efile G	RAPHIC prin	nt - DO NOT PRO	CESS	As File	d Data -			DLN	: 9349309900421
۵	90	Return	of Orc	ganiza	tion E	xempt From	Income	Tax	OMB No 1545-0047
Form 9	JU		_	-		the Internal Rever			2017
% ₃		foundations)							2017
-	nt of the Treasury					on this form as it ma nstructions is at <u>www</u>			Open to Public
Internal Re	evenue Service								Inspection
A Fort			ear begin	nning 07-	01-2017	, and ending 06-30	-2018		
_	I applicable II	lame of organization NTERNATIONAL TRUMPE	T GUILD					D Employer id	lentification number
☐ Name								54-103035	7
☐ Initial	return	oing business as							
	turn/terminated ded return N	umber and street (or P	O box if m	naıl ıs not de	livered to st	reet address) Room/sui	te	E Telephone nu	mber
☐ Applica	ation pending P	O BOX 2688						(563) 676-2	2435
		ity or town, state or pro AVENPORT, IA 528092		ntry, and ZI	P or foreign	postal code			
	<u> </u>	Name and address of	of principa	al officer		ı	117 N - 1	G Gross receipt	s \$ 694,945
ı	 _	Wrange and district	2 / / / / / / / / / / / / / / / / / / /			·			•
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Secti	on B. Total S Calendar				41.55-				
-	fiscal year be	ginning in) 🟲	(a)20	013	(b) 2014	(c)2015	(d)201	6 (e) 2	017 (f) Total
	nounts from line oss income from						+		
dıv	ıdends, paymen	ts received on							
	curities loans, re come from simila	ents, royalties and ar sources							
9 Net	t income from u	nrelated business							
	tivities, whether siness is regular								
10 Oth	her income Do i	not include gain or							
(Ex	xplaın ın Part VI								
11 To		ld lines 7 through							
		related activities, e	c (see in	structions)			12	
						d, thırd, fourth, or fıf			
che	ck this box and	stop here	<u></u>	<u></u>	<u></u>				▶□
		tation of Public				11		 	
		entage for 2017 (line				11, column (†))		14	

Form	990 (2	2017)						Page 2
Pai	t III	Stateme	ent of Program Service	e Accomplis	hments			
		Check if S	Schedule O contains a respoi	nse or note to	any line in thi	s Part III		🗹
1	Briefly	y describe t	he organization's mission		•			
			CATIONAL ORGANIZATION'					
THE	WORLD	AND TO IM	1PROVE THE ARTISTIC LEVE	L OF PERFORM	IANCE, TEACH	IING, AND LITERAT	TURE ASSOCIATED WITH 1	THE TRUMPET
	Did th	ne organizat	tion undertake any significar	nt program ser	vices durina t	he vear which were	not listed on	
_		_	90 or 990-EZ?		rices during a	ne year willen wer	- Hot hoted on	☐ Yes ☑ No
			these new services on Sch					res no
3		•	tion cease conducting, or ma		changes in ho	w it conducts, any	program	
_		es?	ion couse conducting, or me	ance organization	changes in he	Triconaucto, any	program	☐ Yes ☑ No
			these changes on Schedule					
4		•	-		- -	5 .t. thus.		unad his airmanaa
7			anızatıon's program service) and 501(c)(4) organizatıor					
			venue, if any, for each prog			g. g		
	/C) (Expenses \$	277 742	ıncludıng grar		0) (Revenue \$	6,011)
4a -	(Code	.) (Expenses \$	2//,/12	including gran	its or \$	U) (Revenue \$	6,011)
· - – –								
_								
				Softwar	e Version:			
					EIN:	54-1030357		
					Name:	INTERNATION	AL TRUMPET GUILD	
Sche	dule A i	(Form 990 c	or 990-EZ) 2017					Page 8
	rt VI		ental Information. Provide	e the evolanati	ons required l	ov Part II. line 10	Part II line 17a or 17h P	
·	ILAT		, lines 1, 2, 3b, 3c, 4b, 4c, 5					
			ection D, lines 2 and 3, Part					
		instruction D	, lines 5, 6, and 8, and Part ns)	v, Section E, I	mes 2, 5, and	o Also complete i	inis part for any additional	miormation (See

Form	990 (2017)			Page 3
Pai	Tt 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)? If "Yes," complete Schedule A 🕏	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? ullet	2	Yes	
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		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues	I		
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i.	· · · · · · · · · · · · · · · · · · ·			
	-			
	tax year ▶			4
4	Number of states where property subject to conservation easement is located ▶			
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?] Yes		lo
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easeme			
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements d	urıng th	e year	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section $170(h)(4)(B)(i)$ and section $170(h)(4)(B)(ii)$?] Yes	□ N	lo
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describe the organization's accounting for conservation easements			
Par	Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Asset Complete if the organization answered "Yes" on Form 990, Part IV, line 8.	ts.		
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public provide, in Part XIII, the text of the footnote to its financial statements that describes these items			f
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sh	eet wor	ks of art	·,

5713, do not file with Form 990)

