$ 1,085,000.	<table style="width:100%; border-collapse: collapse;"> <tr><td style="width:30%;">Person</td><td style="text-align: center;"><input checked="" type="checkbox"/></td></tr> <tr><td>Payroll</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Noncash</td><td style="text-align: center;"><input type="checkbox"/></td></tr> </table> <p style="font-size: small; margin-top: 5px;">(Complete Part II for noncash contributions.)</p>	Person	<input checked="" type="checkbox"/>	Payroll	<input type="checkbox"/>	Noncash	<input type="checkbox"/>
Person	<input checked="" type="checkbox"/>								
Payroll	<input type="checkbox"/>								
Noncash	<input type="checkbox"/>								
4	N/A <hr/> <hr/> <hr/>	\$ 941,380.	<table style="width:100%; border-collapse: collapse;"> <tr><td style="width:30%;">Person</td><td style="text-align: center;"><input checked="" type="checkbox"/></td></tr> <tr><td>Payroll</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Noncash</td><td style="text-align: center;"><input checked="" type="checkbox"/></td></tr> </table> <p style="font-size: small; margin-top: 5px;">(Complete Part II for noncash contributions.)</p>	Person	<input checked="" type="checkbox"/>	Payroll	<input type="checkbox"/>	Noncash	<input checked="" type="checkbox"/>
Person	<input checked="" type="checkbox"/>								
Payroll	<input type="checkbox"/>								
Noncash	<input checked="" type="checkbox"/>								
5	N/A <hr/> <hr/> <hr/>	\$ 413,010.	<table style="width:100%; border-collapse: collapse;"> <tr><td style="width:30%;">Person</td><td style="text-align: center;"><input checked="" type="checkbox"/></td></tr> <tr><td>Payroll</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Noncash</td><td style="text-align: center;"><input type="checkbox"/></td></tr> </table> <p style="font-size: small; margin-top: 5px;">(Complete Part II for noncash contributions.)</p>	Person	<input checked="" type="checkbox"/>	Payroll	<input type="checkbox"/>	Noncash	<input type="checkbox"/>
Person	<input checked="" type="checkbox"/>								
Payroll	<input type="checkbox"/>								
Noncash	<input type="checkbox"/>								
6	N/A <hr/> <hr/> <hr/>	\$ 383,180.	<table style="width:100%; border-collapse: collapse;"> <tr><td style="width:30%;">Person</td><td style="text-align: center;"><input checked="" type="checkbox"/></td></tr> <tr><td>Payroll</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Noncash</td><td style="text-align: center;"><input type="checkbox"/></td></tr> </table> <p style="font-size: small; margin-top: 5px;">(Complete Part II for noncash contributions.)</p>	Person	<input checked="" type="checkbox"/>	Payroll	<input type="checkbox"/>	Noncash	<input type="checkbox"/>
Person	<input checked="" type="checkbox"/>								
Payroll	<input type="checkbox"/>								
Noncash	<input type="checkbox"/>								

Name of organization <p style="text-align: center;">STUDIO IN A SCHOOL ASSOCIATION, INC.</p>	Employer identification number <p style="text-align: center;">13-3003112</p>
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Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	N/A <hr/> <hr/> <hr/>	\$ 350,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	N/A <hr/> <hr/> <hr/>	\$ 300,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	N/A <hr/> <hr/> <hr/>	\$ 250,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

STUDIO IN A SCHOOL ASSOCIATION, INC.

Employer identification number

13-3003112

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
4	PUBLICLY TRADED SECURITIES _____ _____ _____	\$ 911,380.	VAR
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____

Name of organization <p style="text-align: center;">STUDIO IN A SCHOOL ASSOCIATION, INC.</p>	Employer identification number <p style="text-align: center;">13-3003112</p>
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Part III **Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor.** Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) \$ _____
 Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
_____ _____ _____		_____ _____ _____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
_____ _____ _____		_____ _____ _____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
_____ _____ _____		_____ _____ _____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
_____ _____ _____		_____ _____ _____	

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2023

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Name of the organization

Employer identification number

STUDIO IN A SCHOOL ASSOCIATION, INC.

13-3003112

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Line number, (a) Donor advised funds, (b) Funds and other accounts. Rows 1-4 for values, 5-6 for Yes/No questions.

Part II Conservation Easements

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 3 columns: Line number, Description, and Held at the End of the Tax Year. Rows 1-8 for various questions and values.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 3 columns: Line number, Description, and Amount. Rows 1a-1b for art collection questions, 2 for financial gain questions.

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

Schedule D (Form 990) 2023

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other TO BE SOLD TO RAISE FUNDS
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table.
- | | Amount |
|---|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII.

Part V Endowment Funds

Complete if the organization answered "Yes" on Form 990, 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	13,502,152.	13,138,172.	16,128,906.	13,089,582.	12,525,838.
b Contributions					
c Net investment earnings, gains, and losses	1,665,328.	2,182,834.	-2,335,930.	3,808,983.	1,113,744.
d Grants or scholarships					
e Other expenditures for facilities and programs	931,516.	1,818,854.	654,804.	769,659.	550,000.
f Administrative expenses					
g End of year balance	14,235,964.	13,502,152.	13,138,172.	16,128,906.	13,089,582.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment 21.3200 %
- b Permanent endowment 16.0700 %
- c Term endowment 62.6100 %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) Unrelated organizations?
- (ii) Related organizations?

	Yes	No
3a(i)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3a(ii)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3b	<input type="checkbox"/>	<input type="checkbox"/>

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		671,596.	671,596.	NONE
d Equipment		523,787.	519,982.	3,805.
e Other		327,732.	236,036.	91,696.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				95,501.

Part VII Investments - Other Securities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) PRIVATELY-HELD MUTUAL FUNDS	18,891,828.	FMV
(B) PRIVATE EQUITY FUNDS	319,940.	FMV
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, line 12, col. (B)) . . .	19,211,768.	

Part VIII Investments - Program Related

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, line 13, col. (B)) . . .		

Part IX Other Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B)).	

Part X Other Liabilities

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

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	DEFERRED COMPENSATION	363,904.
(3)	OPERATING LEASE LIABILITY	78,681.
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B)).		442,585.

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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII .

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Columns include line numbers and a final total column.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Columns include line numbers and a final total column.

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

SEE SUPPLEMENTAL PAGE

Part XIII Supplemental Information (continued)

SCHEDULE D, PART III, LINE 4:

THE ORGANIZATION RECEIVED CONTRIBUTIONS OF ARTWORK IN PRIOR YEARS TO BE SOLD TO RAISE FUNDS. VARIOUS PIECES OF ARTWORK ARE STILL IN THE ORGANIZATION'S POSSESSION.

PART V, LINE 4:

THE ENDOWMENT'S OBJECTIVE IS TO PROVIDE AN ANNUAL EARNINGS CASH FLOW TO ASSIST IN COVERING THE COST OF THE REPORTING ORGANIZATION'S OPERATIONS.

