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Return of Organization Exempt From Income Tax

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements. 07/01, 2010, and ending 06/30, 20 11 A For the 2010 calendar year, or tax year beginning D Employer identification number C Name of organization B Check if applicable INTERNATIONAL TRUMPET GUILD 54-1030357 Doing Business As E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite P.O. BOX 2688 (563) 676-2435 Initial return City or town, state or country, and ZIP + 4 Terminated Amended DAVENPORT, IA 52809-2688 378,169. G Gross receipts \$ Application pending H(a) Is this a group return for F Name and address of principal officer KEVIN EISENSMITH X No SAME AS LINE C ABOVE, X No H(b) Are all affiliates included? Tax-exempt status X 501(c)(3) 501(c) ((insert no) 4947(a)(1) or 527 If "No," attach a list (see instructions)) ◀ Website: ► TRUMPETGUILD.ORG H(c) Group exemption number Form of organization | X | Corporation L Year of formation 1974 M State of legal domicile VA Association Other > Trust Summary Part I Briefly describe the organization's mission or most significant activities: TO PROMOTE COMMUNICATION AMONG TRUMPET PLAYERS AROUND THE WORLD AND TO IMPROVE THE ARTISTIC LEVEL OF PERFORMANCE, TEACHING AND LITERATURE ASSOCIATED WITH THE TRUMPET. 2 If the organization discontinued its operations or disposed of more than 25% of its net assets Check this box ▶ Number of voting members of the governing body (Part VI, line 1a) 23. 3 ಹ 20. Number of independent voting members of the governing body (Part VI, line 1b) 4. Total number of individuals employed in calendar year 2010 (Part V, line 2a) 5 150. Total number of volunteers (estimate if necessary) 6 104,480. 7a Total gross unrelated business revenue from Part VIII, column (C), line 12 27,327. b Net unrelated business taxable income from Form 990-1; inc 34 **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) 25,225 37,540. Program service revenue (Part VIII, line 2g)
Investment income (Part VIII, column (A), lines 3, 4 and 7d) 327,406 334,140. 2 9 7,473. 4,997. <u></u>≴10 311 Other revenue (Part VIII, column (A), lines 5, 6d, 8¢, 9¢, 10¢, and 11e) 2,138 1,492. 362,242 378,169. Total revenue - add lines 8 through 11 (must equal Part VIII) columb (A) line (12) 12 17,690. 32,493 ∯13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) Benefits paid to or for members (Part IX, column (A), line 4) 0. 102,788 100,317. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0. 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) ▶ 204,378 207,989. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 324,856 340,799. 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 37,386 37,370. Revenue less expenses Subtract line 18 from line 12 **Beginning of Current Year** End of Year 383,624. 401,636. 20 Total assets (Part X, line 16) 108,188. Total liabilities (Part X, line 26) 88,830. 21 275,436. 312,806. Net assets or fund balances Subtract line 21 from line 20. 22 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 the proficer) is based on all information of which preparer has any knowledge Sign e of officer Here Type or print name and title Print/Type preparer's name Date Check if 1-24-12 Paid RAY D. HARRISON P00449411 employed > Preparer CRIPPEN, REID & BOWEN, L.L.C. Firm's EIN 36-2767460 Lise Only Firm's address ▶ 1528 - 47TH AVENUE MOLINE, IL 61265 Phone no 309-764-3200 May the IRS discuss this return with the preparer shown above? (see instructions) No Yes

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2010)

JSA

Part	Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	1		1
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			ĺ
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			1
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			1
	Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have			
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			1
	complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
•	complete Schedule D. Part III	8		x
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part			
•	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			1
	complete Schedule D, Part N	9		x
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or	Ť		
	quasi-endowments? If "Yes," complete Schedule D, Part V	10	х	1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,		STEPPA	7
''	VII, VIII, IX, or X as applicable			
_	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
a		11a	х	1
L	Schedule D, Part VI Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	11a		
D		11b		x
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	110		<u> </u>
С	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more	44-		х
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			x
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	х	\vdash
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			v
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes,"			.,
	•	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	_	Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV · ·	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			ĺ
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			į
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		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? If "Yes," complete Schedule G, Part I (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on		Ī	
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			_
	If "Yes," complete Schedule G, Part III	19		X
20 a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form			
	990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

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Par	Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			1
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			1
	employees? If "Yes," complete Schedule J	23		х
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			l
	through 24d and complete Schedule K. If "No," go to line 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
•	to defease any tax-exempt bonds?	24c		
А	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
~	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			l
	If "Yes," complete Schedule L, Part I	25b		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			
	If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
-	Schedule L, Part N	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
_	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		Х
а	Did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R,			1
	Part V, line 2 Yes X No			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			
-	19? Note. All Form 990 filers are required to complete Schedule O	38	Х	
		Form	990	(2010)

Par							
	Check if Schedule O contains a response to any question in this Part V	•••	Yes	·			
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		163	NO			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	4 1					
	Did the organization comply with backup withholding rules for reportable payments to vendors and	1					
	reportable gaming (gambling) winnings to prize winners?	1 c	X				
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax						
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 4						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X				
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			L			
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Х				
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3 b	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	4a		х			
	account)?						
D	of f"Yes," enter the name of the foreign country						
.	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts	5a		X			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X			
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c					
	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?	6a		х			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or						
	gifts were not tax deductible?	6ъ					
7	Organizations that may receive deductible contributions under section 170(c).						
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods						
	and services provided to the payor?	7 a		X			
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7 b					
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was						
	required to file Form 8282?	7c		X			
	If "Yes," indicate the number of Forms 8282 filed during the year						
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X			
ī ~	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f					
y h	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h					
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting]			
•	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring						
	organization, have excess business holdings at any time during the year?	8		X			
9	Sponsoring organizations maintaining donor advised funds.						
а	Did the organization make any taxable distributions under section 4966?	9a		X			
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9 b		Х			
10	Section 501(c)(7) organizations. Enter						
а	Initiation fees and capital contributions included on Part VIII, line 12	!					
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities [10b]			, 1			
11	Section 501(c)(12) organizations. Enter	•					
	Gross income from members or shareholders	1 1					
Þ	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)						
420	against amounts due or received from them)	12a		!			
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	124					
13	Section 501(c)(29) qualified nonprofit health insurance issuers.						
	Is the organization licensed to issue qualified health plans in more than one state?	13a	-	1			
	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			į			
	the organization is licensed to issue qualified health plans			\			
С	Enter the amount of reserves on hand						
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х			
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b					