V No

orm	990 (2017)			Page !
Par	t 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 \ldots			
	5		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 34 Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 00	1 1		
		-		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
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	4 1	V	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
ь	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
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)?	4a		No
b	If "Yes," enter the name of the foreign country			
F-	Weekle consumer to a contract of the consumer to the consumer	F-		Na
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
D	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	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?	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file			
	Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
	required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	 7h		
8	Sponsoring organizations maintaining donor advised funds.	 		
•	Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
٥-	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter	-		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	1		
	Section 501(c)(12) organizations. Enter	-		
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources	-		
	against amounts due or received from them)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	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	13a		
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			
	Enter the amount of reserves on hand			
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

orm	990 (2017)			Page 6
Par	Governance, Management, and DisclosureFor each "Yes" response to lines 2 through 7b below, and for a "No" 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	·	nse to li	nes 🗸
Se	Check if Schedule O contains a response or note to any line in this Part VI	<u> </u>		
_		\longrightarrow	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 21			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 18			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
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		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b		No
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		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code	P.)	_
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a	Yes	
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		No
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		No
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		No
14	Did the organization have a written document retention and destruction policy?	14		No
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		No
b	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure	100		
17	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)			
19	Describe in 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 DIXIE BURRESS 4112 WEST KIMBERLY ROAD DAVENPORT, IA 52806 (563) 676-2435			. /

Part VII

(16) MARC REESE

(17) JASON BERGMAN

DIRECTOR

DIRECTOR

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 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, or highest compensated employees who received more than \$100,000
- of reportable compensation from the organization and any related organizations • List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the
- organization, more than \$10,000 of reportable compensation from the organization and any related organizations List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest
- compensated employees, and former such persons

Check this box if neither the organization no	r any related o	ganızat	ion c	omp	ens	ated a	any o	current officer, dire	ctor, or trustee	
(A) Name and Title	(B) Average hours per week (list any hours	pers	an on on is	e bo bot	t che ox, u h an or/tr	eck m nless office ustee	er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
(1) MICHAEL ANDERSON DIRECTOR	15 00	x						9,900	0	0
(2) JOSEPH BOWMAN DIRECTOR	0 00	х						0	0	0
(3) GRANT PETERS VICE PRESIDENT	15 00	х		×				0	0	0
(4) BRIAN EVANS PAST PRESIDENT/DIRECTOR	20 00	х		х				0	0	0
(5) DIXIE BURRESS TREASURER	30 00	x		×				36,023	0	0
(6) TINA ERICKSON DIRECTOR	0 00	х						0	0	0
(7) VLADISLAV LAVRIK DIRECTOR	0 00	х						0	0	0
(8) PETER WOOD DIRECTOR	15 00	×						27,000	0	0
(9) KEVIN EISENSMITH SECRETARY	5 00	x		×				0	0	0
(10) CATHY LEACH PRESIDENT	20 00	х		×				0	0	0
(11) ANDREA TOFANELLI DIRECTOR	0 00	х						0	0	0
(12) ZHONGHUI DAI DIRECTOR	0 00	×						0	0	0
(13) THAD SILVA FILHO DIRECTOR	0 00	×						0	0	0
(14) RYAN GARDNER DIRECTOR	0 00	х						0	0	0
(15) KELLY PARKES	0 00	×						0	0	0

0 00

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Х

0

0

0

0

(A)

Name and Title

compensation from the organization ▶ 0

(B)

Average

Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (F) Estimated

(E)

Reportable

(D)

Reportable

Page 8

		hours per week (list any hours			n of	ficer	and a		compensation from the organization (W-	from related organizations		compen from	sation the
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)		organizat relat organiza	ed
18)	ANDRE BONNICI	0 00	x						0		0		
10)	CIOR COLUED		••••								+		
		0 00	x						0		0		
אוני	DAQUEL BODDIQUEZ			<u> </u>							+		
		0 00	×						0		0		
)IK =	CTOR CHASE SANBORN			-	-			<u> </u>			+		
		0 00	×						0		0		
DIRE	CTOR		••••	<u> </u>							+		
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41-	Code Tatal						<u> </u>			ı	丄		
	Sub-Total				•		` -				—		
_		· · · · ·				,			72,923	0			
2	Total number of individuals (including bu of reportable compensation from the orga	t not limited to			abov	/e) v	vho re	ceıv	<u>'</u>	000			
												Yes	No
3	Did the organization list any former office									nployee on		\Box	
	line 1a? If "Yes," complete Schedule J for	such individual			•						3		No
4	For any individual listed on line 1a, is the organization and related organizations grandvidual										_		
			•	• •	•	•	•			_	4	\longmapsto	No
5	Did any person listed on line 1a receive of services rendered to the organization? If	or accrue compe "Yes," complete	nsation Schedu	from le J i	any for s	y un <i>uch</i>	related persor	d org	ganization or individ	ual for	5		No
S	ection B. Independent Contractors	6											
1	Complete this table for your five highest	•	•						· ·	· ·	ens	ation	
	from the organization Report compensat	(A)	idar ye	ar en	aing	wit	n or w	itnir	i the organization's	(B)	一	(C	١
	Name and I	business address							Descript	ion of services	\perp	Compen	
											丰		
											+		
											+		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

(C)

