## Form **990**

Extended to May 15, 2017

Return of Organization Exempt From Income Tax

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

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

	A	FOF	the 2015 calendar year, or tax year beginningUULI 2015 and ending	JUN 30, 2010	o
	8	Check	cif C Name of organization	D Employer identi	lication number
	_	TAd	and the second s		
	$\vdash$		Guitars in the Classroom		1013691
	F		Doing business as    Doing business as		
	F	Fin	# 2770 Wistoria Dosetus Bood 203		-578- <u>2326</u>
	_	uron rest ete	nin-	G Grass receipts \$	282,153.
	Г		ended con Diama CD 02106	H(a) is this a group	
	一		F Name and address of principal officer: John Unger		a? Yes X No
	٠	per	2770 Historic Decatur Road, #203, San Dieg		
•	1	Taxe			a list. (see instructions)
•			site: http://www.guitarsintheclassroom.org/	H(c) Group exempti	
					M State of legal domicile: CA
ſ			Summary		
•	_	1	Briefly describe the organization's mission or most significant activities: To provi	de classroom	educators
	nance	-	and group caregivers of children from ages b		
	fna	2	Check this box  if the organization discontinued its operations or disposed of r		
~	Gover	3	Number of voting members of the governing body (Part VI, line 1a)		8
j.	Ü	4	Number of independent voting members of the governing body (Part VI, line 1b)		
~	es ?	5	Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5	2
ര —	Ž	в	Total number of volunteers (estimate if necessary)	8	70
=¬;	Activities &	7 :	Total unrelated business revenue from Part VIII, column (C), line 12		0.
1 (N)	_		Net unrelated business taxable income from Form 990-T, line 34	7b	0.
•				Prior Year	Current Year
	Đ	8	Contributions and grants (Part VIII, line 1h)	203,716.	
2	Revenue	9	Program service revenue (Part VIII, line 2g)	23,811.	
1/2	Š	10	Investment income (Part VIII, column (A), lines a 4, and (b)	-26,126.	
Q., '	_	11	Other revenue (Part VIII, column (A) lides 5, 6d, 8c, 9c, 19c, aud 11e)	3,237.	
Ŵ-	_	12		204,638.	
	- }	13		0.	
		14	Benefits paid to or for members (Fart (X column (A), line 4)	0.	
	S	15	Salanes, other compensation, employee pertents (PartiX, ootimin A); ines 5-10)	70,544.	74,929.
	Expenses		Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	31		Total fundraising expenses (Part IX, column (D), line 25)	127 601	021 520
	-		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	137,681.	
		18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	208,225.	
=	ıçı	19	Revenue less expenses. Subtract line 18 from line 12	-3,587.	
និ	ances		T	Beginning of Current Year	End of Year
SS	齒	20	Total assets (Part X, line 16)	1,957,052. 15,635.	
Œ	Fund Bata	21	Total liabilities (Part X, line 26)	1.941.417.	13,873. 1,897,555.
		<u>22</u> rt 11	Net assets or fund balances. Subtract line 21 from line 20	1,741,41/.	1,037,333.
			alties of perjury, I declare that I have examined this return, including accompanying schedules and sta	tements and to the hest of m	w knowledge and heliat it is
			ct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer		iy kilowiedyc asid bellet, it is
===	.,,	30110	ALU U.M	May 12, 2	2017
Si	gn		Signature of dffider	Date	
	8 878		John Unger, Treasurer		
			Type or print name and htte		
_			Print/Type preparer's name Preparer's signature	Date Check	PTIN
Pa	id		Jeanne M Mann, CPA	4/24/17 sett-emptor	ed P00229468
Pr	6 <b>p</b> 8	fef	Firm's name Mann & Associates, APC	Firm's EIN	46-4553740
Us	e O	nly	Firm's address 2448 Historic Decatur Road, Ste 240		
			San Diego, CA 92106	Phone no.61	9-222-5900
M	ay i	he II	RS discuss this return with the preparer shown above? (see instructions)		X Yes No
532	2001	12-1			Form 990 (2015)
		S	ee Schedule O for Organization Mission States	ment Continua	tion (b (3))