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 71 for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or			
	Schedule O. See instructions.			(T)
Soot	Check if Schedule O contains a response to any question in this Part VI ion A. Governing Body and Management	· · ·	• •	X
Seci	ion A. Governing Body and Management]	Yes	No
4-	Enter the number of voting members of the governing body at the end of the tay year		,	
	Enter the number of voting members of the governing body at the end of the tax year			`
ь 2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			-
2	any other officer, director, trustee, or key employee?	2		х
3	Did the organization delegate control over management duties customarily performed by or under the direct			_
•	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Does the organization have members or stockholders?	6	Х	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a	X	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7 b	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:		х	
а	The governing body?	8a		x
b	Each committee with authority to act on behalf of the governing body?	8 b		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		x
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Revenue)	
0000	On b. 1 onoice (This Cooling & Foquesia minimation about position net required by the internal Nevertual	0000	Yes	No
102	Does the organization have local chapters, branches, or affiliates?	10a	Х	
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
-	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		Х
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			
	form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b		
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this is done	12c		x
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14		-
15	Did the process for determining compensation of the following persons include a review and approval by			
_	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	15a		х
a b	Other officers or key employees of the organization	15b		X
D	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions)			
16a		i		
. • •	with a taxable entity during the year?	16a		Х
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			
	the organization's exempt status with respect to such arrangements?	16b		
Sect	ion C. Disclosure			.
17	List the states with which a copy of this Form 990 is required to be filed \(\subseteq \frac{VA}{2} \).			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)	s only))	
	available for public inspection. Indicate how you make these available Check all that apply			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of inte	rest		
	policy, and financial statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization. DIXIE BURRESS 4112 WEST KIMBERLY ROAD, DAVENPORT, IA 52806	1e		
	organization.			

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Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,	
	and Independent Contractors	
	Check if Schedule O contains a response to any question in this Part VII	· 🗀

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average hours per week (describe hours for related organizations in Schedule O)	हैं Individual trustee A or director	Institutional trustee	Officer	Key employee	ल Highest compensated at employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
(1)WILLIAM PFUND					•					
PAST PRESIDENT / DIRECTOR	3.00	Х		Х						
(2)JEFFREY_PIPER DIRECTOR		Х								
(3)MICHAEL ANDERSON										
DIRECTOR	10.00	X						6,000.		C
(4)DAVID_BALDWIN DIRECTOR		Х							. —	
(5) STEPHEN CHENNETTE DIRECTOR		х								
(6)ANNE HARDIN DIRECTOR		Х								
(7) CATHY LEACH DIRECTOR		х								
(8)GARY_MORTENSON DIRECTOR	15.00	х						17,004.		C
(9) JAMES OLCOTT DIRECTOR		Х								
		Х								
(11)ALAN SIEBERT DIRECTOR		х								
(12)NEVILLE_YOUNG DIRECTOR		Х								
		х								
		х								
		х								
(16)MICHAEL CHAPPLE DIRECTOR		Х								

Form 990 (2010)

JSA

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)									
(A) Name and title	(B) Average	Average Position (check all that apply					(D) Reportable	(E) Reportabl	
	hours per week (descnbe hours for related organizations in Schedule O)	Individual trustee or director	Institutional	Officer	employee Key employee	Former	compensation from the organization (W-2/1099-MISC)	compensati from relate organizatio (W-2/1099-M	ed other ons compensation
(17) LUIS ENGELKE		y.							
DIRECTOR (18) KEITH JOHNSON		X	-	+		+			
DIRECTOR		Х				_			
(19) GRANT PETERS DIRECTOR		x							
(20) KEVIN EISENSMITH PRESIDENT	25.00		,	x					
(21)BRIAN EVANS SECRETARY	15.00			x					
(22) DIXIE BURRESS	13.00					\dagger			
TREASURER	20.00		;	X	_	ļ	19,628.		0.
VICE PRESIDENT	10.00		;	X					
(24)									
(25)									
(26)				+	_	-			
(27)					•				
(28)									
1b Sub-total				•		▶	42,632		0.
c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c)	ection A .						42,632		0.
Total number of individuals (including but not reportable compensation from the organization)	limited to t	hose					<u> </u>	\$100,000 in	
reportable compensation from the organization									Yes No
3 Did the organization list any former office employee on line 1a? If "Yes," complete Sched									
4 For any individual listed on line 1a, is the the organization and related organizations individual	greater th	an \$	150,	000	? <i>If</i> '	Yes,'	' complete Sched	ule J for su	om uch
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Y	accrue co	mpen	satio	n fro	om ar	y un	related organizati	on or individ	
Section B. Independent Contractors 1 Complete this table for your five highest	compensat	ed in	dene	nde	nt co	ntrac	tore that receive	d more than	\$100,000 of
compensation from the organization	Compensar			- IIUC				u more man	
(A) Name and business add						(B) Description of se	rvices	(C) Compensation	
	-								
2 Total number of independent contractors (in more than \$100,000 in compensation from the				ted	to the	se i	isted above) who	received	