Position (do not check more

		(2017)										Page 9
Part \	V +											
		Check if Schedul	le O contains i	a respo	onse or no	ote to any	(this Part VIII (A) revenue	R:	(B) elated or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
တ္က	1 a	Federated campaig	ns	1a								
ant	ŀ	b Membership dues		1 b								
Gra		c Fundraising events		1c								
ts. r A		d Related organizatio	ns	1d								
ila Ila		e Government grants (c	ontributions)	1e								
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions and similar amounts n above	, gifts, grants, ot included	1f		41,946						
ontribu		· 		2,26								
G an	h	Total.Add lines 1a-1	lf			<u> </u>		41,946				
<u> </u>					L	Business	Code					
Ve n	2a	CONFERENCE INCOME			-		711130		56,519	<u> </u>		
츕	b	MEMBERSHIP DUES					711130		06,478	<u> </u>		
ا <u>د</u>		ADVERTISING SALES					511120		69,966		69,9	166
₹		CD & JOURNAL SALES					711130 711130		2,494	<u> </u>	494 083	+
Ē		BOOK & OTHER SALES					,11130		1,559	<u> </u>	559	+
Program Service Revenue	f	All other program se	rvice revenue		L		30 000		_,,555	<u>ı </u>	-1	
ďξ	g.	Total.Add lines 2a-2i	f		>	6.	39,099					
		Investment income (i			ınterest, a	and other		12,40	6			12,406
		•				.a.dab.		12,40	"			12,400
		Income from investm Royalties	ent of tax-exe		ona proce	eds 🕨			+			
	٠,	Royaldes I I I	(ı) Rea		(II) Pe	ersonal			+			
	6a	Gross rents	(1) 1.122		(,		1					
	b	Less rental expenses					_					
	c	Rental income or (loss)					-					
	d	Net rental income o	r (loss)			>]					
			(ı) Securit	ies	(11)	Other						
	7a	Gross amount from sales of		30								
		assets other than inventory										
	b	Less cost or other basis and		0			1					
	_	sales expenses		30			-					
		Gain or (loss) Net gain or (loss)					1	30	٥			30
		Gross income from f		ents		<u> </u>						
Other Revenue			ed on line 1c)	of								
ě	j.	Less direct expense		a b			+					
<u>-</u>		: Net income or (loss)			L ents .		_					
the		Gross income from g										
0		See Part IV, line 19			ļ							
				a			-					
		Less direct expense Net income or (loss)		b								
ŀ		Gross sales of invent		activit		<u> </u>	1					
'		returns and allowand		a	 							
	b	Less cost of goods s	sold	b								
	С	Net income or (loss)		ınvent								
		Miscellaneous	Revenue		Busine	ss Code						
	11	a MISCELLANEOUS				711130		1,43	4	1,434		
	b	FINANCE CHARGES	& NFS			511120		30	0		30	
	c											
		All other revenue										
	е	Total. Add lines 11a	-11d			•		1,46	4			
	12	Total revenue. See	Instructions			. •		694,94	5	570,567	69,996	12,436
								1,5 11	-	2. 5,557	05,550	Form 990 (2017)

art IX Statement of Functional Expenses

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all co	lumns All other orga	anizations must comm	olete column (A)	
Check if Schedule O contains a response or note to any	-	•	· · · · ·	🗆
Do not include amounts reported on lines 6b, b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	4,500	4,500	-	
2 Grants and other assistance to domestic individuals See Part IV, line 22	23,556	23,556		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16	6,950	6,950		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	74,490	74,490		
6 Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7 Other salaries and wages	109,488	109,488		
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	12,988	12,988		
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services See Part IV, line 17				
-				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	3,981		3,981	
.2 Advertising and promotion				
.3 Office expenses	812	812		
.4 Information technology	1,545	1,545		
5 Royalties				
. 6 Occupancy				
. 7 Travel	24,315	3,666	20,649	
L8 Payments of travel or entertainment expenses for any federal, state, or local public officials	· ·		<u> </u>	
L9 Conferences, conventions, and meetings				
O Interest				
21 Payments to affiliates				
· · · · · · · · · · · · · · · · · · ·	791		791	
22 Depreciation, depletion, and amortization				
23 Insurance	2,461		2,461	
a CONFERENCE EXPENSES	260,158	260,158		
b PRINTING & PUBLICATION	41,875	41,875		
c COMPETITION EXPENSE	32,463	32,463		
d POSTAGE & HANDLING	29,064	29,064		
e All other expenses	28,754	17,715	11,039	
75 Total functional expenses. Add lines 1 through 24e	658,191	619,270	38,921	
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	, :-	, , , ,	,,	

2

3

Assets

21

Liabilities 22

Fund Balances

Assets or 30

Net

27

28

29

31

32

33

34

273.013

8,435

1,649 447.423

1.506

732,026

80,180

67.895

148,075

0

583,951

583,951

732.026

Form **990** (2017)

(B)

End of year

1

2 3

5

6

8 9

10c

11 12

13

14

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18

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20

21

22 23

24

25

26

27

28

29

30 0

31

32

33

34

648.637

457 4

2.440

2.273

2.347

104.263

106,610

547,197

547,197

653.807

653.807

(A)

Beginning of year

3,955

2.306

Page **11**

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

_	1	

Cash-non-interest-bearing . Savings and temporary cash investments . .

Pledges and grants receivable, net . . Accounts receivable, net . Loans and other receivables from current and former officers, directors,

trustees, key employees, and highest compensated employees Complete Part

II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L . . . Notes and loans receivable, net . Inventories for sale or use .

Prepaid expenses and deferred charges .