For	m 990 (2015) Guitars in the Classroom	71-1013691	Page 2
P	art III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III	· · · · · · · · · · · · · · · · · · ·	X
1	Briefly describe the organization's mission:		
	Guitars in the Classroom is dedicated to creating acces	s to musical	
	learning for all students and to improving the quality		by
	providing ongoing musical training and resources to edu		
	train, supply and coach teachers who wish to lead and in		
_		ncediace	
2	Did the organization undertake any significant program services during the year which were not listed on	<del></del>	( <del>1</del>
	the prior Form 990 or 990-EZ?	\Yes	X No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	X No
	If "Yes," describe these changes on Schedule O		
4	Describe the organization's program service accomplishments for each of its three largest program services, as	measured by expenses	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	ers, the total expenses, a	ınd
	revenue, if any, for each program service reported.		
4a		33.	156.)
-	Guitars In The Classroom (GITC) continues to reach over		
	million students each year by training their teachers to		
	related instruction within the classroom. GITC has pro-		
	at primarily lower economic situation schools with free		
	free guitar lessons with integration into regular class:		
	curriculum. GITC has received and expended donated adve-		
	in the amount of \$19,381. This is reflected in the inter		<u>al</u>
	statements and not recorded as revenue or expense on the	<u>e 990 tax</u>	
	return.		
			<del></del>
4b	(Code) (Expenses \$		
	, Louis, Notice, Notice		
		<del></del>	
		<del></del>	
4c	(Code) (Expenses \$		
10	(Code / / Expenses 5 / (Textenses 5		
		<del></del>	
		<del></del>	
		<del></del>	
4d	Other program services (Describe in Schedule O )		
	(Expenses \$ including grants of \$ ) (Revenue \$		
<del>1e</del>	Total program service expenses ► 267,837.		
		Form 99	<b>(</b> 2015)

			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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	1		
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect		[	ĺ
	dunng the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	ļ		
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			ì
	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, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X	l		
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	]	1	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total		-	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11¢		X
đ	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in		- 1	
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	_X_	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		<u> </u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	1	- 1	
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?		1	
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<u> </u>
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
þ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,		İ	
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	1	1	
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	- 1	- 1	
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	J		_
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	1		
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u> </u>
8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	Ì	j	
	1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> </u>
9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"		1	
	complete Schedule G, Part III	19	- {	X

Part IV Checklist of Required Schedules (continued) Yes No 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H ..... X b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II X 22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I. Parts I and III Х 22 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 employees? If "Yes," complete Sçhedule J X 23 24a 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 through 24d and complete Schedule K. If "No", go to line 25a X **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? ... d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 2<u>5a</u> X b 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? If "Yes," complete X 25h Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," X 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III ......... X 27 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). a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV c 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 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation Did the organization liquidate, terminate, or dissolve and cease operations? X Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 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 X 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and .... . ... . 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a b If "Yes" to line 35a, 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, Part V, line 2 35b 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 X . .. . .,.., .... 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 X 37 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

X

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing	]	1	}
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	}	Ì	
b	Enter the number of voting members included in line 1a, above, who are independent			
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	X	
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_		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	_ 5		X
6	Did the organization have members or stockholders?	6		X
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		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
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
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
ь	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		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a		12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14		<u> </u>
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?			
a	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b		<u> </u>
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		1	
16a	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		<u> </u>
ь	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		
Sect	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ►CA			
	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	vailab	le	
	for public inspection. Indicate how you made these available. Check all that apply			
	Own website X Another's website X 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	financ	cial	
	statements available to the public during the tax year.			
	State the name, address, and telephone number of the person who possesses the organization's books and records			
	Jessica Baron - 619-578-2326			
	2770 Historic Decatur Rd STE 203, San Diego, CA 92106			

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rum 990 (2015)	Gultars	In the	Classion	

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any See 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

(A) Name and Title	(B) Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				than	h an	(D)  Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual Lustee or director	lustitutional trustee	Отпсел	Кеу етріоуее	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Art Harvey	3.00									
President		X		X				0.	0.	0
(2) John Unger	3.00									
Treasurer		X	L_	X			_	0.	0.	0
(3) Anna Ress	2.00	Γ					Γ			
Vice President		X		X				0.	0.	0
(4) Janet Godin	2.00									
Secretary		X		X			Ĺ	0.	0.	0.
(5) Harry Finkel	2.00									
Counsel		X				<u>L</u> .		0.	0.	0.
(6) Judy Roberts	2.00	ļ								
Director		X						0.	0.	0.
(7) Joan Maute	2.00							_	_	
Director		X						0.	0.	
(8) Jessica Baron	40.00								_	_
Executive Director		X		X				59,000.	0.	0.
				_						
						_				