SCHEDULE D PART X, LINE 2:

STUDIO IN A SCHOOL ASSOCIATION, INC. (THE "REPORTING ORGANIZATION") WAS INCORPORATED IN THE STATE OF NEW YORK AND IS EXEMPT FROM FEDERAL, STATE AND LOCAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (THE "CODE") AND THEREFORE HAS MADE NO PROVISION FOR INCOME TAXES IN THE ACCOMPANYING STATEMENT OF FINANCIAL POSITION. IN ADDITION, THE REPORTING ORGANIZATION HAS NOT TAKEN AN UNSUBSTANTIATED TAX POSITION THAT WOULD REQUIRE PROVISION OF A LIABILITY UNDER U.S. GAAP. UNDER U.S. GAAP, AN ORGANIZATION MUST RECOGNIZE THE TAX BENEFIT ASSOCIATED WITH TAX POSITIONS TAKEN FOR TAX RETURN PURPOSES WHEN IT IS MORE LIKELY THAN NOT THE POSITION WILL BE SUSTAINED UPON EXAMINATION BY A TAXING AUTHORITY. THE REPORTING ORGANIZATION DOES NOT BELIEVE THERE ARE ANY MATERIAL UNCERTAIN TAX POSITIONS AND, ACCORDINGLY, HAS NOT RECOGNIZED ANY LIABILITY FOR UNRECOGNIZED TAX BENEFITS. THE REPORTING ORGANIZATION HAS FILED INTERNAL REVENUE SERVICE ("IRS") FORM 990, AS REQUIRED, AND ALL OTHER APPLICABLE RETURNS IN JURISDICTIONS WHEN IT IS REQUIRED. FOR THE

Part XIII Supplemental Information *(continued)*

YEAR ENDED JUNE 30, 2024, THERE WAS NO INCOME THAT WAS SUBJECT TO
UNRELATED BUSINESS INCOME TAX, AND THERE WERE NO INTEREST OR PENALTIES
RECORDED OR INCLUDED IN THE FINANCIAL STATEMENTS.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		PURLIE VICTORI. (event type)	NONE (event type)	NONE (total number)	(add col. (a) through col. (c))
Revenue	1	Gross receipts	103,000.		103,000.
	2	Less: Contributions	102,450.		102,450.
	3	Gross income (line 1 minus line 2)	550.		550.
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs			
	7	Food and beverages			
	8	Entertainment	16,235.		16,235.
	9	Other direct expenses			
	10	Direct expense summary. Add lines 4 through 9 in column (d)			
11	Net income summary. Subtract line 10 from line 3, column (d)				-15,685.

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))	
Revenue	1	Gross revenue				
Direct Expenses	2	Cash prizes				
	3	Noncash prizes				
	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7	Direct expense summary. Add lines 2 through 5 in column (d)				
	8	Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No

b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15 a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.
- c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV **Supplemental Information.** Provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2023

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

Attach to Form 990.

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

Name of the organization

STUDIO IN A SCHOOL ASSOCIATION, INC.

Employer identification number

13-3003112

Part I General Information on Grants and Assistance

- Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) MUSEUM OF CHINESE IN AMERICA 215 CENTRE STREET NEW YORK, NY 10013	11-2517055	501 (C) (3)	21,510.				ARTS INTERN PROGRAM
(2) THE RUBIN MUSEUM OF ART 140 WEST 17TH STREET NEW YORK, NY 10011	22-6799567	501 (C) (3)	20,400.				ARTS INTERN PROGRAM
(3) ICA BOSTON 25 HARBOR SHORE DRIVE BOSTON, MA 02210	04-2104327	501 (C) (3)	17,010.				ARTS INTERN PROGRAM
(4) SIGNATURE THEATRE COMPANY 480 WEST 42ND STREET NEW YORK, NY 10036	13-3641560	501 (C) (3)	17,010.				ARTS INTERN PROGRAM
(5) CLEVELAND MUSEUM OF ART 11150 EAST BOUVLEVARD CLEVELAND, OH 44106	34-0714336	501 (C) (3)	16,120.				ARTS INTERN PROGRAM
(6) BROOKLYN CHILDREN'S MUSEUM 145 BROOKLYN AVENUE BROOKLYN, NY 11213	11-2495664	501 (C) (3)	12,600.				ARTS INTERN PROGRAM
(7) BALLET HISPANICO 167 W. 89TH STREET NEW YORK, NY 10024	13-2685755	501 (C) (3)	12,500.				ARTS INTERN PROGRAM
(8) THEATRE FOR A NEW AUDIENCE 154 CHRISTOPHER ST. NEW YORK, NY 10014	13-3059081	501 (C) (3)	12,170.				ARTS INTERN PROGRAM
(9) EDVESTORS 142 BERKELEY STREET BOSTON, MA 02116	76-0794873	501 (C) (3)	11,340.				ARTS INTERN PROGRAM
(10) OPENHOUSE NEW YORK 150 VARICK ST, FLOOR 5 NEW YORK, NY 10013	02-0540261	501 (C) (3)	11,000.				ARTS INTERN PROGRAM
(11) CHICAGO LATINO THEATER ALLIANCE 81-4080246 CHICAGO, IL 60602	81-4080246	501 (C) (3)	10,580.				ARTS INTERN PROGRAM
(12) ROSENBAUM LIBRARY AND MUSEUM 2008-2010 DELANCEY PHILADELPHIA, PA 19103	23-1425055	501 (C) (3)	10,580.				ARTS INTERN PROGRAM

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 76

3 Enter total number of other organizations listed in the line 1 table NONE

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Schedule I (Form 990) 2023

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
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OMB No. 1545-0047

2023

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Department of the Treasury
Internal Revenue Service

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

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Name of the organization

STUDIO IN A SCHOOL ASSOCIATION, INC.

Employer identification number

13-3003112

Part I General Information on Grants and Assistance

- Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) MADISON SQUARE PARK CONSERVANCY ELEVEN MADISON AVENUE NEW YORK, NY 10010	14-1859935	501 (C) (3)	10,233.				ARTS INTERN PROGRAM
(2) THE JUILLIARD SCHOOL 60 LINCOLN CENTER PLZ NEW YORK, NY 10023	13-1624067	501 (C) (3)	10,170.				ARTS INTERN PROGRAM
(3) INLIQUID 1400 N. AMERICAN ST. PHILADELPHIA, PA 19122	01-0638903	501 (C) (3)	10,080.				ARTS INTERN PROGRAM
(4) TINY WPA 3145 WEST JEFFERSON PHILADELPHIA, PA 19121	47-2560183	501 (C) (3)	10,080.				ARTS INTERN PROGRAM
(5) LINCOLN CENTER FOR THE PERFORMING ARTS, INC 70 LINCOLN CENTER PLZ NEW YORK, NY 10023	13-1847137	501 (C) (3)	8,670.				ARTS INTERN PROGRAM
(6) NATIONAL DANCE INSTITUTE 217 WEST 147TH STREET NEW YORK, NY 10039	13-2890779	501 (C) (3)	8,670.				ARTS INTERN PROGRAM
(7) NEW YORK HALL OF SCIENCE 47-01 111TH STREET CORONA, NY 11368	11-2104059	501 (C) (3)	8,670.				ARTS INTERN PROGRAM
(8) STATEN ISLAND MUSEUM 1000 RICHMOND TERR. STATEN ISLAND, NY 10301	13-5564127	501 (C) (3)	7,800.				ARTS INTERN PROGRAM
(9) FASHION INSTITUTE OF TECHNOLOGY 227 WEST 27TH STREET NEW YORK, NY 10001	13-5675757	501 (C) (3)	7,500.				SCHOLARSHIP
(10) GLASSROOTS, INC. 10 BLEEKER STREET NEWARK, NJ 07102	22-3671890	501 (C) (3)	6,800.				ARTS INTERN PROGRAM
(11) STUDIO MUSEUM IN HARLEM 144 WEST 125TH STREET NEW YORK, NY 10027	13-2590805	501 (C) (3)	6,800.				ARTS INTERN PROGRAM
(12) EL MUSEO DEL BARRIO 1230 FIFTH AVENUE NEW YORK, NY 10029	23-7156720	501 (C) (3)	6,580.				ARTS INTERN PROGRAM