10a Land, buildings, and equipment cost or other 10a basis Complete Part VI of Schedule D

Less accumulated depreciation 10b

Investments—publicly traded securities . Investments—other securities See Part IV, line 11 .

11 Investments—program-related See Part IV, line 11 Intangible assets Other assets See Part IV, line 11 .

12 13 14 15 16

Total assets.Add lines 1 through 15 (must equal line 34) . . . Accounts payable and accrued expenses Grants payable . . .

17 18 19 Deferred revenue . . . 20

Tax-exempt bond liabilities Escrow or custodial account liability Complete Part IV of Schedule D Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L .

Secured mortgages and notes payable to unrelated third parties . . . Unsecured notes and loans payable to unrelated third parties .

23 24 Other liabilities (including federal income tax, payables to related third parties, 25

and other liabilities not included on lines 17-24) Complete Part X of Schedule D

26 Total liabilities. Add lines 17 through 25 .

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances .

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 30 through 34.

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Organizations that follow SFAS 117 (ASC 958), check here lacktriangle and

Unrestricted net assets

☐ Both consolidated and separate basis

2c

3a

3b

No

Form 990 (2017)

Separate basis

Audit Act and OMB Circular A-133?

Consolidated 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?

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

If the organization changed either its oversight process or selection process during the tax year, explain in 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 Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

Additional Data

Software Version:

EIN: 54-1030357

Name: INTERNATIONAL TRUMPET GUILD

Form 990 (2017)

PROVIDES THESE SERVICES TO AS MANY AS FOUR THOUSAND THREE HUNDRED INDIVIDUALS AND INSTITUTIONS

ADDITIONALLY, THE ORGANIZATION PRODUCES AUDIO CDS, DVDS AND SHEET MUSIC IN THE ACHIEVEMENT OF THEIR EXEMPT PURPOSE THE ORGANIZATION ANNUALLY

Form 990, Part III, Line 4a: THE ORGANIZATION PUBLISHES A JOURNAL CONTAINING EDUCATIONAL, SCIENTIFIC, HISTORICAL AND OTHER MATERIAL APPROPRIATE TO THE TRUMPET

Software ID:

Form 990, Part III, Line 4b: CONFERENCE

Form 990, Part III, Line 4c: COMPETITION AWARDS AND CONFERENCE SCHOLARSHIPS INCLUDED WERE FOURTEEN AWARDS FOR COMPETITIONS AND THIRTY \$250 SCHOLARSHIPS WERE AWARDED FOR MERIT

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions) 0) (Revenue \$ (Code (Expenses \$ 10.265 including grants of \$ INTERNATIONAL TRUMPET GUILD WEBSITE PROVIDES A GLOBAL LINK FOR ITG MEMBERS THE ITG WEBSITE COMPLIMENTS THE ITG JOURNAL AND PRINT PUBLICATION PROGRAMS WITH CONTENT THAT IS AVAILABLE ONLY ON THE SITE

(Code) (Expenses \$ 4,500 including grants of \$ 4,500) (Revenue \$ 0)

CHAPTER GRANTS

(Code) (Expenses \$ 3,666 including grants of \$ 0) (Revenue \$ 0)

(Code) (Expenses \$	32,463 including grants of \$	0) (Revenue \$	1,559)

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

CARMINE CARUSO INTERNATIONAL JAZZ COMPETITION

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code) (Expenses \$ 0 including grants of \$ 0 (Revenue \$ 206,478)

MEMBERSHIP DUES

em	e GR/	APHIC prii	<u> 1t - DO NO</u>	T PROCESS	As Filed Data -			DLN: 9:	3493099004219
SCI (For	H ED m 990	ULE A		Public (Charity Statu	ion 501(c)(3)	organization o	ort	2017
990I	EZ)				4947(a)(1) nonexe ▶ Attach to Form				2017
•		the Treasury	▶ Info	ormation abou	ıt Schedule A (Form				Open to Public Inspection
		he organiza NAL TRUMPET (Employer identific	ation number
								54-1030357	
	rt I				us (All organization : it is (For lines 1 thro			see instructions.	
1	// gariii2		•		sociation of churches	3 ,	,	(A\(i\	
_		·		•					
2					1)(A)(ii). (Attach Sch	•	• •		
3	Ш	·	·	•	vice organization desc			•	
4		name, city,	and state _		ed in conjunction with				
5		(b)(1)(A)	(iv). (Čomple	te Part II)	t of a college or unive				ped in section 170
6 -	Ш	•	·	-	governmental unit de				
7		section 17	'0(b)(1)(A)(vi). (Complete				init or from the genera	al public described in
8		A communi	ty trust descr	ibed in section	170(b)(1)(A)(vi)	(Complete Part I	Ι)		
9					escribed in 170(b)(1) ee instructions Enter				ege or university or a
10	✓	from activit	nes related to income and	its exempt fun unrelated busin	(1) more than 331/39 actions—subject to cer ess taxable income (le amplete Part III)	taın exceptions, a	and (2) no more	than 331/3% of its su	
11		An organiza	ation organize	ed and operated	d exclusively to test fo	r public safety S	ee section 509	(a)(4).	
12		more public	ly supported	organizations of	d exclusively for the be described in section 5 the type of supporting	i09(a)(1) or se d	ction 509(a)(2). See section 509(a	e purposes of one or)(3). Check the box
а		Type I. A so	supporting org n(s) the powe	ganızatıon oper	ated, supervised, or cappoint or elect a majo	ontrolled by its s	upported organi	zation(s), typically by	
b		Type II. A manageme	supporting o nt of the supp	rganization sup porting organiza	ervised or controlled i ation vested in the sar				
С		Type III f	unctionally i		and C. supporting organizatio ions) You must com				ted with, its
d		Type III n functionally	on-function integrated	ally integrate The organizatio	d. A supporting organi n generally must satis	ization operated fy a distribution i	ın connection wi requirement and	th its supported orgar	
e		Check this	box if the org	anızatıon receiv	rt IV, Sections A and ved a written determine	nation from the II		pe I, Type II, Type II	functionally
f	Enter			on-functionally organizations	integrated supporting	organization			
g				-	ipported organization(s)			
		Name of supp organization	orted	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the orgain your govern		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
						Yes	No		
Tota	I					1			

