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EXTENDED TO NOVEMBER 15, 2023

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form 990

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

2022

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A For the 2022 calendar year, or tax year beginning and ending
B Check if applicable:
C Name of organization: ART SPHERE INC.
D Employer identification number: 23-2994202
E Telephone number: 215-413-3955
G Gross receipts \$: 146,631.
H(a) Is this a group return for subordinates? No
H(b) Are all subordinates included? No
I Tax-exempt status: 501(c)(3)
J Website: WWW.ARTSPHERE.ORG
K Form of organization: Corporation
L Year of formation: 1998
M State of legal domicile: PA

Part I Summary
1 Briefly describe the organization's mission or most significant activities: ARTS EDUCATION FOR YOUTH AND OTHERS.
2 Check this box 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) 8
4 Number of independent voting members of the governing body (Part VI, line 1b) 8
5 Total number of individuals employed in calendar year 2022 (Part V, line 2a) 0
6 Total number of volunteers (estimate if necessary) 0
7a Total unrelated business revenue from Part VIII, column (C), line 12 0.
7b Net unrelated business taxable income from Form 990-T, Part I, line 11 0.
8 Contributions and grants (Part VIII, line 1h) 97,828.
9 Program service revenue (Part VIII, line 2g) 82,520.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 0.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0.
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 180,348.
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0.
14 Benefits paid to or for members (Part IX, column (A), line 4) 0.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 52,364.
16a Professional fundraising fees (Part IX, column (A), line 11e) 0.
16b Total fundraising expenses (Part IX, column (D), line 25) 0.
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 61,151.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 113,515.
19 Revenue less expenses. Subtract line 18 from line 12 66,833.
20 Total assets (Part X, line 16) 311,441.
21 Total liabilities (Part X, line 26) 0.
22 Net assets or fund balances. Subtract line 21 from line 20 311,441.

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: Signature of officer KRISTIN GROENVELD, EXECUTIVE DR.
Date:
Paid Preparer Use Only: Print/Type preparer's name FRANK P. CELLUCCI, Preparer's signature, Date, Check if self-employed, PTIN P00634322, Firm's name MORRIS J. COHEN & CO., P.C., Firm's EIN 23-2666906, Firm's address 1601 MARKET STREET SUITE 2525