71-1013691

	n 990 (2015) Guitars	in the (	<u> 21</u>	18:	sr	201	m			71-1013	1691	Р	age 8
	rt VII Section A. Officers, Directors, Trus (A) Name and title	(B) Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)			than	one han	(D) Reportable	es (continued) (E) Reportable compensation from related	1	(F) stimate mount other	of	
		(list any hours for related organizations below line)	Individual frustee or director	Institutional trustee	Описел	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	org ar	npensa from the ganization relation	ted
	~												
										·			
	Sub-total Total from continuation sheets to Part VII								59,000.	0.			0.
	Total (add lines 1b and 1c)								59,000.	Ŏ.			0.
2	Total number of individuals (including but no compensation from the organization	ot limited to the	ose	liste	d ab	ove	) wh	o re	eceived more than \$100	,000 of reportable			0
												Yes	No
3	Old the organization list any former officer, of line 1a? If "Yes," complete Schedule J for su								-		3		<u>X</u>
4	For any individual listed on line 1a, is the sur and related organizations greater than \$150										4		X
5	Did any person listed on line 1a receive or ac rendered to the organization? If "Yes," comp	ccrue compen	satio	on fr	om :	any	unre				5		x
Sec	tion B. Independent Contractors	mete Schedale	<u> </u>		<u> </u>	<i>1</i> 673	017	****					
1	Complete this table for your five highest con the organization, Report compensation for the	-									ation f	rom	
	(A) Name and business a			NE					(B) Description of se		Ompei	c) nsation	
								1					
	<del></del>	<del></del>			•			1					
	<del></del>							+					
								+					
								+					
	Total number of independent contractors (in	-	t lin	nted	l to t	hos		ted	above) who received mo	ore than			
	\$100,000 of compensation from the organiza	20017					<u>'</u>				Form !	<b>990</b> (2	015)

532008 12-16-15

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) (D) Revenue excluded from tax under Related or Unrelated Total revenue exempt function business sections 512 - 514 revenue revenue 1 a Federated campaigns 1a 15 **b** Membership dues c Fundraising events 10 d Related organizations 10 44,465. Contributions, and Other Sirr Government grants (contributions) 1e f All other contributions, gifts, grants, and 204,518 similar amounts not included above \_\_\_\_\_ 1f 109,319 g Noncash contributions included in lines 1a-1f \$\_\_ 248,983. h Total. Add lines 1a-1f Business Code 33,156. 2 a School Based Funding 711300 33,156. Program Service Revenue f All other program service revenue 33,156. g Total. Add lines 2a-2f Investment income (including dividends, interest, and 14 other similar amounts) Income from investment of tax-exempt bond proceeds Royalties .. ..... 5 (i) Real (ii) Personal 6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) . 7 a Gross amount from sales of (i) Securities (ii) Other assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) .......... 8 a Gross income from fundraising events (not Other Revenue including \$ of contributions reported on line 1c). See Part IV, line 18 ..... a **b** Less direct expenses . ... c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 ... .... a **b** Less, direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances . . . . . . . **b** Less cost of goods sold ..... c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a d All other revenue e Total. Add lines 11a-11d 282,153. 33,156. 0. Total revenue. See instructions. Form 990 (2015)

Form 990 (2015) Guitars in the Classroom

Part IX | Statement of Functional Expenses

	ction 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respon			amplete column (A).	X
	o 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 domestic organizations		experises	gariara experises	6AP411333
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22				
3	_				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	59,000.	41,300.	11,800.	5,900
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)			1	
7	Other salaries and wages	6,219.	4,353.	1,244.	622.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	9,710.	6,797.	1,942.	971.
11	Fees for services (non-employees):				
а			Ì		
b					······································
C	Accounting	4,965.	3,476.	993.	496.
ď					
e					
f	· · · · · · · · · · · · · · · · · · ·				
	Other (If line 11g amount exceeds 10% of line 25.				<del></del>
Ŭ	column (A) amount, list line 11g expenses on Sch O.)	32,836.	32,821.	10.	5.
12	Advertising and promotion	3,549.	3,549.		
13	Office expenses	5,744.	4,021.	1,149.	574.
14	Information technology				
15	Royalties				
16	Occupancy	11,861.	8,303.	2,372.	1,186.
17	Travel	9,089.	6,362.	1,818.	909.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	517.	<del></del>	517.	<del></del>
20	Interest	109.		109.	<del></del>
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	19,556.	19,556.		
23	Insurance	13,004.	9,103.	2,601.	1,300.
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)	2010020	3,200		
а	Instruments	122,288.	122,288.		
b	Program Supplies	4,409.	4,409.		
C	Development costs	1,654.			1,654.
	Dues and Subscriptions	1,007.	705.	201.	101.
	All other expenses	942.	794.	99.	49.
	Total functional expenses. Add lines 1 through 24e	306,459.	267,837.	24,855.	13,767.
:6	Joint costs Complete this line only if the organization				<del></del>
	reported in column (B) joint costs from a combined			ļ	
	* * *	í	1	1	
	educational campaign and fundraising solicitation.	i	f	}	