Par	t VIII	Statement of Revenue					
			,	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ត ស	1a	Federated campaigns 1a			_		
ran nu	ь	Membership dues 1b					
S, g	С	Fundraising events 1c			į		
ar a	d	Related organizations 1d					
ns, E	θ	Government grants (contributions) 1e					
ar S	f	All other contributions, gifts, grants,					
훈		and similar amounts not included above . 1f	37,540.				
Contributions, gifts, grants and other similar amounts	g	Noncash contributions included in lines 1a-1f \$			į		
	h_	Total. Add lines 1a-1f	▶	37,540.			
ğ			Business Code				
ě,	2a	ADVERTISING SALES	511120	103,855.		103,855.	
2	b	COMPETITION INCOME		3,704.	3,704.		
돌	С	CD & JOURNAL SALES		6,402.	6,402.		ļ .
Program Service Revenue	d	BOOK & OTHER SALES		344.	344.		
ram	е	MEMBERSHIP DUES		219,835.	219,835.		
rog	f	All other program service revenue					
<u> </u>	g	Total. Add lines 2a-2f	<u></u>	334,140.		 	
	3	Investment income (including dividends, inter	est, and				
		other similar amounts) ATTACHMENT		4,997.	4,997.		<u> </u>
	4	Income from investment of tax-exempt bond p		0.			
	5	Royalties · · · · · · · · · · · · · · · · · · ·	(II) Personal	0.			
			(ii) Fersonal				
	6a	Gross Rents					
	Ь	Less rental expenses					
	C	Rental income or (loss) L	<u>'</u>				·
	d	Net rental income or (loss) (ı) Securities	(II) Other	0.		-	
	7a	Gross amount from sales of	(ii) Otiloi				
		assets other than inventory					
	b	Less cost or other basis					
	_	and sales expenses					
	9	Gain or (loss)	<u>'</u>	0.			
•							
une	8a	Gross income from fundraising					
Ve.		events (not including \$ of contributions reported on line 1c).					
Re		See Part IV, line 18 a					
Other Reven		Less direct expenses b	1				
Ħ.	i	Net income or (loss) from fundraising events .		0.	~		
U		Gross income from gaming activities					1
	74	See Part IV, line 19 a					
	ь	Less direct expenses b	1 1	_			
	c	Net income or (loss) from gaming activities		0.			
	10a	Gross sales of inventory, less					
		returns and allowances a					
	ь	Less: cost of goods sold b	1 1				
		Net income or (loss) from sales of inventory		0.			
		Miscellaneous Revenue	Business Code				
	11a	POSTAGE OPTION FEE		420.	420.		
	ь	FINANCE CHARGES AND NFS FEES	511120	625.		625.	
	С	MISCELLANEOUS		447.	447.		
	d	All other revenue					
	e	Total. Add lines 11a-11d	▶	1,492.			
	12	Total revenue. See instructions		378,169.	236,149.	104,480.	

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) but are not required to complete columns (B), (C), and (D).

	All other organizations must comp		not required to comple		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	3,000.	3,000.		
2	Grants and other assistance to individuals in the U.S See Part IV, line 22	22,134.	22,134.	,	
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	7,359.	7,359.		
4	Benefits paid to or for members	0.		·	
5	Compensation of current officers, directors, trustees, and key employees	42,632.	42,632.		
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.			
7	Other salaries and wages	50,647.	45,174.	5,473.	
8	Pension plan contributions (include section 401(k)	0.	33,2	3,3.3.	
_	and section 403(b) employer contributions)	0.		· · · · · · · · · · · · · · · · · · ·	
9	Other employee benefits	7,038.	6,382.	656.	
0 1	Payroll taxes		0,302.	030.	
а	Management	0.			
	Legal	0.		7 450	
	Accounting	7,450.		7,450.	
d	Lobbying	0.			
е	Professional fundraising services See Part IV, line 17	0.	,		
f	Investment management fees	0.			
g	Other	0.			
2	Advertising and promotion	0.			
3	Office expenses	1,480.	64.	1,416.	
4	Information technology	851.	686.	165.	
5	Royalties	0.			
6	Occupancy	0.			
7	Travel	42,065.	7,359.	34,706.	
3	Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
9	Conferences, conventions, and meetings	568.	568.		
)	Interest	0.			
1	Payments to affiliates	0.			
2	Depreciation, depletion, and amortization	1,596.		1,596.	
- 3	Insurance	1,952.		1,952.	
4	Other expenses Itemize expenses not covered		,	,	
	above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column]		
	(A) amount, list line 24f expenses on Schedule O)	` ,			•
	PRINTING & PUBLICATION	54,121.	47,894.	6,227.	· · ·
	POSTAGE & HANDLING	53,489.	53,489.	0,227.	·
-	COMPETITION EXPENSES	3,321.	3,321.		
_	CD/DVD PROJECT COSTS	13,794.	13,794.		
-	MEMBERSHIP DEVELOPMENT	3,954.	13,794.	3,954.	
Ϊ.		23,348.	15,576.	7,772.	··
	All other expenses				·
	Total functional expenses. Add lines 1 through 24f	340,799.	269,432.	71,367.	
6	Joint Costs. Check here ▶ if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Pa	rt X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		1	
	2	Savings and temporary cash investments	360,301.	2	390,270.
	3	Pledges and grants receivable, net	· · ·	3	
	4	Accounts receivable, net	9,129.	4	6,020.
1	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees Complete Part II of	•		, , ,
		Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons	,		
		described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of	ę,		•
		section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
Assets	7	Notes and loans receivable, net	<u> </u>	7	
18S	8	Inventories for sale or use		8	
~	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or	,		
		other basis Complete Part VI of Schedule D 10a 7,744.	,		,
	b	Less accumulated depreciation	3,752.	10c	3,278.
	11	Investments - publicly traded securities		11	
	12	Investments - other securities See Part IV, line 11		12	
	13	Investments - program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	10,442.	15	2,068.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	383,624.	16	401,636.
\neg	17	Accounts payable and accrued expenses	3,618.	17	847.
	18	Grants payable		18	· ·
	19	Deferred revenue		19	
-	20	Tax-exempt bond liabilities		20	
ဖွ	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key			
į		employees, highest compensated employees, and disqualified persons.			
Ë		Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities Complete Part X of Schedule D	104,570.	25	87,983.
	26	Total liabilities. Add lines 17 through 25	108,188.	26	88,830.
ç		Organizations that follow SFAS 117, check here ▶ and complete lines 27 through 29, and lines 33 and 34.			
nce	27	Unrestricted net assets		27	
ala	28	Temporarily restricted net assets		28	-
B	29	Permanently restricted net assets		29	
ŭ		Organizations that do not follow SFAS 117, check here ► X and		23	· , ·
Net Assets or Fund Balances		complete lines 30 through 34.	•	`	
ţ	30	Capital stock or trust principal, or current funds		30	
SSe	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Ä	32	Retained earnings, endowment, accumulated income, or other funds	275,436.		312,806.
Š	33	Total net assets or fund balances	275,436.		312,806.
	34	Total liabilities and net assets/fund balances	383,624.	34	401,636.