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

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Schedule I (Form 990) 2023

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
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13-3003112

Part I General Information on Grants and Assistance

- Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
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Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) CHILDREN'S MUSEUM OF THE ARTS 103 CHARLTON STREET NEW YORK, NY 10014	13-3520970	501(C)(3)	6,500.				ARTS INTERN PROGRAM
(2) STREB, INC. 51 N. 1ST STREET BROOKLYN, NY 11249	13-3268549	501(C)(3)	6,500.				ARTS INTERN PROGRAM
(3) BROOKLYN MUSEUM 200 EASTERN PARKWAY BROOKLYN, NY 11238	11-1672743	501(C)(3)	6,477.				ARTS INTERN PROGRAM
(4) A.I.R. GALLERY 155 PLYMOUTH STREET BROOKLYN, NY 11202	23-7343096	501(C)(3)	6,300.				ARTS INTERN PROGRAM
(5) NEW YORK TRANSIT MUSEUM 130 LIVINGSTON STREET BROOKLYN, NY 11201	11-3299408	501(C)(3)	6,300.				ARTS INTERN PROGRAM
(6) NEWARK ARTS COUNCIL 17 ACADEMY ST., #702 NEWARK, NJ 07102	22-2412819	501(C)(3)	6,300.				ARTS INTERN PROGRAM
(7) NEWARK PUBLIC LIBRARY 5 WASHINGTON STREET NEWARK, NJ 07101	22-6002144	501(C)(3)	6,300.				ARTS INTERN PROGRAM
(8) NEWARK SCHOOL OF THE ARTS 89 LINCOLN PARK NEWARK, NJ 07102	22-1849047	501(C)(3)	6,300.				ARTS INTERN PROGRAM
(9) POSTER HOUSE, INC. 119 WEST 23RD ST. NEW YORK, NY 10011	61-1763737	501(C)(3)	6,300.				ARTS INTERN PROGRAM
(10) THE NOGUCHI MUSEUM 3237 VERNON BLVD ASTORIA, NY 11106	61-1472746	501(C)(3)	6,300.				ARTS INTERN PROGRAM
(11) WOODMERE ART MUSEUM, INC. 9201 GERMANTOWN AVE PHILADELPHIA, PA 19118	23-1381459	501(C)(3)	6,245.				ARTS INTERN PROGRAM
(12) URBANWORLD FOUNDATION INC 174 W 4TH ST STE 119 NEW YORK, NY 10014	31-1595881	501(C)(3)	6,000.				ARTS INTERN PROGRAM

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

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Schedule I (Form 990) 2023

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
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OMB No. 1545-0047

2023

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Department of the Treasury
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Employer identification number

STUDIO IN A SCHOOL ASSOCIATION, INC.

13-3003112

Part I General Information on Grants and Assistance

- Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) TALLER PUERTORRIQUEYO 2600 N. 5TH STREET PHILADELPHIA, PA 19133	23-1946165	501 (C) (3)	5,940.				ARTS INTERN PROGRAM
(2) FABRIC WORKSHOP AND MUSEUM 1214 ARCH STREET PHILADELPHIA, PA 19107	23-2018929	501 (C) (3)	5,770.				ARTS INTERN PROGRAM
(3) ARTISTS FOR HUMANITY 7735 169TH STREET FRESH MEADOWS, NY 11366	20-0266284	501 (C) (3)	5,670.				ARTS INTERN PROGRAM
(4) BOSTON CHILDREN'S MUSEUM 308 CONGRESS STREET BOSTON, MA 02210	04-2103993	501 (C) (3)	5,670.				ARTS INTERN PROGRAM
(5) CELEBRITY SERIES 20 PARK PLZ STE 220 BOSTON, MA 02116	22-2958508	501 (C) (3)	5,670.				ARTS INTERN PROGRAM
(6) NEW YORK HISTORICAL SOCIETY 170 CENTRAL PARK WEST NEW YORK, NY 10024	13-1624124	501 (C) (3)	5,670.				ARTS INTERN PROGRAM
(7) QUEENS MUSEUM FLUSHING MEADOW PARK FLUSHING, NY 11368	11-2278998	501 (C) (3)	5,670.				ARTS INTERN PROGRAM
(8) SPOKE ART 844 SUMMER STREET, STE 103 BOSTON, MA 02127	04-3502628	501 (C) (3)	5,670.				ARTS INTERN PROGRAM
(9) THE TENEMENT MUSEUM 103 ORCHARD STREET NEW YORK, NY 10002	13-3475390	501 (C) (3)	5,670.				ARTS INTERN PROGRAM
(10) WBUR 890 COMMONWEALTH AVENUE BOSTON, MA 02215	04-2103547	501 (C) (3)	5,670.				ARTS INTERN PROGRAM
(11) ART HOUSE INC 3119 DENISON AVE CLEVELAND, OH 44109	34-1926856	501 (C) (3)	5,540.				ARTS INTERN PROGRAM
(12) ASSEMBLY FOR THE ARTS 6539 EUCLID AVE. CLEVELAND, OH 44103	34-1936190	501 (C) (3)	5,540.				ARTS INTERN PROGRAM

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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Schedule I (Form 990) 2023

**SCHEDULE I
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**Grants and Other Assistance to Organizations,
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STUDIO IN A SCHOOL ASSOCIATION, INC.

13-3003112

Part I General Information on Grants and Assistance

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1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) BRONZEVILLE HISTORIAL SOCIETY 42 WEST 37TH STREET CHICAGO, IL 60609	36-4523754	501 (C) (3)	5,540.				ARTS INTERN PROGRAM
(2) CLEVELAND CLINIC FOUNDATION 8911 EUCLID AVE CLEVELAND, OH 44106	34-0714585	501 (C) (3)	5,540.				ARTS INTERN PROGRAM
(3) FREE LIBRARY OF PHILADELPHIA 1901 VINE STREET PHILADELPHIA, PA 19103	52-1173474	501 (C) (3)	5,540.				ARTS INTERN PROGRAM
(4) THE SWEDISH AMERICAN MUSEUM 5211 N CLARK STREET CHICAGO, IL 60640	36-3107115	501 (C) (3)	5,540.				ARTS INTERN PROGRAM
(5) ART MUSEUM OF THE UNIVERSITY OF MEMPHIS 3750 NORRISWOOD AVENUE MEMPHIS, TN 38152	62-6048540	501 (C) (3)	5,490.				ARTS INTERN PROGRAM
(6) FOUNDERS HALL AT GIRARD COLLEGE 2101 S COLLEGE AVE. PHILADELPHIA, PA 19121	23-2987485	501 (C) (3)	5,400.				ARTS INTERN PROGRAM
(7) METAL MUSEUM 374 METAL MUSEUM DR MEMPHIS, TN 38106	62-1066198	501 (C) (3)	5,320.				ARTS INTERN PROGRAM
(8) MEDIA BURN ARCHIVE 935 W. CHESTNUT ST. CHICAGO, IL 60642	36-3700892	501 (C) (3)	5,290.				ARTS INTERN PROGRAM
(9) ART WITH A HEART 1022 SE 10TH ST OCALA, FL 34471	45-5267259	501 (C) (3)	5,040.				ARTS INTERN PROGRAM
(10) ART WORKS PROJECTS 625 N KINGSBURY ST CHICAGO, IL 60654	71-1049669	501 (C) (3)	5,040.				ARTS INTERN PROGRAM
(11) BALTIMORE MUSEUM OF INDUSTRY 1415 KEY HIGHWAY BALTIMORE, MD 21230	52-1205675	501 (C) (3)	5,040.				ARTS INTERN PROGRAM
(12) CHICAGO HISTORY MUSEUM 1601 N CLARK ST CHICAGO, IL 60614	36-2167004	501 (C) (3)	5,040.				ARTS INTERN PROGRAM