Form 990 (2015)
Part X Balance Sheet

Part X	Balance Sheet			
	Check if Schedule O contains a response or note to any line in this Part X			
		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	8,143.	1	20,314
2	Savings and temporary cash investments		2	
3	Pledges and grants receivable, net	37,930.	3	19,247
4	Accounts receivable, net		4	
5	Loans and other receivables from current and former officers, directors,			
j	trustees, key employees, and highest compensated employees. Complete			
ł	Part II of Schedule L		5	
6	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			
ļ	employers and sponsoring organizations of section 501(c)(9) voluntary			
ا ہ	employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	
7	Notes and loans receivable, net	<del></del>	7	<del></del>
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 1,910,525.			
ь	Less accumulated depreciation 10b 39,112.	1,910,525.	10c	1,871,413
111	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	454.	15	454
16	Total assets. Add lines 1 through 15 (must equal line 34)	1,957,052.	16	1,911,428
17	Accounts payable and accrued expenses	2,668.	17	3,021
18	Grants payable		18	
19	Deferred revenue		19	· · · · · · · · · · · · · · · · · · ·
20	Tax-exempt bond liabilities		20	· · · · · · · · · · · · · · · · · · ·
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	<del></del>
1	Loans and other payables to current and former officers, directors, trustees,			
22	key employees, highest compensated employees, and disqualified persons.			
	Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties		23	
	Unsecured notes and loans payable to unrelated third parties		24	
,	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24) Complete Part X of			
	Schedule D	12,967.	25	10,852
1	Total liabilities. Add lines 17 through 25	15,635.	26	13,873
	Organizations that follow SFAS 117 (ASC 958), check here ▶ X and			
	complete lines 27 through 29, and lines 33 and 34.		}	
,	Unrestricted net assets	128,671.	27	84,809
	Temporarily restricted net assets	1,812,746.	28	1,812,746
1	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here			
E	and complete lines 30 through 34.		- 1	
ì	Capital stock or trust principal, or current funds		30	
	Paid-in or capital surplus, or land, building, or equipment fund		31	
	Retained earnings, endowment, accumulated income, or other funds		32	
	Total net assets or fund balances	1,941,417.	33	1,897,555
34	Total liabilities and net assets/fund balances	1,957,052.	34	1,911,428
			<u> </u>	Form <b>990</b> (2015

	1990 (2015) Guitars in the Classroom	71-1	<u>013691</u>	Page 12
Pa	rt XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI	<del></del>		X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	282	2,153.
2	Total expenses (must equal Part IX, column (A), line 25)	2		459
3	Revenue less expenses. Subtract line 2 from line 1	3		306
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		1,417.
5	Net unrealized gains (losses) on investments	5		
6	Donated services and use of facilities	6		
7	Investment expenses	7		
8	Prior period adjustments	8		
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-19	,556.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,			
	column (B))	10	1.897	7,555.
Pa	rt XII Financial Statements and Reporting			<u> </u>
	Check if Schedule O contains a response or note to any line in this Part XII			
				Yes No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.	-	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	-	2a	x
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a		
	separate basis, consolidated basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis			1
b	Were the organization's financial statements audited by an independent accountant?		2b	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis.		
	consolidated basis, or both	,		
	Separate basis Consolidated basis Both consolidated and separate basis			
С	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	1
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche			
	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin			
	Act and OMB Circular A-133?		3a	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require	ed audit		—— <del>—</del>
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		Зь	
				90 (2015)