	Hedule A (101111 990 01 990-LZ) 2017						Page Z
	Support Schedule for C (b)(1)(A)(ix)	Organizations	Described in S	ections 170(b)(1)(A)(iv), 1	70(b)(1)(A)(v	i), and 170
	(Complete only if you che	cked the box o	on line 5, 7, 8, o	r 9 of Part I or i	f the organization	on failed to quali	fy under Part
	III. If the organization fa	ils to qualify un	der the tests lis	ted below, pleas	se complete Par	t III.)	•
	Section A. Public Support	• •		, 1	•	•	
	Calendar year	(a) 2012	(b) 2014	(a) 2015	(d) 2016	(a) 2017	(f) Total
	(or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not		1				
	ınclude any "unusual grant ")						
2	Tax revenues levied for the						
	organization's benefit and either paid		1				
	to or expended on its behalf						
3	The value of services or facilities		1				
	furnished by a governmental unit to						
	the organization without charge		-				
4	Total. Add lines 1 through 3						
5	The portion of total contributions by		1				
	each person (other than a		1				
	governmental unit or publicly						
	cupacitad arcenization) included on		<u>'</u>	1	'	1	

Part III

Support Schedule for Organizations Described in Section 509(a)(2)

(a) 2013

(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 (a) 2013 **(b)** 2014 (c) 2015 (d) 2016 (e) 2017 (f) Total (or fiscal year beginning in) ▶ Gifts, grants, contributions, and 33,383 40,503 79,192 41,766 41,946 236,790 membership fees received (Do not include any "unusual grants") 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in 242,880 528,373 500,934 533,477 570,567 2,376,231 any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 276,263 568,876 580,126 575,243 612,513 2,613,021 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 23,404 28,237 25,700 23,166 26,895 127,402 3 received from disqualified persons **b** Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 0 \$5,000 or 1% of the amount on line 13 for the year 28,237 25,700 c Add lines 7a and 7b 23,404 23,166 26,895 127,402 Public support. (Subtract line 7c 2,485,619 from line 6) Section B. Total Support

Calend	lar year	
(or fiscal year	heginning in) 🕨	

	(or fiscal year beginning in) 🚩 🔠	• •				1 ''	
9	Amounts from line 6	276,263	568,876	580,126	575,243	612,513	2,613,021
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,664	2,097	3,736	5,475	12,406	25,378
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b	1,664	2,097	3,736	5,475	12,406	25,378
11	Net income from unrelated business activities not included in 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.		*** ***				

(b) 2014

(c) 2015

(d) 2016

(e) 2017

(f) Total

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V) Section A. All Supporting Organizations

Yes

5b

5c

7

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2017

No

1	Are all of the organization's supported organizations listed by name in the organization's governing documents? 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	1	İ	
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)			
	in section 309(a)(1) or (2)	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)			
	below	3a	İ	
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the			
	determination	3b		

b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the	·	
	determination	3b	
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?	ation ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?	
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3с	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you		
	checked 12a or 12b ın Part I, answer (b) and (c) below	4a	
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported		

c	Did the organization ensure that all support to such organizations was used exclusively for section $170(c)(2)(B)$ purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use		
		3с	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you		
	checked 12a or 12b ın Part I, answer (b) and (c) below	4a	
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported		
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b	
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)? 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	4c	
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and		

			, ,	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	-	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported			
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support			
	501(c)(3) and 509(a)(1) or (2)? 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	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in 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)	5a		

6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing		
	organization's supported organizations? If "Yes," provide detail in Part VI.	6	
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a		
	substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)		

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

Substitutions only. Was the substitution the result of an event beyond the organization's control?

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

organization's organizing document?

10a

answer line 10b below

organization had an interest? If "Yes," provide detail in Part VI.

the organization had excess business holdings)

8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"		
	complete Part I of Schedule L (Form 990 or 990-EZ)	8	
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as		i

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defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"
provide detail in Part VI.
```

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