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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Schedule I (Form 990) 2023

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13-3003112

Part I General Information on Grants and Assistance

- Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) CLEVELAND MUSEUM OF NATURAL HISTORY 1 WADE OVAL DR CLEVELAND, OH 44106	34-0714338	501(C)(3)	5,040.				ARTS INTERN PROGRAM
(2) CLEVELAND PUBLIC THEATER 6415 DETROIT AVE CLEVELAND, OH 44102	34-1359225	501(C)(3)	5,040.				ARTS INTERN PROGRAM
(3) HAITIAN AMERICAN MUSEUM OF CHICAGO 4654 N RACINE AVE CHICAGO, IL 60640	46-0659222	501(C)(3)	5,040.				ARTS INTERN PROGRAM
(4) INLET DANCE THEATRE 2937 WEST 25TH ST. CLEVELAND, OH 44113	26-0007578	501(C)(3)	5,040.				ARTS INTERN PROGRAM
(5) JULIA DE BURGOS CULTURAL ARTS CENTER 2800 ARCHWOOD AVENUE CLEVELAND, OH 44109	34-1676967	501(C)(3)	5,040.				ARTS INTERN PROGRAM
(6) MEMPHIS BOTANIC GARDEN 750 CHERRY ROAD MEMPHIS, TN 38117	23-7159172	501(C)(3)	5,040.				ARTS INTERN PROGRAM
(7) MEMPHIS BROOKS MUSEUM OF ART 1934 POPLAR AVENUE MEMPHIS, TN 38104	62-6063304	501(C)(3)	5,040.				ARTS INTERN PROGRAM
(8) MINISTRY OF AWE 27 N 3RD STREET PHILADELPHIA, PA 19106	34-1724814	501(C)(3)	5,040.				ARTS INTERN PROGRAM
(9) MURAL ARTS 1727-29 MT VERNON ST PHILADELPHIA, PA 19130	23-2876470	501(C)(3)	5,040.				ARTS INTERN PROGRAM
(10) NATIONAL PUBLIC HOUSING MUSEUM 625 NORTH KINGSBURY ST. CHICAGO, IL 60654	51-0649843	501(C)(3)	5,040.				ARTS INTERN PROGRAM
(11) POLISH MUSEUM OF AMERICA 984 N MILWAUKEE AVE CHICAGO, IL 60642	51-0210113	501(C)(3)	5,040.				ARTS INTERN PROGRAM
(12) ROOTS OF AMERICAN MUSIC 3109 MAYFIELD RD, CLEVELAND, OH 44118	34-1888282	501(C)(3)	5,040.				ARTS INTERN PROGRAM

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) 2023

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2023

**Open to Public
Inspection**

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

Attach to Form 990.

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

Department of the Treasury
Internal Revenue Service

Name of the organization

STUDIO IN A SCHOOL ASSOCIATION, INC.

Employer identification number

13-3003112

Part I General Information on Grants and Assistance

- Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) SMART MUSEUM OF ART, UNIVERSITY OF CHICAGO 111 SOUTH MICHIGAN AVENUE CHICAGO, IL 60130	36-2167725	501 (C) (3)	5,040.				ARTS INTERN PROGRAM
(2) SOULSVILLE FOUNDATION P.O. BOX 273 MEMPHIS, TN 38101	62-1719414	501 (C) (3)	5,040.				ARTS INTERN PROGRAM
(3) TEMPLE UNIVERSITY BLOCKSON 1801 NORTH BROAD ST. PHILADELPHIA, PA 19122	23-1365971	501 (C) (3)	5,040.				ARTS INTERN PROGRAM
(4) WOMEN'S COALITION FOR EMPOWERMENT P.O BOX 2465 ACP #227 HARRISBURG, PA 17105	27-4450466	501 (C) (3)	5,040.				ARTS INTERN PROGRAM
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) 2023

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 STIPENDS FOR ARTS INTERN PROGRAM	63	27,600.			
2 SCHOLARSHIPS TO STUDENTS	25	10,212.			
3					
4					
5					
6					
7					

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b); and any other additional information.

PART I, LINE 2:

ARTS INTERN PROGRAM: STUDIO APPROVES SPECIFIC WORK PROJECTS DEVELOPED BY PARTNER CULTURAL INSTITUTIONS. DURING THE COURSE OF THE INTERNSHIPS, PROGRESS IS MONITORED WITH STUDENT LOGS AND EVALUATED BY PERIODIC SURVEYS OF BOTH STUDENTS AND CULTURAL INSTITUTION STAFF.

SCHOLARSHIPS: SCHOLARSHIPS AND ART AWARDS ARE AWARDED ANNUALLY FOR STUDENTS TO PURSUE ARTS HIGHER EDUCATION. PAYMENTS ARE MADE EITHER DIRECTLY TO COLLEGES AND UNIVERSITIES TO PAY THE COST OF SPECIFIC ART

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1					
2					
3					
4					
5					
6					
7					

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b); and any other additional information.

COURSES OR TO THE STUDENTS WHO PRESENT EVIDENCE OF A PAID TUITION INVOICE
OR PURCHASE OF ART SUPPLIES.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2023

Open to Public Inspection

STUDIO IN A SCHOOL ASSOCIATION, INC.

Employer identification number

13-3003112

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment? **4a** **X**
- b** Participate in or receive payment from a supplemental nonqualified retirement plan? **4b** **X**
- c** Participate in or receive payment from an equity-based compensation arrangement? **4c** **X**
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization? **5a** **X**
- b** Any related organization? **5b** **X**
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization? **6a** **X**
- b** Any related organization? **6b** **X**
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III **7** **X**

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III **8** **X**

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? **9** **X**

	Yes	No
1a		
1b		
2		
3		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7	X	
8		X
9		X

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

Schedule J (Form 990) 2023

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 THOMAS CAHILL PRESIDENT - STUDIO INSTITUTE	(i)	337,473.	2,500.	NONE	16,088.	11,021.	367,082.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
2 ALISON SCOTT-WILLIAMS PRESIDENT - STUDIO NYC	(i)	268,277.	2,700.	NONE	13,414.	24,810.	309,201.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
3 GREGORY PIERSON DIRECTOR OF FINANCE	(i)	179,425.	1,900.	NONE	8,634.	9,180.	199,139.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
4 TRICIA BLANCHARD DIRECTOR OF DEVELOPMENT	(i)	164,603.	1,700.	NONE	NONE	NONE	166,303.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
5	(i)							
	(ii)							
6	(i)							
	(ii)							
7	(i)							
	(ii)							
8	(i)							
	(ii)							
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

Part III Supplemental Information

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

PART I, LINE 7:

IN 2023, THOMAS CAHILL (PRESIDENT - STUDIO INSTITUTE), ALISON SCOTT-WILLIAMS (PRESIDENT - STUDIO NYC) AND GREG PIERSON (DIRECTOR OF FINANCE) RECEIVED BONUSES OF \$2,500, \$2,700 AND \$1,900 RESPECTIVELY.