Form **990** (2010)

54-1030357 Form 990 (2010) Page **12** Part XI **Reconciliation of Net Assets** Check if Schedule O contains a response to any question in this Part XI....... 378,169. 1 Total revenue (must equal Part VIII, column (A), line 12)................. 340,799. 2 2 37,370. 3 275,436. 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 5 Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, 312,806. -Part-XII-**Financial Statements and Reporting** Yes No X Accrual Accounting method used to prepare the Form 990: Cash Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O 2a Were the organization's financial statements compiled or reviewed by an independent accountant? Х b Were the organization's financial statements audited by an independent accountant? 2b Х 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? 2c If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both Both consolidated and separate basis Separate basis Consolidated basis

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in

If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

the Single Audit Act and OMB Circular A-133?

Form 990 (2010)

3a

3b

Х

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No 1545-0047
2010
Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

INTERNATIONAL TRUMPET GUILD

Employer identification number 54-1030357

										٠.		
Pa	rt 1	Reason for Pub	lic Charity Status	s (All organizations mu	ist cor	nplete	this pa	art.) Se	e instr	uctions).	
The	orga	nization is not a priv	ate foundation be	cause it is: (For lines 1 th	rough	11, che	ck only	one bo	x)		· · · · · ·	
1		A church, convention	on of churches, or	association of churches	describ	ed in s	ection	170(b)((1)(A)(i)	١.		
2	П			(1)(A)(ii). (Attach Schedul				, ,,				
3	П			erative hospital service organization described in section 170(b)(1)(A)(iii).								
4	H			erated in conjunction wi						n 170/l	b)(1)(A)(iii). Enter the	
•	ш	hospital's name, cit		oration in conjunction in		.оора			5551.5		5)(1)(/·)(III): =IIIO: IIIO	
5		•		nefit of a college or univ	ereity	OWNE	l or one	rated l		vernme	ental unit described in	
Ŭ	ш	section 170(b)(1)(/		-	Cronly	OWITCO	or ope	nateu i	o, a go	Verrinte	intal unit described in	
6				al government or governmental unit described in section 170(b)(1)(A)(v).								
7	Н										46	
1	Ш		zation that normally receives a substantial part of its support from a governmental unit or from the general public									
		described in section										
8				on 170(b)(1)(A)(vi). (Com								
9	X		•	es: (1) more than 331/3%							•	
				exempt functions - subj	•							
		•		ome and unrelated busi				•		n 511	tax) from businesses	
				e 30, 1975 See section	-				•			
10	Ш	-	-	ted exclusively to test for	-	•				-		
11		_	_	rated exclusively for the							•	
		purposes of one o	r more publicly su	pported organizations de	escribe	d in s	ection 5	509(a)(1) or se	ection 5	i09(a)(2) See section	
		509(a)(3). Check th	ne box th <u>at d</u> escrib	es the type of supporting	organ	ızatıon	and co	mplete	lines 11	1e th <u>ro</u>	ugh 11h.	
		a Type I	b Type	Ⅱ c Type	III - Fu	unction	ally inte	grated		d	Type III - Other	
е		By checking this I	box, I certify that	the organization is not	contr	olled o	directly	or ind	irectly	by one	or more disqualified	
		persons other than	foundation mana	gers and other than one	or mo	re pub	ticly su	pported	dorgan	izations	described in section	
		509(a)(1) or section					•		•			
f				n determination from the	e IRS	that it	ıs a Tv	/pe I. 1	vpe II.	or Typ	e III supporting	
		organization, check	Alete Is a	. <i>.</i>			_			,,	,	
g	ı	•		nization accepted any gift				anv of	the			
•	•	following persons?	-					,				
				ctly controls, either alor	ne or t	ogethe	er with	person	s desc	rihed in	(ii) Yes No	
		* * * * * * * * * * * * * * * * * * * *	·	ly of the supported organ		_		p0.00			11g(i) X	
			-	scribed in (i) above?	Lation	• • •					11g(ii) X	
				on described in (i) or (ii) a	 hova?						11g(iii) X	
h				ut the supported organiza								
	-	ame of supported	(ii) EIN				(4) 0.4		() _ 4L _	(vill) Amount of	
		organization	(11) EXIN	(iii) Type of organization (described on lines 1-9		Is the zation in	the orga	ou notify			(vii) Amount of support	
		,		above or IRC section		listed in overning	ın col	(ı) of	col (i) o	rganızed		
				(see instructions))	docu	ment?	your su			US?		
					Yes	No	Yes	No	Yes	No		
(A)										!		
. ,												
(B)							i					
												
(C)							i					
(0)					l							
/D\												
(D)												
/E\												
(E)						<u> </u>						
Tota	al				1]						

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

Schedule A (Form 990 or 990-EZ) 2010

Sche	dule A (Form 990 or 990-EZ) 2010			54	-1030357		Page 2
Pai	Support Schedule for Or (Complete only if you check Part III. If the organization f	ked the box or	n line 5, 7, or 8	3 of Part I or if	the organizat	ion failed to qu	
Sec	tion A. Public Support						
	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each						
	person (other than a governmental unit or						
	publicly supported organization) included						
	on line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						
<u>6</u>	Public support. Subtract line 5 from line 4 tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	Amounts from line 4	(-,	(3) 2 3 3	(7/	(.,,	(4,221	(,, , , , , , , , , , , , , , , , , , ,
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10	·		L		ļ	
12	Gross receipts from related activities, etc. (see instructions) .				12	
13	First five years. If the Form 990 is f organization, check this box and stop here						
Sec	tion C. Computation of Public Sup						
14	Public support percentage for 2010 (li						%
15	Public support percentage from 2009						%
16a	331/3% support test - 2010. If the c						1 1
	this box and stop here. The organizati			-			
b	331/3% support test - 2009. If the	•					
4-	check this box and stop here. The org						
17a	10%-facts-and-circumstances test - 2						
	or more, and if the organization meets to organization.	the "facts-and-c	circumstances" t	est. The organi	zation qualifies	as a publicly s	
b	organization						and line