```
9a
Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting
```

	Composition Oversighting (continued)			
εl	TEIV Supporting Organizations (continued)		Yes	NI -
11	Has the organization accepted a gift or contribution from any of the following persons?		res	No
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c		
		110		
31	ection B. Type I Supporting Organizations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in 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 directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting	2		
	organization			
S	ection 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)? 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)	1		
<u> </u>	ection D. All Type III Supporting Organizations			
3	ection D. An 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?			
		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)			
		2		
3	By reason of the relationship described in (2), 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? If "Yes " describe in Part VI the role the organization's supported organizations played in this regard.			
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Schedule A (Form 990 or 990-EZ) 2017

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations 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 (A) Prior Year (B) Current Year Section A - Adjusted Net Income (optional)

Page 6

Schedule A (Form 990 or 990-F7) 2017

1 Net short-term capital gain 1 Recoveries of prior-year distributions 2 3 Other gross income (see instructions) 3 4 4 Add lines 1 through 3 Depreciation and depletion 5 5 Portion of operating expenses paid or incurred for production or collection of gross 6 income or for management, conservation, or maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions)

Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) 8 (A) Prior Year (B) Current Year Section B - Minimum Asset Amount (optional) Aggregate fair market value of all non-exempt-use assets (see instructions for short 1 tax year or assets held for part of year) a Average monthly value of securities 1a **b** Average monthly cash balances **1**b c Fair market value of other non-exempt-use assets 1c 1d d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI)

2 2 Acquisition indebtedness applicable to non-exempt use assets 3 Subtract line 2 from line 1d 3 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see 4 instructions) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 6 Multiply line 5 by 035 7 Recoveries of prior-year distributions 7 Minimum Asset Amount (add line 7 to line 6) 8 8

Section C - Distributable Amount **Current Year** Adjusted net income for prior year (from Section A, line 8, Column A) 1 2 Enter 85% of line 1 3 Minimum asset amount for prior year (from Section B, line 8, Column A) Enter greater of line 2 or line 3 4 5 Income tax imposed in prior year 6

2 4 5 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

details in Part VI) See instructions Distributable amount for 2017 from Section C, line 6 (ii) (iii)

10 Line 8 amount divided by Line 9 amount Section E - Distribution Allocations (see (i) Underdistributions Distributable instructions) **Excess Distributions** Pre-2017 Amount for 2017 1 Distributable amount for 2017 from Section C, line

2 Underdistributions, if any, for years prior to 2017

(reasonable cause required-- explain in Part VI)

See instructions		
3 Excess distributions carryover, if any, to 2017		
a		
b From 2013		
c From 2014		
d From 2015		
e From 2016		
f Total of lines 3a through e		
g Applied to underdistributions of prior years		
h Applied to 2017 distributable amount		
 Carryover from 2012 not applied (see instructions) 		
j Remainder Subtract lines 3g, 3h, and 3i from 3f		
4 Distributions for 2017 from Section D, line 7		
<u> \$ </u>		
Applied to underdistributions of prior years		

b Applied to 2017 distributable amount c Remainder Subtract lines 4a and 4b from 4

Schedule A (Form 990 or 990-EZ) (2017)

5 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI

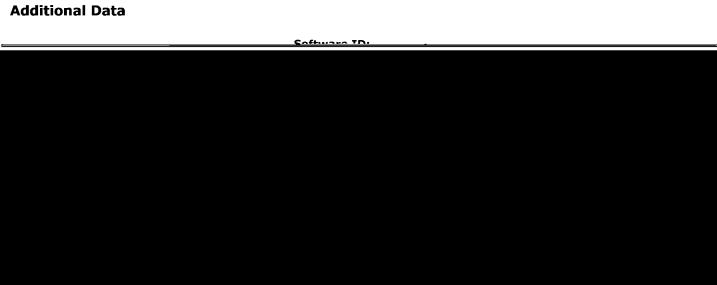
6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI See instructions 7 Excess distributions carryover to 2018. Add lines

c Excess from 2015.

See instructions

d Excess from 2016. Excess from 2017.

31 and 4c 8 Breakdown of line 7 a Excess from 2013. **b** Excess from 2014.



SCHEDULE D

Supplemental Financial Statements

OMB No 1545-0047

DLN: 93493099004219

Open to Public

Department of the Treasury

(Form 990)

► 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. Internal Revenue Service Information about Schedule D (Form 990) and its instructions is at <u>www.irs.gov/form990</u>.

Inspection

	me of the organization				Emp	oloyer identific	ation number	
LNI	ERNATIONAL TRUMPET GUILD				 54-1	1030357		
Pa	rt I Organizations Maintaining Donor Advis	sed	Funds or Other Similar	Funds o	Acc	counts.		
	Complete if the organization answered "Ye	s" o				4155		
	Takal manula and a factoria		(a) Donor advised funds			(b)Funds and o	other accounts	
	Total number at end of year							
	Aggregate value of contributions to (during year)							
ı	Aggregate value of grants from (during year) Aggregate value at end of year							