BOARD OF DIRECTORS AND THE PRESIDENT DECIDED THE BONUSES FOR DIRECTOR OF FINANCE AND DIRECTOR OF DEVELOPMENT.

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

Attach to Form 990.

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

OMB No. 1545-0047

2023

**Open to Public
Inspection**

Name of the organization

STUDIO IN A SCHOOL ASSOCIATION, INC.

Employer identification number

13-3003112

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	1	911,380.	MARKET QUOTATION
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other (_____)				
26 Other (_____)				
27 Other (_____)				
28 Other (_____)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) 2023

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B) :

THE FILING ORGANIZATION IS REPORTING THE NUMBER OF CONTRIBUTIONS
RECEIVED.

**SCHEDULE O
(Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service

Name of the organization

STUDIO IN A SCHOOL ASSOCIATION, INC.

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2023

**Open to Public
Inspection**

Employer identification number

13-3003112

FORM 990, PART III, LINE 4C:

TEEN PROGRAMS FOCUS ON BUILDING THEIR CAPACITY AS ARTISTS AND PARTICIPANTS IN THE ARTS. PROGRAMS INCLUDE ADVANCED VISUAL ARTS WORKSHOPS TO DEVELOP COLLEGE ADMISSION ART PORTFOLIOS AND PAID SUMMER ART INTERNSHIP PROGRAMS INCLUDING 1) TEEN APPRENTICESHIP PROGRAM, WHICH HAS A SPRING ARTS EDUCATION TRAINING COMPONENT LED BY ARTIST INSTRUCTORS WHO PREPARE TEENS TO DELIVER ARTS WORKSHOPS TO CHILDREN IN SUMMER CAMPS 2) BLOOMBERG ARTS INTERNSHIP, WHICH PROVIDES CULTURAL WORKPLACE PLACEMENTS AND BUILDS LIFE AND CAREER SKILLS WITH SUPPORT FROM TRAINED COLLEGE MENTORS, STAFF, AND CONSULTANTS. FY24, 223 TEENS BENEFITTED FROM THE PROGRAMS, 67 ARTS AND CULTURAL PARTNERS AND 20 COMMUNITY BASED ORGANIZATIONS ENGAGED.

TEEN APPRENTICESHIP PROGRAM (TAP)

(TAP) SPRING, PROVIDED 67 TEENS FROM 20 NYC SCHOOLS APPRENTICESHIP-BASED LEARNING CLASSES AND SMALL GROUP MEETINGS COMPRISED OF 1,152 HOURS OF ARTS AND TEACHING-SKILLS DEVELOPMENT. IN THE SUMMER, 64 TEENS FROM FIVE BOROUGHES RECEIVED PAID INTERNSHIPS IN LOCAL COMMUNITY-BASED-ORGANIZATION SUMMER CAMPS TEACHING VISUAL ARTS, FOR A TOTAL OF 8,064 HOURS OF INTERN-LED INSTRUCTION TO CHILDREN.

BLOOMBERG ARTS INTERNSHIP (BAI)

THE BLOOMBERG ARTS INTERNSHIP PROGRAM PROVIDED 100 HIGH SCHOOL JUNIORS FROM 11 NYC PUBLIC HIGH SCHOOLS WITH ON SITE INTERNSHIPS AT ARTS PARTNER ORGANIZATIONS, MENTORING, JOB ASSIGNMENTS, ONLINE TECHNOLOGY AND WRITING

**SCHEDULE O
(Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service

Name of the organization

STUDIO IN A SCHOOL ASSOCIATION, INC.

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2023

**Open to Public
Inspection**

Employer identification number

13-3003112

CLASSES, AS WELL AS GUIDANCE FOR DEVELOPING COLLEGE APPLICATIONS. STUDIO INSTITUTE PARTNERED WITH 43 ARTS ORGANIZATIONS AND CULTURAL INSTITUTIONS TO PROVIDE THE STUDENTS WITH PAID, GUIDED WORK EXPERIENCE WITHIN THE ARTS AND CULTURE COMMUNITY.

STUDIO INTENSIVES PROVIDES FREE ART TRAINING TO NEW YORK CITY PUBLIC HIGH SCHOOL STUDENTS IN GRADES 10-12 WHO ARE CONSIDERING APPLYING TO BACHELOR OF FINE ARTS PROGRAMS. THE GOAL OF THE PROGRAM IS TO HELP STUDENTS DEVELOP THEIR TECHNICAL SKILLS AND BUILD THEIR ART PORTFOLIOS IN PREPARATION FOR APPLYING TO ART SCHOOLS AND TO BE PART OF AN EXHIBITION EXPERIENCE AT THE STUDIO IN A SCHOOL GALLERY. OFFERED ON SATURDAYS OR DURING SCHOOL BREAKS WITHIN THE ACADEMIC YEAR, INTENSIVES ARE LED BY PROFESSIONAL ARTISTS WITH THE ASSISTANCE OF A TRAINED STUDIO ASSISTANT. INSTRUCTION, ART SUPPLIES, AND METROCARDS ARE PROVIDED AT NO CHARGE.

FORM 990, PART III, LINE 4D:

OTHER PROGRAM SERVICES:

1) THROUGH STUDIO INSTITUTE, STUDIO OFFERS THREE COLLEGE PROGRAMS TO SUPPORT COLLEGE STUDENTS:

. ARTS INTERN COLLEGE PROGRAM PROVIDED 65 SUMMER INTERNSHIPS AND THROUGH A PILOT PROGRAM WITH CLEVELAND STATE UNIVERSITY, 20 FALL/SPRING INTERNSHIPS, WITHIN 73 ARTS AND CULTURAL INSTITUTIONS ACROSS THE NATION IN 2023-24. INTERNS WORK FOUR DAYS PER WEEK AT THEIR HOST ORGANIZATION AND ONE DAY EACH WEEK ENGAGE IN EDUCATIONAL ACTIVITIES SUCH AS SITE

**SCHEDULE O
(Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service

Name of the organization

STUDIO IN A SCHOOL ASSOCIATION, INC.

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

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OMB No. 1545-0047

2023

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Inspection**

Employer identification number

13-3003112

VISITS, FIELD TRIPS, PRESENTATIONS, AND VIRTUAL SEMINARS WITH ARTS PROFESSIONALS. ARTS INTERN PROVIDED PAID INTERNSHIPS AT MUSEUMS AND CULTURAL INSTITUTIONS IN BALTIMORE, BOSTON, CHICAGO, CLEVELAND, MEMPHIS, NEWARK (NJ), NEW YORK CITY, PHILADELPHIA, AND PROVIDENCE.

. STUDIO'S COLLEGE MENTOR PROGRAMS PROVIDE SUMMER EMPLOYMENT TO COLLEGE STUDENTS WHO SERVE AS MENTORS TO HIGH SCHOOL STUDENTS IN TWO INTERNSHIP PROGRAMS.

. SCHOLARSHIPS: TO SUPPORT THE BROADER FIELD OF VISUAL ARTS EDUCATION, STUDIO OFFERS COLLEGE SCHOLARSHIPS TO GRADUATING HIGH SCHOOL SENIORS.

EXPENSES: 668,974; GRANTS: 362,820; REVENUE: NONE.