#### SCHEDÙLE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### **Public Charity Status and Public Support**

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

Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2015

Open to Public Inspection

Schedule A (Form 990 or 990-EZ) 2015

Nan	lame of the organization Employer identification numbe									
		Gui	tars in the	e Classroom				7	71-1013691	
Pa	irt I	Reason for Public	Charity Status	(All organizations must d	complete t	his part ) S	ee instruction:	s		
The	organ	ızation ıs not a prıvate foun		•		•	-			
1	$\square$	A church, convention of c	hurches, or associat	tion of churches describe	ed in <b>sect</b> i	on 170(b)(	(1)(A)(i).			
2	$\square$	A school described in sec	tion 170(b)(1)(A)(ii).	(Attach Schedule E (For	m 990 ar 9	990·EZ).)				
3		A hospital or a cooperative	e hospital service orț	ganization described in s	ection 17	O(b)(1)(A)(	iii).			
4	$\Box$	A medical research organi	ization operated in ci	onjunction with a hospit	al describe	d in section	on 170(b)(1)(A	)(iii). Enter	the hospital's name,	
		city, and state.								
5	ш	An organization operated		college or university owner	d or opera	ated by a g	jovernmental u	ınıt descri	bed in	
	$\overline{}$	section 170(b)(1)(A)(iv). (								
6	H	A federal, state, or local go								
7	لــا	An organization that norm		antial part of its support	from a go	vernmenta	l unit or from t	ne general	l public described in	
_		section 170(b)(1)(A)(vi). (0								
8	$\mathbf{x}$	A community trust describ	=							
9		An organization that norm								
		activities related to its exe								
		income and unrelated bus		e (less section 5 i i tax) i	rom pusini	esses acqu	ored by the or	ganization	arter June 30, 1975.	
10		See section 509(a)(2). (Co An organization organized	•	ewaly to tost for public c	afoty Soo	section 5	00(2)(4)			
11		An organization organized			•			erny out the	e numases of one or	
••		more publicly supported o	•	•	•			-		
		lines 11a through 11d that	- T							
а		i	-	supervised, or controlled		-		_	v giving	
			•	egularly appoint or elect	•	•				
		organization. You must							0	
b		Type II. A supporting org	ganization supervised	d or controlled in connec	tion with i	ts support	ed organizatio	n(s), by ha	aving	
		control or management of	of the supporting org	ganization vested in the	same pers	ons that co	ontrol or mana	ge the sur	ported	
		organization(s) You mus	st complete Part IV,	, Sections A and C.						
C		Type III functionally into	egrated. A supportin	ng organization operated	in connec	tion with,	and functional	ly integrate	ed with,	
		its supported organization	n(s) (see instruction:	s) You must complete	Part IV, S	ections A,	D, and E.			
đ		Type III non-functionally	y integrated. A supp	porting organization ope	rated in co	nnection v	with its suppor	ted organi	ization(s)	
		that is not functionally in	tegrated. The organi	zation generally must sa	tisfy a dist	ribution re	quirement and	an attent	iveness	
	<del>_</del>	requirement (see instruct		- ·						
е	ш	Check this box if the orga					a Type I, Type	ii, Type III		
_		functionally integrated, o		onally integrated support	ing organi	zation.				
f		the number of supported							-	
9		de the following information Name of supported	ii) EIN		(iv) is the c	rganization	(v) Amount of	monetary	(vi) Amount of	
	•	organization	, ,	(described on lines 1-9	l listed i	n your document?	support		other support (see	
				above (see instructions))	Yes	No	instructio	enc)	instructions)	
					100					
					}					
_										
					j					
otal										