•	,					<u> </u>		
i	Did the organization inform all donors and donor advisor organization's property, subject to the organization's ex-			n donor adv	/ised	funds are the	☐ Yes ☐ N	٧o
•	Did the organization inform all grantees, donors, and do charitable purposes and not for the benefit of the donor private benefit?						ole	۷o
Pa	rt II Conservation Easements. Complete if th	e o	rganization answered "Yes	" on Form	990	, Part IV, line	7.	
	Purpose(s) of conservation easements held by the organ	ıızat	ion (check all that apply)					
	Preservation of land for public use (e g , recreation	or	education) 🔲 Preserva	tion of an	histor	cally important	land area	
	Protection of natural habitat		☐ Preserva	ition of a ce	ertifie	d historic structi	ure	
	Preservation of open space							
:	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	qual	ified conservation contribution	ın the form	n of a		End of the Year	
а	Total number of conservation easements				2a	neid at the	end of the Year	-
b	Total acreage restricted by conservation easements			-	2b			—
c	Number of conservation easements on a certified historic	str	ucture included in (a)		2c			_
d	Number of conservation easements included in (c) acquirestructure listed in the National Register	red	after 8/17/06, and not on a hi	storic	2d			
J .	<u></u>	.	d. I I I I	r = =t =			(I	
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	See Additional Data							
				20	<u> </u>			
·C	(Code) (Expenses \$ 30,5 See Additional Data	06	including grants of \$	30,506)	(Rever	nue \$	0)	
	See Additional Data							
	See Additional Data Table							—
·d	Other program services (Describe in Schedule O)							_

(5) (5) (6) (7) (8) (8) (9) (9) (10) (10) (10) (10) (10) (10) (10) (10		(Form 990) 2017				Page 3
(a) Description of security or caseagory (b) Solic Col Nethod of valuation (1) Francis derivatives (2) Color of the discrete value (2) Color of the discrete value (2) Color of the discrete value (2) Color of the discrete value (2) Color of the discrete value (2) Color of the discrete value (2) Color of the discrete value (2) Color of the discrete value (2) Color of the value value (3) Color of the value value (4) Color of the value value (5) Color of the value value (5) Color of the value value value (5) Color of the value value (5) Color of the value value (6) Color of the value value (6) Color of the value value (7) Color of the value value value (7) Color of the value v	Part VII		inizatio	n ansv	wered "Yes" on Form 990, Part IV, line 1:	1b.
		(a) Description of security or category		Book		
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Investments - Program Related, Complete if the organization answered 'Yes' on Form 990, Part Xi, line 113.	(D)					
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(4) (5) (6) (7) (8)						
(5) (6) (7) (8)	(3)					
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(8)	(5)					
(8)	(6)					
	(7)		+			
(9)	(8)		+			
ı	(9)		+			
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶ 67,895	Total. (Colum	n (b) must equal Form 990, Part X, col (B) line 25)	 		67,895	
2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII					rganization's financial statements that reports	_

Schedule D (Form 990) 2017

Page 4

1	Total revenue, gains, and other s	upport per audited financial statements			1	
2	Amounts included on line 1 but no	ot on Form 990, Part VIII, line 12				
а	Net unrealized gains (losses) on i	nvestments	2a			
b	Donated services and use of facili	ties	2b			
c	Recoveries of prior year grants		2c			
d	Other (Describe in Part XIII) .		2d			
е	Add lines 2a through 2d				2e	
3	Subtract line $\mathbf{2e}$ from line 1 .				3	
4	Amounts included on Form 990, F	Part VIII, line 12, but not on line 1				
а	Investment expenses not included	d on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII) .		4b			
c	Add lines 4a and 4b				4c	
5	Total revenue Add lines 3 and 4d	c. (This must equal Form 990, Part I, line 12)			5	
Par		penses per Audited Financial Statem zation answered 'Yes' on Form 990, Part			Retur	n.
1	Total expenses and losses per au	dited financial statements			1	
2	Amounts included on line 1 but no	ot on Form 990, Part IX, line 25				
а	Donated services and use of facili	ties	2a			
b	Prior year adjustments		2b			
С	Other losses		2c			
d	Other (Describe in Part XIII) .		2d			
е	Add lines 2a through 2d				2e	
3	Subtract line ${f 2e}$ from line ${f 1}$.				3	
4	Amounts included on Form 990, F	Part IX, line 25, but not on line 1:				
а	Investment expenses not included	d on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII) .		4b			
c					4c	
5		Ic. (This must equal Form 990, Part I, line 18) .		5	
Pai	t XIII Supplemental Info	ormation				
Pro XI,	vide the descriptions required for P lines 2d and 4b, and Part XII, lines	art II, lines 3, 5, and 9, Part III, lines 1a and 4 2d and 4b Also complete this part to provide	4, Part any ac	IV, lines 1b and 2b, Part Iditional information	V, line	e 4, Part X, line 2, Part
	Return Reference		Exp	lanation		
See A	Addıtıonal Data Table					

Schedule D (Form 990) 2017	Page 5
Part XIII Supplemental Information (contin	ed)
<u> Водина Лебоновия</u>	Esculara násce va

Additional Data

Software Version:

EIN: 54-1030357 Name: INTERNATIONAL TRUMPET GUILD

Supplemental Information

Return Reference

Explanation THE RESTRICTED FUNDS ARE UTILIZED FOR SCHOLARSHIPS AND OTHER COMPETITION AWARDS AND EXPENS ES THE COMPETITION AWARDS INCLUDE THE CARMINE CARUSO INTERNATIONAL JAZZ TRUMPET COMPETITI

ON AND THE ELLSWORTH SMITH INTERNATIONAL TRUMPET SOLO COMPETITION

PART V, LINE 4

Software ID:

efile GRAPHIC print	- DO NOT PROC	ESS	As Filed Data -			DLN:	9349309900	04219
SCHEDULE F	Stateme	nt of	Activities (Outside the Uni	ited St	tates	OMB No 1545	-0047
(Form 990)	► Complete if t	he organ		'es" to Form 990, Part IV, I	ıne 14b, 1!	5, or 16.	2017	7
Department of the Treasury Internal Revenue Service	► Information ab	out Sche		nd its instructions is at ww	/w.irs.gov/	/form990.	Open to Pu Inspection	ıblic
Name of the organization	CUITE					Employer iden	ntification num	ber
INTERNATIONAL TRUMPET	GUILD					54-1030357		
	formation on Ac Part IV, line 14b.	ctivitie	s Outside the U	Inited States. Comple	te if the	organization a	inswered "Yes"	' to
1 For grantmakers.	Does the organiza	ation ma	intain records to	substantiate the amount	of its gra	ants and		
•		lity for t	he grants or assis	tance, and the selection	criteria u	ısed		
to award the grants	or assistance?						✓ Yes	□ No
2 For grantmakers. outside the United S		the org	janization's proce	dures for monitoring the	use of its	s grants and ot	her assistance	
3 Activites per Region	(The following Part	I, line 3	table can be dupli	cated if additional space is	needed)			
(a) Region	offic	lumber of es in the egion	(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)	program spe	ity listed in (d) is a service, describe cific type of e(s) in region	(f) Total exper for and invest in regior	ments
3a Sub-total			0 0					(
b Total from continuation Part I	on sneets to							
c Totals (add lines 3a a	and 3h)		0 0					

							. age t
	Other Assistance to e duplicated if addition			ed States. Complete if	f the organization an	nswered "Yes" to Form 9	90, Part IV, line 16.
a) Type of grant or assistance	e (b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
COMPETITION AWARD	EAST ASIA AND THE PACIFIC	4		CASH			
COMPETITION AWARD	EUROPE (INCLUDING ICELAND & GREENLAND)	1		WIRE TRANSFER			
SCHOLARSHIP	EAST ASIA AND THE PACIFIC	1	250	CASH			
		+					
		+					
			·	<u> </u>	<u> </u>		
		+		<u> </u>			
		+ +		<u> </u>			
		+					
				+			
				!			

Page **3**

chedule F (Form 990) 2017	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	
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Editori-res	

Schedule Fi	(Form 990) 2017	Page !
Part V	amounts of investments vs.	uired by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; expenditures per region); Part II, line 1 (accounting method); Part III (accounting nn (c) (estimated number of recipients), as applicable. Also complete this part to provide
	ReturnReference	Explanation

Schedule F (Form 990) 2017

efile GRAPHIC print - DO NOT PROCESS As Filed Data DLN: 93493099004219 OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations,** (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public Attach to Form 990. Department of the Inspection ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Treasury Internal Revenue Service Name of the organization **Employer identification number** INTERNATIONAL TRUMPET GUILD 54-1030357 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 ✓ Yes Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part III 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 (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (h) Purpose of grant (q) Description of organization (if applicable) (book, FMV, appraisal, noncash assistance grant cash or assistance or government assistance other) (1) (3) (5) (6)(7) (8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2017

AN AFFILIATED CHAPTER COORDINATOR HAS BEEN APPOINTED TO MONITOR CHAPTER/AFFILIATE ACTIVITIES TO ENSURE CONSISTENCY WITHIN THE

Schedule I (Form 990) 2017

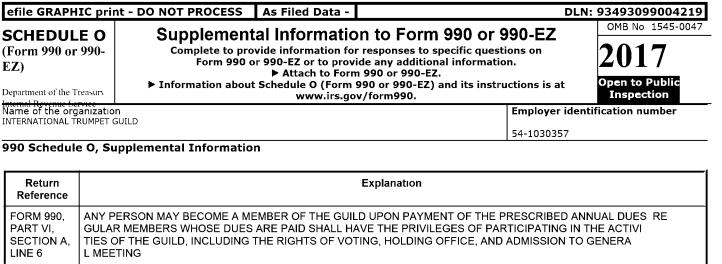
(5)

Return Reference

PART I, LINE 2

Explanation

ORGANIZATION



Return Explanation
Reference

FORM 990,	MEMBERS HAVE THE PRIVILEGE OF PARTICIPATING IN ACTIVITIES OF THE GUILD, INCLUDING THE RIGHT OF VOTING
PART VI,	AND HOLDING A POSITION OF OFFICE
SECTION A,	
LINE 7A	

Return Explanation
Reference

FORM 990, AMENDMENTS TO THE CONSTITUTION MAY BE MADE BY A TWO-THIRDS VOTE OF A QUORUM OF THE MEMBERSHIP SECTION A, LINE 7B

Return Explanation
Reference

FORM 990, COMMITTEES 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 SCHOLA RSHIPS AS DIRECTED BY THE RULES NUMBER OF SCHOLARSHIPS AWARDED IS REPORTED TO THE BOARD LINE 8B

Return Explanation
Reference

FORM 990, ITG AFFILIATE CHAPTERS HAVE NOT BEEN MONITORED IN PAST YEARS DURING 2009, A NEW AFFILIATE
PART VI, CHAPTER COORDINATOR WAS APPOINTED TO START MONITORING CHAPTER/AFFILIATE ACTIVITIES TO ENS
SECTION B, URE A CONSISTENCY WITHIN THE ORGANIZATION
LINE 10B

Return Explanation

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

Return Explanation
Reference

FORM 990, THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVAILABLE TO THE P UBLIC UPON REQUEST THE ORGANIZATION DOES NOT HAVE A CONFLICT OF INTEREST POLICY SECTION C, LINE 19