2) THE STUDIO NYC EARLY CHILDHOOD PROGRAM SUSTAINED 88 PRE-K/KINDERGARTEN RESIDENCIES IN 2023-2024, SERVING 1,197 PRE-K AND K STUDENTS AND 617 TEACHERS.

STUDIO NYC CONTINUED OUR PARTNERSHIP WITH QUALITY STARS NEW YORK, A STATEWIDE INITIATIVE LED BY THE NEW YORK EARLY CHILDHOOD PROFESSIONAL DEVELOPMENT INSTITUTE AT CITY UNIVERSITY OF NEW YORK. QUALITY STARS NY PROVIDES RESOURCES AND SUPPORT TO EARLY CHILDHOOD PROGRAMS ACROSS THE CITY AND STATE; STUDIO NYC PROVIDED PROFESSIONAL DEVELOPMENT TO 338 TEACHERS AT 46 SITES IN FOUR BOROUGHES DURING THE 2023-24 SCHOOL YEAR. FOCUS IS ON VISUAL ARTS TEACHING STRATEGIES FOR TWO- TO FIVE-YEAR-OLDS.

**SCHEDULE O
(Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service

Name of the organization

STUDIO IN A SCHOOL ASSOCIATION, INC.

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

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

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13-3003112

IN FY24 WE PARTNERED AGAIN WITH WNET CHANNEL 13 ON THEIR LET'S LEARN SERIES, CREATING EIGHT NEW SEGMENTS THAT GUIDE CHILDREN AGES 3-7 THROUGH ART-MAKING LESSONS. THESE SEGMENTS AIRED ON 12 STATIONS IN EIGHT DIFFERENT MARKETS AND ARE AVAILABLE TO WATCH ONLINE.

DEMAND HAS REMAINED STRONG FOR PROFESSIONAL DEVELOPMENT IN THE EARLY CHILDHOOD PROGRAMING, INCLUDING CATHOLIC CHARITIES, HEAD START, AND FAMILY CHILDCARE HOME-BASED SITES HOSTING MULTIPLE PRE-K/KINDERGARTEN RESIDENCIES, WITH PROFESSIONAL DEVELOPMENT FOR EDUCATORS. IN COLLABORATION WITH THE NYC DOE, STUDIO SERVED 124 TEACHERS AND ADMINISTRATORS AT 18 SITES AS PART OF THE "CREATE" PROGRAM. PROFESSIONAL DEVELOPMENT WORKSHOPS FOCUS ON CURRICULA IN 3D ARTMAKING, WITH LESSONS IN CLAY AND FOUND OBJECTS. EDUCATORS ARE INTRODUCED TO STRATEGIES FOR TEACHING VISUAL ARTS THROUGH INQUIRY, EXPLORATION, AND DISCOVERY, AND FOR CONNECTING ARTMAKING TO THE WAY YOUNG CHILDREN LEARN: ASKING OPEN-ENDED QUESTIONS, EXPLORING MATERIALS AND MAKING DISCOVERIES. STUDIO INSTITUTE REPLICATES EARLY CHILDHOOD PROGRAMS IN CLEVELAND, OH, NEWARK, NJ, AND GREENWICH, CT.

EXPENSES: 680,208; GRANTS: NONE; REVENUE: 182,054.

3) EXHIBITIONS: STUDIO PROGRAMS CULMINATE IN SCHOOL-BASED EXHIBITIONS, AND MANY SITES PARTICIPATE IN STUDIO'S EXHIBITION COLLABORATIONS WITH CULTURAL INSTITUTIONS THROUGHOUT NEW YORK CITY. DURING FY24, THERE WERE 7 COLLABORATIVE EXHIBITIONS OF STUDENT ARTWORK. AT THE END OF THE SCHOOL

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

STUDIO IN A SCHOOL ASSOCIATION, INC.

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

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Inspection**

Employer identification number

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YEAR, YOUNG VISIONS 2024 FEATURED ARTWORK FROM OUR 200 PARTNER SCHOOLS.

IN ADDITION, STUDIO NYC AGAIN PARTNERED WITH THE NYC DOE AND THE

METROPOLITAN MUSEUM OF ART FOR A CITYWIDE EXHIBITION ENTITLED PS ART

2024. ARTWORK IS ALSO EXHIBITED AT STUDIO'S GALLERY SPACE AT 1 EAST 53RD

STREET IN MANHATTAN THROUGHOUT THE YEAR.

IN FY24, STUDIO IN A SCHOOL HOSTED TWO PROMINENT ARTISTS WHO MET WITH OUR

STUDENTS, OFFERING THEM WISDOM, GUIDANCE, AND INSPIRATION. CECILY BROWN

VISITED A 12TH GRADE CLASS AT ARCHIMEDES ACADEMY IN THE BRONX. BROWN

OFFERED HER PERSPECTIVES ON ART-MAKING, SHARING THAT PART OF THE JOY OF

CREATING IS IN "TAKING YOUR EYES FOR A WALK." DERRICK ADAMS VISITED A

THIRD-GRADE STUDIO CLASSROOM AT P.S. 93 IN BROOKLYN, WALKING DISTANCE

FROM HIS STUDIO. ADAMS TALKED STUDENTS THROUGH HIS ART AND ART-MAKING

PROCESS. NOTABLY, HE SHARED, "[FOR ME] MAKING ART IS ABOUT HAVING THE

FREEDOM TO MAKE THE THINGS I WANT TO SEE."

EXPENSES: 320,786; GRANTS: 31,317; REVENUE: 375.

4) ARTIST AND PROFESSIONAL DEVELOPMENT PROGRAMS FOR STUDIO NYC: THROUGH

GROUP TRAININGS AND ARTISTS SHADOWING ONE ANOTHER, STUDIO CREATES AND

MAINTAINS A COMMUNITY OF ARTISTS WHO TEACH TO THE HIGHEST STANDARDS. IN

ADDITION, STUDIO NYC OFFERS SPECIALIZED TRAINING FOR ALL NYC DOE ART

TEACHERS AS PART OF A SPECIAL HIDDEN VOICES CURRICULUM. IN FY24, 78

WORKSHOPS PROVIDED TRAINING FOR 77 ARTIST INSTRUCTORS AND 530 TEACHERS,

OFFERING 198 HOURS OF PROFESSIONAL TRAINING.

**SCHEDULE O
(Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service

Name of the organization

STUDIO IN A SCHOOL ASSOCIATION, INC.

Supplemental Information to Form 990 or 990-EZ

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EXPENSES: 287,253; GRANTS: NONE; REVENUE: NONE.

5) DEVELOPMENT PROJECTS AND PROFESSIONAL TRAINING AT STUDIO INSTITUTE
IN 2023-24, PROFESSIONAL LEARNING PROGRAMS IN COMMUNITIES CONTINUED IN
CONNECTICUT, NEW JERSEY, AND OHIO, SERVING HEAD START PROGRAMS AND PUBLIC
SCHOOLS.

IN-DEPTH ARTIST DEVELOPMENT PROGRAMS WERE PROVIDED TO CITY BASED COHORTS
OF VISUAL ARTISTS AND 20 HOURS OF PROFESSIONAL LEARNING WAS FACILITATED FOR
259 TODDLER AND PRESCHOOL TEACHERS FROM PARTICIPATING HEAD START/EARLY
HEAD START PROGRAMS. WORKSHOPS FOCUSED ON DELIVERING ARTS EDUCATION TO
YOUNG CHILDREN USING THE CREATIVE START UNITS, INCLUDING COLLAGE, CLAY,
PAINTING, AND CONNECTING DISCOVERY BASED LEARNING TO SOCIAL AND EMOTIONAL
DEVELOPMENT.