	edule A (Form 990 or 990-EZ) 2015 G art II Support Schedule for	Organization	<u>the Clas</u> Described in	ssroom Sections 170	)(b)(1)(A)(iv) ar	nd 170(b)(1)	1013691 Page 2 K <b>A)(vi)</b>
	(Complete only if you checke						
	fails to qualify under the tests			_			_
Se	ction A. Public Support						
Cale	indar year (or fiscal year beginning in)	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not		ŀ	}	1		ł
	include any "unusual grants.")					1	
2	Tax revenues levied for the organ-					•	
	ization's benefit and either paid to			j	1		
	or expended on its behalf						
3	The value of services or facilities		1				
	furnished by a governmental unit to		}		•	1	
	the organization without charge				<del></del>	<del> </del>	
4	Total. Add lines 1 through 3				<u> </u>	<u> </u>	
5	The portion of total contributions			1	]	)	
	by each person (other than a		İ				
	governmental unit or publicly				]	Ì	
	supported organization) included					1	
	on line 1 that exceeds 2% of the				ļ	1	
	amount shown on line 11,				ĺ	ĺ	
	column (f)				<del> </del>	<del> </del>	
	Public support, Subtract line 5 from line 4.		<u> </u>	<u> </u>	<u> </u>		<u></u>
	tion B. Total Support		710010	T	4 7 0014	1 1 2015	1 (2 = 1 )
	ndar year (or fiscal year beginning in)	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
	Amounts from line 4		<u> </u>			<del>                                     </del>	
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
^	and income from similar sources	<del></del>		<del> </del>	<del> </del>	+	
9	Net income from unrelated business				1		
	activities, whether or not the					· ·	
	business is regularly carried on			<del>                                     </del>			-
	Other income Do not include gain or loss from the sale of capital						
	assets (Explain in Part VI )				}		
	Total support. Add lines 7 through 10					<del>                                     </del>	
	Gross receipts from related activities,	etc (see instruction	one)	<u> </u>	<u> </u>	12	
	First five years. If the Form 990 is for						
	organization, check this box and stop	_					
	tion C. Computation of Publi						2.
4	Public support percentage for 2015 (li	ne 6, column (f) di	vided by line 11,	column (f))		14	%
	Public support percentage from 2014					15	%
6a :	33 1/3% support test - 2015. If the o	rganization did no				more, check th	is box and
	stop here. The organization qualifies a						
b	33 1/3% support test - 2014. If the o	rganization did no	t check a box on				
	and stop here. The organization quali			_			
7a	10% -facts-and-circumstances test	- 2015. If the org	anization did not				
	and if the organization meets the "fact						
	meets the "facts-and-circumstances" (	test. The organiza	tion qualifies as a	publicly supported	d organization .		. ▶□
b	10% -facts-and-circumstances test	- 2014. If the org	anization did not	check a box on line	13, 16a, 16b, or	17a, and line 1	15 is 10% or
1	more, and if the organization meets th	e "facts-and-circu	mstances" test, c	heck this box and	stop here. Explair	n in Part VI hov	w the
	organization meets the "facts-and-circ						▶□
18 (	Private foundation. If the organization	did not check a	box on line 13, 16	ia, 16b, 17a, or 17b	o, check this box a	and see instru	ctions D

# Schedule A (Form 990 or 990-EZ) 2015 Guitars in the Classroom Part III | 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

Se	ction A. Public Support	iaiow, picase com	Dieto Fart II.)		<del> </del>	<del></del>	<del></del> .
Cal	endar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not	1					}
	include any "unusual grants.")	127,593.	238,385.	262,714.	203,716.	248,983.	1081391.
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		13,709.	3,799.			
3	Gross receipts from activities that						
	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ- ization'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	127,593.	252,094.	266,513.	231,509.	282,139.	1159848.
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
c	Add lines 7a and 7b						0.
	Public support. (Subtractline 7c from line 6)						1159848.
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 📂	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9	Amounts from line 6	127,593.	252,094.	266,513.	231,509.	282,139.	1159848.
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources				4.		4.
b	Unrelated business taxable income						<u> </u>
	(less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b				4.		4.
	Other income Do not include gain or loss from the sale of capital						
13	assets (Explain in Part VI)  Total support. (Add lines 9, 10c, 11, and 12.)	127,593.	252,094.	266,513.	231,513.	282,139.	1159852.
	First five years. If the Form 990 is for						
	check this box and stop here				·		▶□
	tion C. Computation of Publi	c Support Per					
15	Public support percentage for 2015 (lii	ne 8, column (f) di	vided by line 13, c	olumn (f))		15	100.00 %
	Public support percentage from 2014	, ,	•				100.00 %
	tion D. Computation of Inves						
	Investment income percentage for 20			e 13, column (f))		17	.00 %
	Investment income percentage from 2	•				18	%
	33 1/3% support tests - 2015. If the				•		
	more than 33 1/3%, check this box an 33 1/3% support tests - 2014. If the	nd stop here. The	organization quali	fies as a publicly s	upported organiza	ition	<b>►</b> X
	line 18 is not more than 33 1/3%, chec	•					<b>▶</b>
	Private foundation. If the organization		-			<u> </u>	

#### Part IV Supporting Organizations

(Complete only if you checked a box in line 11 on Part I if you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C if you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V)