Schedule A (Form 990 or 990-EZ) 2010

15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here**. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.....▶

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 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)

Sec	tion A. Public Support						
Ca	alendar year (or fiscal year beginning in) 🕨	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received (Do not include any "unusual grants")	12,179.	26,630.	49,480.	25,225.	37,540.	151,054.
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	209,985.	240,103.	241,811.	230,190.	231,152.	1,153,241.
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	222,164.	266,733.	291,291.	255,415.	268,692.	1,304,295.
	Amounts included on lines 1, 2, and 3		200,1001			200,0020	2,001,100
, a	received from disqualified persons	2,151.	10,000.	27,240.	16,460.	30,115.	85,966.
b	Amounts included on lines 2 and 3	2,101.	20,000	4.,2.,0			
	received from other than disqualified persons that exceed the greater of						
	\$5,000 or 1% of the amount on line 13				i		
	for the year	2,151.	10,000.	27,240.	16,460.	30,115.	85,966.
8	Add lines 7a and 7b	2,131.	20,000.	27,2101		30,1101	
•	line 6)		,	,	.`		1,218,329.
Sec	tion B. Total Support					L	2,220,0201
	alendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9	Amounts from line 6,	222,164.	266,733.	291,291.	255,415.	268,692.	1,304,295.
	Gross income from interest, dividends,			,			_,
	payments received on secunties loans,						
	rents, royalties and income from similar sources	12,325.	8,446.	7,453.	7,473.	4,997.	40,694.
h	Unrelated business taxable income (less	12,0101			.,		
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
_	Add lines 10a and 10b	12,325.	8,446.	7,453.	7,473.	4,997.	40,694.
11	Net income from unrelated business	12,323.	0,440.	- ,,155.	77413.	1,557.	10,051.
	activities not included in line 10b,						
	whether or not the business is regularly			ĺ			
	carried on						•
12	Other income Do not include gain or						
	loss from the sale of capital assets						
40	(Explain in Part IV)						
13	• • • • • • • • • • • • • • • • • • • •	234,489.	275 170	200 744	262 000	272 590	1 244 000
	and 12)		275,179.	298,744.	262,888.	273,689.	1,344,989.
14	First five years. If the Form 990 is for organization, check this box and stop here	_			-	•	
500	tion C. Computation of Public Sur			· · · · · · · · · · · ·			
15	Public support percentage for 2010 (line 8			nn (fl.)		15	90.58%
16	Public support percentage from 2009 Sche					16	90.55%
_	tion D. Computation of Investmen					10	70
	Investment income percentage for 2010 (li			3 column (ft)		17	3.03%
17	Investment income percentage from 2009					18	3.25%
18	331/3% support tests - 2010. If the or						
ıJä	17 is not more than 331/3%, check the						
	331/3% support tests - 2009. If the orga	•	_		-		
O	line 18 is not more than 331/3%, check						
20	Private foundation. If the organization						. F L
20	i iii aa iounuuuon ii iiio oiganizanon	ara not oneok	a por on imp	., ., .,	, 3 1113 00		

Schedule A (Form 990 or 990-EZ) 2010

Page 4

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

INTERNATIONAL TRUMPET GUILD 54-1030357 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 2 Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other Conservation Easements. Complete if the organization answered "Yes" to Form 990. Part IV. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year 2b Number of conservation easements on a certified historic structure included in (a) 2¢ Number of conservation easements included in (c) acquired after 8/17/06, and not on a Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ _____ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) (i) and 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2010