INFORMED BY PILOT PROGRAM FINDINGS, THE STUDIO INSTITUTE CONTINUED
IMPLEMENTING A VISUAL ARTS CURRICULUM FOR 2-3 YEAR OLDS FOR
EARLY-HEAD-START AND HEADSTART CENTERS IN NEWARK, NJ SITES.

EXPENSES: 60,116; GRANTS: NONE; REVENUE: NONE.

6) SCHOOL AND COMMUNITY PROGRAM SERVICES IN OTHER CITIES:

STUDIO INSTITUTE EARLY CHILDHOOD PROGRAMS - NEW JERSEY, OHIO, AND

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CONNECTICUT

IN 2023-2024 STUDIO INSTITUTE DELIVERED CREATIVE START, A DEVELOPMENTALLY APPROPRIATE VISUAL ARTS PROGRAM FOR YOUNG LEARNERS AGES 2-7 IN HEAD START COMMUNITY BASED ORGANIZATIONS AND SCHOOL DISTRICT PREK CLASSROOMS.

ARTIST INSTRUCTORS PROVIDED DISCOVERY-BASED LEARNING OPPORTUNITIES FOR YOUNG CHILDREN, PROFESSIONAL LEARNING FOR EDUCATORS, AND ART-MAKING EXPERIENCES FOR FAMILIES. ARTISTS IMPLEMENTED MEDIA-BASED OPEN-ENDED EXPLORATIONS DESIGNED TO ENHANCE A CHILD'S CREATIVITY, COMMUNICATION, SOCIAL/EMOTIONAL, COGNITIVE, AND PHYSICAL DEVELOPMENT. FACULTY PARTICIPATED IN PROFESSIONAL LEARNING SESSIONS ON CHILDREN'S VISUAL ART DEVELOPMENT, AND CLASSROOM TEACHERS RECEIVED IN-CLASS MENTORING ON ART INQUIRY METHODOLOGY AND ART MATERIALS MANAGEMENT FOR CLASSROOM USE DURING DAILY CHOICE TIMES.

IN CLEVELAND, WE PARTNERED WITH A HIGHLY REGARDED COMMUNITY ART CENTER, RAINEY INSTITUTE TO DELIVER 144 HOURS OF ARTS PROGRAMS TO 145 EARLY LEARNERS, 18 TEACHERS, AND 40 FAMILY MEMBERS. IN GREENWICH, CT, WE PARTNERED WITH 3 FAMILY CENTERS' EARLY CHILDHOOD EDUCATION PROGRAM TO SERVE 114 STUDENTS.

COLLABORATIVE SCHOOL PARTNERSHIPS

IN PARTNERSHIP WITH THE CLEVELAND METROPOLITAN SCHOOL DISTRICT, FOUR

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ELEMENTARY SCHOOLS PARTICIPATED IN LONG-TERM COLLABORATIVE SCHOOL PROGRAMS. BY ESTABLISHING A CHILDREN'S ART STUDIO IN SCHOOLS AND PLACING A PROFESSIONAL ARTIST IN A YEAR-LONG RESIDENCY, THE WEEKLY COLLABORATIVE PROGRAM PROMOTED STUDENT CREATIVITY AND ENGAGEMENT IN VISUAL ARTS AND LEARNING. WITH THE SUPPORT OF SCHOOL LEADERS AND CLASSROOM TEACHERS, STUDIO'S PROGRAMS ENSURED THAT ART WAS AN INTEGRAL PART OF EVERY CHILD'S EDUCATION. TEACHERS RECEIVED FACULTY ART WORKSHOPS AND PROGRAM CO-PLANNING SESSIONS.

CLASS STUDIES INCLUDED: DRAWING, PAINTING, PRINTMAKING, COLLAGE, SCULPTURE, 2D DESIGN, PHOTOGRAPHY AND DIGITAL ART MEDIA. FAMILY WORKSHOPS AND OPEN HOUSE EVENTS ENGAGED PARENTS IN SCHOOL-SPONSORED FAMILY ACTIVITIES.

STUDIO INSTITUTE: IN-PERSON SCHOOL AND COMMUNITY PROGRAMS IN PARTNERSHIP WITH THE CLEVELAND METROPOLITAN SCHOOLS DISTRICT AND HEAD START PROGRAMS IN NEWARK, NJ CONTINUED DURING THE 2023-24 SCHOOL YEAR, WITH ART WORKSHOPS, PLANNING MEETINGS, TEACHER PROFESSIONAL LEARNING, AND FAMILY WORKSHOPS. 2,052 CHILDREN FROM 124 CLASSROOMS BENEFITTED FROM THE 15 ARTIST INSTRUCTORS ENGAGED IN THE PROGRAMS.

EXPENSES: 771,123; GRANTS: NONE; REVENUE: 73,200.

RESPONSE TO INFLUX OF ASYLUM-SEEKING STUDENTS FOR STUDIO NYC:

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AT THE BEGINNING OF THE FY23 SCHOOL YEAR, WE SAW A SHIFT IN THE NEW YORK CITY PUBLIC SCHOOL SYSTEM AS ASYLUM-SEEKING FAMILIES ARRIVED FROM TEXAS. STUDIO NYC UTILIZED OUR MULTILINGUAL LEARNERS (MLL) CURRICULUM HELPING STUDENTS BUILD ENGLISH LANGUAGE SKILLS THROUGH VISUAL ARTS INSTRUCTION. IN FY24, WE CONTINUED TO SERVE TEN SCHOOLS WITH THIS SPECIALIZED INSTRUCTION THROUGHOUT THE YEAR.

IN ADDITION, STUDIO NYC CONTINUED TO PROVIDE RESIDENCIES AND PROFESSIONAL DEVELOPMENT IN VISUAL ARTS INSTRUCTION FOR THROUGH THESE "TEAM TEACHING" RESIDENCIES, WHICH SHARE STUDIO NYC'S PEDAGOGY AND APPROACH TO FOSTER CO-TEACHING PRACTICE FOR MLL STUDENTS, HELPING STUDENTS LEARNING ENGLISH FOR THE FIRST TIME CREATE ARTWORK WHILE SUPPORTING LANGUAGE ACQUISITION THROUGH TALKING AND WRITING ABOUT THEIR WORK. LESSONS WERE ALSO CREATED TO MEET STUDENTS' EMOTIONAL NEEDS, SUCH AS TEACHING PORTRAITURE HELPING STUDENTS DRAW LOVED ONES BACK HOME. STUDENTS CREATED PUPPETS AND WROTE STORIES ABOUT THE BACKSTORY OF THEIR PUPPET, INCREASING THEIR ENGLISH EXPRESSION ABILITIES.

FORM 990, PART VI, SECTION A, LINE 4:

ON JUNE 20, 2024, THE BOARD OF DIRECTORS OF STUDIO IN A SCHOOL ASSOCIATION, INC., ADOPTED REVISED BY-LAWS. THE FOLLOWING CHANGES WERE ADOPTED: THE BOARD CHANGED FROM A MINIMUM OF THREE BOARD MEMBERS AND A MAXIMUM OF 25, TO A MINIMUM OF FIVE BOARD MEMBERS AND A MAXIMUM OF 30, RESPECTIVELY. THE DEFINITION OF A "QUORUM" WAS CHANGED TO A MAJORITY OF THE ENTIRE BOARD. THE BOARD ADDED THE OPTION OF "ELECTRONIC VIDEO SCREEN

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COMMUNICATION" FOR MEETING ATTENDANCE. THE BOARD CHANGED THE CRITERIA FOR REMOVING A BOARD MEMBER FROM "WITH OR WITHOUT CAUSE" TO "WITH CAUSE." THE BOARD REMOVED THE REQUIREMENT THAT THE EXECUTIVE COMMITTEE KEEP MEETING MINUTES. THE BOARD ADDED: "ANY OFFICER MAY BE REMOVED WITH OR WITHOUT CAUSE BY A VOTE OF THE MAJORITY OF THE DIRECTORS PRESENT AT A DULY ORGANIZED MEETING OF THE BOARD." THE CONFLICT OF INTEREST AND WHISTLEBLOWER POLICY LANGUAGE WAS UPDATED TO BE NEW YORK STATE COMPLIANT. THE BOARD REMOVED ARTICLE X, "PROHIBITION AGAINST SHARING IN CORPORATE EARNINGS.

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

THE ORGANIZATION'S MANAGEMENT CONDUCTS AN INITIAL REVIEW OF THE FORM 990. THE FORM 990 IS THEN DISTRIBUTED TO THE FULL BOARD OF DIRECTORS FOR THE OPPORTUNITY TO REVIEW AND MAKE INQUIRY PRIOR TO FILING WITH THE IRS.

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

THE OFFICERS, DIRECTORS, AND KEY EMPLOYEES OF THE STUDIO IN A SCHOOL ASSOCIATION, INC. REVIEW THE CONFLICT OF INTEREST POLICY ON AN ANNUAL BASIS. THIS DISTRIBUTION IS RECORDED IN THE CONTEMPORANEOUS MINUTES OF THE BOARD MEETING. THE DISCLOSURE STATEMENTS ARE SIGNED AND SUBMITTED TO THE CHAIRPERSON OF THE BOARD. PRIOR TO THEIR ELECTION, ANY POTENTIAL MEMBERS DISCLOSE, IN WRITING, ANY INTEREST IN ANY CORPORATION OR OTHER ORGANIZATION THAT PROVIDES GOODS OR PROFESSIONAL SERVICES TO THE CORPORATION FOR A FEE OR OTHER COMPENSATION. IF AT ANY TIME A DIRECTOR OR OFFICER ACQUIRES AN INTEREST IN A MATTER THAT MIGHT POSE A CONFLICT, HE

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OR SHE PROMPTLY DISCLOSES SUCH INTEREST IN WRITING TO THE CHAIRPERSON OF THE BOARD. WHEN ANY MATTER IN WHICH A DIRECTOR, OFFICER, OR KEY EMPLOYEE HAS AN INTEREST COMES BEFORE THE BOARD OR A COMMITTEE OF THE BOARD FOR DECISION OR APPROVAL, THE INTEREST SHALL IMMEDIATELY BE DISCLOSED TO THE BOARD OF COMMITTEE BY THE INDIVIDUAL WHO HAS THE INTEREST.

FORM 990, PART VI, SECTION B, LINES 15A AND 15B:

THE BUDGET AND PERSONNEL COMMITTEES OF THE BOARD OF DIRECTORS REVIEWS AND APPROVES THE COMPENSATION FOR THE PRESIDENTS, DIRECTOR OF DEVELOPMENT, AND DIRECTOR OF FINANCE -- THE KEY EMPLOYEES OF THE ORGANIZATION -- THROUGH DELIBERATION AT ITS ANNUAL REVIEW MEETING OF THE PROPOSED ORGANIZATION BUDGET IN THE LATE SPRING (APRIL-MAY) OF EACH FISCAL YEAR FOR THE ENSUING FISCAL YEAR. IN ORDER TO DETERMINE COMPENSATION, THE COMMITTEE REVIEWS STAFF COMPENSATION HISTORY, AND DATA SUCH AS INFLATION. COMPARABILITY DATA IS PRESENTED (E.G. FROM THE PROFESSIONALS FOR NONPROFITS SALARY SURVEY). THE DELIBERATION IS CONTEMPORANEOUSLY SUBSTANTIATED THROUGH WRITTEN MINUTES OF THE MEETING(S). THE FINAL SALARY PROPOSAL IS PRESENTED AT THE MEETING OF THE BOARD OF DIRECTORS IN JUNE FOR APPROVAL AS PART OF THE PROPOSED ANNUAL EXPENSE BUDGET.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART XI LINE 9:

**SCHEDULE O
(Form 990 or 990-EZ)**

Supplemental Information to Form 990 or 990-EZ

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STUDIO IN A SCHOOL ASSOCIATION, INC.

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PRIOR YEAR EXPENSES.....1,981.

FORM 990, PART XII LINE 2B:

THE FINANCIAL STATEMENTS FOR THE YEAR WERE AUDITED ON A CONSOLIDATED BASIS AND INCLUDE 2 SINGLE MEMBER LLCs THAT ARE DISREGARDED FOR TAX REPORTING. SEE FORM 990, SCHEDULE R, PART I FOR DETAIL. REPORTING. SEE FORM 990, SCHEDULE R, PART I FOR DETAIL. THE FINANCIAL STATEMENTS FOR THE YEAR WERE AUDITED ON A CONSOLIDATED BASIS AND INCLUDE 2 SINGLE MEMBER LLCs THAT ARE DISREGARDED FOR TAX REPORTING. SEE FORM 990, SCHEDULE R, PART I FOR DETAIL. REPORTING. SEE FORM 990, SCHEDULE R, PART I FOR DETAIL.

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

Related Organizations and Unrelated Partnerships

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

Attach to Form 990.

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

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STUDIO IN A SCHOOL ASSOCIATION, INC.

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) STUDIO IN A SCHOOL NYC, LLC 81-3642389 75 WEST END AVENUE NEW YORK, NY 10023	VISUAL ART ED	NY	7,558,427.	2,938,210.	SIAS
(2) STUDIO INSTITUTE, LLC 81-3618783 410 WEST 59TH STREET NEW YORK, NY 10019	VISUAL ART ED	NY	4,486,230.	7,720,283.	SIAS
(3)					
(4)					
(5)					
(6)					

Part II 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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							

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

Schedule R (Form 990) 2023

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512 - 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity.	1a	
b Gift, grant, or capital contribution to related organization(s)	1b	
c Gift, grant, or capital contribution from related organization(s)	1c	
d Loans or loan guarantees to or for related organization(s)	1d	
e Loans or loan guarantees by related organization(s)	1e	
f Dividends from related organization(s)	1f	
g Sale of assets to related organization(s)	1g	
h Purchase of assets from related organization(s)	1h	
i Exchange of assets with related organization(s)	1i	
j Lease of facilities, equipment, or other assets to related organization(s)	1j	
k Lease of facilities, equipment, or other assets from related organization(s)	1k	
l Performance of services or membership or fundraising solicitations for related organization(s)	1l	
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	
o Sharing of paid employees with related organization(s)	1o	
p Reimbursement paid to related organization(s) for expenses.	1p	
q Reimbursement paid by related organization(s) for expenses	1q	
r Other transfer of cash or property to related organization(s)	1r	
s Other transfer of cash or property from related organization(s)	1s	

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512 - 514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													
(12)													
(13)													
(14)													
(15)													
(16)													

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.