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply): a Public exhibition b Scholarly research c Other C Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to rease funds rather than to be maintained as part of the organization's collection?	Par	t III Organizations Maintaini	ng Collections	of Art, Historic	al Treasures	or Oth	ner Similar <i>A</i>	Assets (d	continued)
a Public exhibition	3			d other records	, check any of	the fol	lowing that a	ıre a sigi	nificant use of its
b Scholarly research c Other Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XV 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assests to be sold to raise funds rather than to be maintained as part of the organization soliciton?			ıy).	. —					
c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to rase funds rather than to be maintained as part of the organization sollection?				- H			_		
A Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV 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?	b			e	Other				
XIV Source 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?	С								
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 answered "Yes" to Form 990, Part IV. Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV. Init 9, or reported an amount on Form 990, Part X, line 21 1a	4	Provide a description of the organ	nization's collecti	ons and explain	how they furt	her the	organization'	s exemp	t purpose in Part
assets to be sold to raise funds rather than to be maintained as part of the organization answered "Yes" to 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? 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? 1b If "Yes," explain the arrangement in Part XIV and complete the following table 1c Beginning balance 1c Beginning balance 1d Additions during the year 1d Beginning balance 1f Ending balance 1g Did the organization include an amount on Form 990, Part X, line 21? 1g Did the organization include an amount on Form 990, Part X, line 21? 1g Did the organization include an amount on Form 990, Part X, line 21? 1g Did the organization include an amount on Form 990, Part X, line 21? 1g Did the organization include an amount on Form 990, Part X, line 21? 2 Did the organization include an amount on Form 990, Part X, line 21? 2 Did the organization include an amount on Form 990, Part X, line 21? 2 Did the organization include an amount on Form 990, Part X, line 21? 2 Did the organization include an amount on Form 990, Part X, line 21? 2 Did the organization the arrangement in Part XIV. 2 Did the organization the arrangement in Part XIV. 2 Did the organization set of the organization answered "Yes" to Form 990, Part IV, line 10. 2 Provide the estimated percentage of the year end balance held as: 2 Did the organization set of the organization that are held and administered for the organization by. 3 Did the organization set of the or		XIV							
Inine 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?	5							_	Yes No
included on Form 990, Part X?	Par					answei	red "Yes" to	Form 99	00, Part IV,
included on Form 990, Part X?	4.	In the consequent to the form		· · · · · · · · · · · · · · · · · · ·	. 6		ub 4		
b If "Yes," explain the arrangement in Part XIV and complete the following table c Beginning balance	та								—, <u> </u>
c Beginning balance						• • • •		[Yes No
to Beginning balance d Additions during the year 1 d d	b	If "Yes," explain the arrangement in	Part XIV and co	mplete the follow	ring table				
d Additions during the year . 1					_		A	mount	
e Distributions during the year					_				
F. Ending balance 2a		- ·			<u> </u>	-			<u>, </u>
2a Did the organization include an amount on Form 990, Part X, line 217 Yes No									
b If "Yes," explain the arrangement in Part XIV. Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance (a) Current year (b) Pnor year (c) Two years back (d) Three years back (e) Four years have years hav		_			_				
Part V		-		0, Part X, line 21	[?]			[Yes No
(a) Current year (b) Pnor year (c) Two years back (d) Three years back (e) Four years back									
1a Beginning of year balance	Par	t V Endowment Funds. Con	nplete if organi	zation answere	d "Yes" to For	m 990	, Part IV, line	10.	•
b Contributions			(a) Current year	(b) Pnor year	(c) Two yea	rs back	(d) Three yea	ars back	(e) Four years back
c Net investment earnings, gains, and losses			178,139.	187,90	6. 16	7,336.			,
and losses	b	Contributions	41,935.	20,70	5. 4	4,720.			
d Grants or scholarships	C	Net investment earnings, gains,							
e Other expenditures for facilities and programs		and losses	1,141.	4,11	з.	3,975.		,	
and programs 6,322. 34,585. 12,725. f Administrative expenses g End of year balance 214,893. 178,139. 187,906. 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment ▶% b Permanent endowment ▶% C Term endowment ▶% 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 3a(ii) X (iii) related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of investment (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation 1a Land b Buildings c Leasehold improvements d Equipment c Leasehold improvements d Equipment e Other 7,744 4,466 3,278.	d	Grants or scholarships			1	5,400.			
f Administrative expenses	е	Other expenditures for facilities .							
f Administrative expenses		and programs	6,322.	34,58	5. 1	2,725.			·
g End of year balance.	f		7,7=31	1		_,	<u> </u>		
2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment ▶		-	214.893.	178.13	9. 18	7.906.	 		
a Board designated or quasi-endowment ▶		*				.,	1		
b Permanent endowment ▶ % c Term endowment ▶ % 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by. (i) unrelated organizations . 3a(i) X (ii) related organizations . 3a(ii) X b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? . 3b									
c Term endowment ▶ % 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by. (i) unrelated organizations .									
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. (ii) related organizations. (iii) related organizations. (ii) related organizations. (ii) related organizations. (iii) related organizations. (iii) related organizations. (iv) ves" to 3a(ii), are the related organizations listed as required on Schedule R? (iv) vescribe in Part XIV the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of investment (a) Cost or other basis (other) (other) (other) (c) Accumulated depreciation (d) Book value (d) Book value c Leasehold improvements. c Leasehold improvements. d Equipment 7,744 4,466 3,278. e Other									
organization by. (i) unrelated organizations			• ' -	of the organization	n that are held	and ad	lministered for	the	
(i) unrelated organizations	- u		the possession t	or the organization	in that are new	and ad	iiiiiiisterea ioi	ti ic	Ves No
(ii) related organizations		•							
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?									
4 Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of investment (a) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (other) (other) (other) (d) Book value (d) Book value (d) Book value (other) (other) (other) (other) (d) Book value (d) Book value (d) Book value (d) Book value (other) (other) (other) (other) (other) (d) Book value	h								
Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of investment (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (d) Book value (a) Equipment (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (d) Accumulated depreciation (d) Book value (d) Book value (d) Accumulated depreciation (d) Book value (d) Book value (d) Accumulated depreciation (d) Book value	_			·					30
Description of investment (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (d) Accumulated depreciation (d) Book value (d) Book value (d) Accumulated depreciation (d) Book value (d) Book value (d) Book value (d) Accumulated depreciation (d) Accumulated depreciation (d) Book value (d) Book value									
Ia Land	Par					Т			
b Buildings		·	(11						d) Book value
c Leasehold improvements	1a				··				
d Equipment		_							
e Other	C								
					7,74	4	4,466	•	3,278.
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) ▶ 3,278.									
	Tota	I. Add lines 1a through 1e (Column	(d) must equal F	orm 990, Part X,	column (B), line	10(c))	▶		3,278.

Part VII	Investments - Other Securities. See Fe	orm 990, Part X, lin	e 12.	1 290 0
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valua Cost or end-of-year man	
(1) Financia	al derivatives			
	-held equity interests			
(3) Other				
/A\		·		
(<u>B</u>)				
(C)				
<u>(D)</u>				
(E)				
(F)				
(G)				
<u>(H)</u>				
	n (b) must equal Form 990, Part X, col (B) line 12)			
Part VIII	n (b) must equal Form 990, Part X, col. (B) line 12) Investments - Program Related. See F	orm 990 Part Y lin		22 72 × 32 × 43
r art viii	(a) Description of investment type	(b) Book value	(c) Method of value	ation:
	(a) Description of investment type	(b) Book value	Cost or end-of-year man	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(8)				
(9)				
(10)				
	n (b) must equal Form 990, Part X, col (B) line 13)			20, 20
Part IX	Other Assets. See Form 990, Part X, li	ne 15	V 1	
		Description		(b) Book value
(1) OTH	HER RECEIVABLES	•		2,043.
	PAID EXPENSES			NONE
(3) UNI	DEPOSITED FUNDS			25.
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				0.000
Part X	Other Liabilities. See Form 990, Part X	line 25		2,068.
1.	(a) Description of liability	(b) Amount		
	al income taxes	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
(2) PREP.	AID DUES	87,1	145.	ļ
(3) ACCR	UED PAYROLL TAXES	3	338.	
(4) PREP.	AID ADVERTISING REVENUE		0.	
(5)				
(6)				1
(7)				Ì
(8)				
(9)				
(10)				
(11)				ļ
Total. (Colum	nn (b) must equal Form 990, Part X, col (B) line 25)	▶ 87,9	983.	

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740)

JSA 0E1270 1 000

INTERNATIONAL JAZZ TRUMPET COMPETITION AND THE ELLSWORTH SMITH

INTERNATIONAL TRUMPET SOLO COMPETITION.

Part XIV Supplemental Information (continued)

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization				Employer identifica	ition number
INTERNATIONAL TRUMPET GU	ILD			54-103035	7
General Information Form 990, Part IV, line 1		Outside the U	nited States. Complete	if the organization answer	ered "Yes" to
1 For grantmakers. Does the or	ganization mai	ntain records t	o substantiate the amoi	unt of the grants or	
assistance, the grantees' eligibil					
grants or assistance?				l	YesNo
2 For grantmakers. Describe in P United States	art V the orga	nization's proce	dures for monitoring the	use of grant funds outside	de the
3 Activities per Region (The follow	ving Part I, line	3 table can be	duplicated if additional sp	pace is needed)	
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1)					
(2)					
(3)					
(4)					
(5)					-
(6)					
(7)					
(8)			· · · · · · · · · · · · · · · · · · ·		
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Sub-total					
sheets to Part I					

c _ Totals (add lines 3a and 3b) For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F (Form 990) 2010

54-1030357

Schedule F (Form 990) 2010	54-1030357	Pa
Part Gra	Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990,	ر
Part Part	Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 ▶	A
Part	Part II can be duplicated if additional space is needed.	

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(l) Method of valuation (book, FMV, appraisal, other)
(1)		EAST ASIA/PACIFIC	GRANT FOR TR	7,359.	WIRE TRSF.	0.	NONE	
(2)								
(3)								
(4)								
(5)								
(9)								
(14)								
					:			

4370RH01

Schedule F (Form 990) 2010

V 10-8.2

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Page 3

54-1030357

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. Schedule F (Form 990) 2010

Part III

Schedule F (Form 990) 2010 (h) Method of valuation (book, FMV, appraisal, other) (g) Description of non-cash assistance (f) Amount of non-cash assistance (e) Manner of cash disbursement (d) Amount of cash grant (c) Number of recipients (b) Region (a) Type of grant or assistance <u>e</u> 4 9 9 (11) (14) (16) 3 (2) 5 **®** 6 (10) (12)(13) (15) (17) (18)

V 10-8.2

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Page	4

Part	IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of US Persons with respect to Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)	Yes	X No

Schedule F (Form 990) 2010

Page 5

Schedule F (Form 990) 2010

54-1030357

Part V Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions)

Schedule F (Form 990) 2010

SCHEDULE (Form 990) Department of the Treasury

Name of the organization

Part | General Information on Grants and Assistance

Part II

E

[2]

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(5)

(9)

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5

6

5

(12)

INTERNATIONAL TRUMPET GUILD

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

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

UMB NO 1545-0047	2010
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Open to Public Inspection

Employer identification number 54-1030357 °N |

(h) Purpose of grant or assistance Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part X Yes Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) (d) Amount of cash grant (e) Amount of non-cash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (c) IRC section if applicable the selection criteria used to award the grants or assistance? Il can be duplicated if additional space is needed (p) EIN (a) Name and address of organization or government

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations

Enter total number of section 501(c)(3) and government organizations

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Schedule I (Form 990) (2010)

Page 2

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orm 990) (2010)

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Schedule I (Form 990) (2010)

Part III Grants and

	(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 CONFE	1 CONFERENCE SCHOLARSHIP AWARDS	26.		984.		
2 CONFEE	2 CONFERENCE COMPETITION AWARDS	27.	12,850.			
3 CONFER	3 CONFERENCE SCHOLARSHIP AWARDS	36.	8,400.			
4						
22						
9						
7						
Part IV	Supplemental Information. Complete this par	s part to prov	vide the informat	tion required in	Part I, line 2, and any	t to provide the information required in Part I, line 2, and any other additional information.

PART I, LINE 2

AN AFFILIATED CHAPTER COORDINATOR HAS BEEN APPOINTED TO MONITOR

CHAPTER/AFFILIATE ACTIVITIES TO ENSURE CONSISTENCY WITHIN THE

ORGANIZATION.

4370RH01

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service

INTERNATIONAL TRUMPET GUILD

Employer identification number 54-1030357

PAGE 6

PART IV, SECTION A, 6

ANY PERSON MAY BECOME A MEMBER OF THE GUILD UPON PAYMENT OF THE PRESCRIBED ANNUAL DUES. REGULAR MEMBERS WHOSE DUES ARE PAID SHALL HAVE THE PRIVELEDGES OF PARTICIPATING IN THE ACTIVITIES OF THE GUILD, INCLUDING THE RIGHTS OF VOTING, HOLDING OFFICE, AND ADMISSION TO GENERAL MEETING.

PAGE 6

PART VI, SECTION A, LINE 7

LINE 7A:

MEMBERS HAVE THE PRIVILEDGE OF PARTICIPATING IN ACTIVITIES OF THE GUILD, INCLUDING THE RIGHT OF VOTING AND HOLDING A POSITION OF OFFICE.

LINE 7B:

AMENDMENTS TO THE CONSTITUTION MAY BE MADE BY A TWO-THIRDS VOTE OF A QUORUM OF THE MEMBERSHIP.

PAGE 6

PART VI, SECTION A, LINE 8B

COMMITTES MOSTLY ACT AS ADVISERS TO THE BOARD AND SUBMIT REPORTS THAT ARE RECORDED WITH THE MINUTES OF THE BOARD AND OFFICERS' MEETING. THE SCHOLARSHIP COMMITTEE DOES AWARD SCHOLARSHIPS AS DIRECTED BY THE RULES.

NUMBER OF SCHOLARSHIPS AWARDED IS REPORTED TO THE BOARD.

Name of the organization
INTERNATIONAL TRUMPET GUILD

Employer identification number 54-1030357

PAGE 6

PART VI, SECTION A, LINE 10B

ITG AFFILIATE CHAPTERS HAVE NOT BEEN MONITORED IN PAST YEARS. LAST YEAR,

A NEW AFFILIATE CHAPTER COORDINATOR HAS BEEN APPOINTED TO START MONITORING

CHAPTER / AFFILIATE ACTIBITIES TO ENSURE A CONSISTENCY WITHIN THE

ORGANIZATION.

PAGE 6

PART VI, SECTION B, LINE 11A

A COPY OF THE 990 WILL BE REVIEWED BY THE TREASURER AND THE PRESIDENT BEFORE IT IS SIGNED AND FILED.

PAGE 6

PART VI, SECTION C, LINE 19

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST. THE ORGANIZATION DOES NOT HAVE A CONFLICT OF INTEREST POLICY.

PAGE 10

PART IX, LINE 24F

EXPENSE	TOTAL	PRGM SERVICE	MGMT/GENL
BANK FEES	112	112	
CREDIT CARD FEES	1,979	1,979	-
PAYPAL FEES	3,143	3,143	
COMISSIONS	3,000	3,000	

Schedide	O (Form	990 or 990)-F7) 2010.

Page 2

Name of the organization INTERNATIONAL TRUMPET	Employer identification numb	ier		
JOURNAL PRODUCTION	3,217	3,217		
STOARAGE - JOURNALS	3,372		3,372	
MISCELLANEOUS	147		147	
TAXES	3,856		3,856	
WEBSITE MAINT.	4,125	4,125		
LOSS ON DISPOSAL	397		397	
	23,348	15,576	7,772	

FORM 990, PART III, LINE 4D - OTHER PROGRAM S	SERVICES		
DESCRIPTION	GRANTS	EXPENSES	REVENUE
CONFERENCE	0.	568.	0.
CHAPTER GRANTS	3,000.	3,000.	0.
COMMISSIONS	0.	3,000.	0.
HONORARY & MERIT AWARDS	0.	7,359.	0.
GRANTS OUTSIDE THE U.S.	7,359.	7,359.	0.
E. SMITH COMPETION	0.	1,745.	
CARMINE CARUSO INTERNATIONAL JAZZ COMPETITIO	0.	1,576.	3,704.
MEMBERSHIP DUES	0.	0.	219,835.
INVESTMENT INCOME	0.	0.	4,997.
TOTALS	10,359.	24,607.	228,536.

ATTACHMENT 1

Schedule () (Form 990 or 990-EZ) 2010				Page 2
Name of the organization			Employer identification r	number
INTERNATIONAL TRUMPET GUILD			54-1030357	
			ATTACHMENT 2	
FORM 990, PART VIII - INVESTMENT INCOM	<u>E</u>			
	(A)	(B)	(C)	(D)
	TOTAL	RELATED OR	UNRELATED	EXCLUDED
DESCRIPTION	REVENUE	EXEMPT REVENUE	BUSINESS REV.	REVENUE
INTEREST INCOME	4,99	7. 4,997.		
TOTALS —	4,99	7. 4,997.		

(Rev January 2011)

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury

OMB No. 1545-1709

Internal Revenu	ue Service	► File a	separate a	pplication for each return.		
				only Part I and check this box		▶ X
 If you are 	e filing for ar	n Additional (Not Automatic) 3-Mo	onth Exter	nsion, complete only Part II (on pag	e 2 of this form)	
Do not com	plete Part II (unless you have already been gra	nted an au	itomatic 3-month extension on a pre	viously filed Form 8868	3.
				ou need a 3-month automatic exten		
				tomatic) 3-month extension of time		
				ed in Part I or Part II with the exce		
				Contracts, which must be sent to sit www.irs gov/efile and click on e-i		
		-Month Extension of Time. On				
A corporation	on required	to file Form 990-T and requesting	an autom	atic 6-month extension - check this	box and complete	
•	•				· ·	▶□
All other co	rporations ((including 1120-C filers), partnersh	ıps, REMIC	Cs, and trusts must use Form 7004 to	request an extension (of time
to file incon	ne tax return	s				
Type or	Name of ex	xempt organization			Employer identification number	
print	INTERN	ATIONAL TRUMPET GUILD			54-1030357	
File by the	Number, s	treet, and room or suite no. If a PO. bo.	x, see ınstru	ctions		
due date for		OX 2688				
filing your return See	1 '	or post office, state, and ZIP code. For	a foreign ac	ddress, see instructions.		
Instructions	DAVENE	ORT, IA 52809-2688				
Enter the R	leturn code	for the return that this application	is for (file	a separate application for each returr)	0 1
A	·		D.t.	I A substitution		
Application	1		Return	Application		Return
ls For			Code	Is For		Code
Form 990			01	Form 990-T (corporation)		07
Form 990-B			02	Form 1041-A		
Form 990-E			03	Form 4720		09
	Form 990-PF		04	Form 5227 Form 6069		10
	Form 990-T (sec. 401(a) or 408(a) trust) Form 990-T (trust other than above)		05 06	Form 8870		11
1 01111 930-1	i (trust othe	i tilaii above)	00	Form 6676		12
• The book	ks are in the	care of DIXIE BURRESS				
1110 0001	NO GIO III GIO				-	
Telephor	ne No. 🕨	563 676-2435		FAX No. ►		
			— business ir	n the United States, check this box .		▶ □
		Return, enter the organization's for			. If th	is is
for the who	ile group, ch	neck this box	fit is for pa	art of the group, check this box	▶ and att	ach
a list with th	ne names ar	nd EINs of all members the extensi	on is for.			
1 I requ	est an autor	matic 3-month (6 months for a cor	poration re	equired to file Form 990-T) extension	n of time	
until_		02/15 , 20 12 , to file the	exempt or	ganization return for the organizatio	n named above. The e	xtension is
for the	e organizatio	on's return for:				
▶ calendar year 20 or						
► X	∫ tax year be	eginning 07/0	<u>01</u> , 20 <u>1</u>	0, and ending	<u>06/30</u> , 20 <u>11</u> .	
			onths, che	ck reason: Initial return	Final return	
	Change in a	ccounting period				
						
			90-T, 4720), or 6069, enter the tentative tax	- 1 1	
		edits. See instructions			3a \$	
				r 6069, enter any refundable cr	1 1	
	estimated tax payments made Include any prior year overpayment allowed as a credit. 3b \$ c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS					
				ient with this form, if required, by us	- 1 1	
(Electronic Federal Tax Payment System) See instructions. 3c \$ Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for						
	-	ang to make an electronic fund v	vitnorawai	i with this Form 8868, see Form 8	1403-EU and Form 88	3/9-EU for
payment ins		n Act Notice, see Instructions.			Ear. 9960	(Day 4.0044)
· or caherac	,, n. eu u cu0i	n met House, act Manuellona.			rum 0000	(Rev 1-2011)

JSA 0F8054 4 000

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