Se	ection	A.	All	Suppo	orting	Orga	nizations
----	--------	----	-----	-------	--------	------	-----------

- 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.
- 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)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- 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
- 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.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below
- 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.
- 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.
- 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).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 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).
- 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)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
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	4b	<del> </del>	<del></del>
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	10b	, j	

		L-101369	)1 P:	age 5
-	Irt IV   Supporting Organizations (continued)		Yeş	No
11	Has the organization accepted a gift or contribution from any of the following persons?		145	No
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)		1	
	below, the governing body of a supported organization?	11a	}	1
t	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		
	ction 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	j		
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or	l	1	İ
	controlled the organization's activities. If the organization had more than one supported organization,	ļ	}	1
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	ĺ		
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1	<u> </u>	<u> </u>
2	Did the organization operate for the benefit of any supported organization other than the supported	1	}	1
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in	ļ	Ì	
	Part VI how providing such benefit carned out the purposes of the supported organization(s) that operated,		1	i
~	supervised, or controlled the supporting organization.	2	L	L
Sec	tion C. Type II Supporting Organizations		T.:	Γ
			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			l
	or management of the supporting organization was vested in the same persons that controlled or managed	1	Ì	l
Sec	the supported organization(s). tion D. All Type III Supporting Organizations	<del></del>		
000	Mon D. All Type in 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		.03	140
•	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		<b>i</b>	1
	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			1
	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			ļ
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
<del></del>	supported organizations played in this regard.	3	L	<u> </u>
Sec	tion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see Instruct	ions):		
а	The organization satisfied the Activities Test. Complete line 2 below			
b	The organization is the parent of each of its supported organizations. Complete line 3 below			
C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (s	ee instructions		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify	] ]		
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	0-		
_	that these activities constituted substantially all of its activities.	2a		
Ь	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these	a.		
3	activities but for the organization's involvement.  Parent of Supported Organizations. Answer (a) and (b) below.	2b		
-	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
a	trustees of each of the supported organizations? Provide details in <i>Part VI</i> .	3a	į	
ь	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	- 30		
	of its supported organizations? If "Yes," describe in Part VI_the role played by the organization in this regard.	3b	- 1	

Sch	edule A (Form 990 or 990 EZ) 2015 Guitars in the Classroo	m		<u>71-1013691 Page 6</u>
ш-	Type III Non-Functionally Integrated 509(a)(3) Supporting			
1	Check here if the organization satisfied the Integral Part Test as a qualifying	•		uctions. All
Sec	other Type III non-functionally integrated supporting organizations must co	mplete S	(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		<del>                                     </del>
2	Recoveries of prior-year distributions	2		+
3		3		
	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6		+ 3 +		
0	Portion of operating expenses paid or incurred for production or			ł
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		<del></del>
		7		<del></del>
_8_	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		<del>                                     </del>
Sec	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			<u> </u>
a	Average monthly value of securities	1a		
<u>b</u>	Average monthly cash balances	1b		<u></u>
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	on C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		<u> </u>
5	Income tax imposed in prior year	5	· · · · · · · · · · · · · · · · · · ·	<del> </del>
6	Distributable Amount. Subtract line 5 from line 4, unless subject to	+ +		
•	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional		ed Type III supporting are	anization (see
•	Unetractions)	, micagrati	sa Type in supporting org	

	edula A (Form 990 or 990 EZ) 2015 Guitars in E) Int V Type III Non-Functionally Integrated 50			/1-1013691 Page 1
<u> </u>	tion D - Distributions	alaya) aupporting org	ariizationis (Continueu)	Current Year
1	Amounts paid to supported organizations to accomplish ex	remot ourneese		Ourrent reas
-	Amounts paid to perform activity that directly furthers exem			
_	organizations, in excess of income from activity	pripages of supported		
3		ses of supported organization	19	
4	Amounts paid to acquire exempt-use assets	ses of supported organization		
5				<del>                                     </del>
-6	-			<del>                                     </del>
7			-	<u> </u>
8	Distributions to attentive supported organizations to which	the organization is responsive		
•	(provide details in Part VI). See instructions.	and organization is responsive	•	
9	Distributable amount for 2015 from Section C, line 6	·		
10	Line 8 amount divided by Line 9 amount	· · · · · · · · · · · · · · · · · · ·		
	Cinic of announced by Line 3 announce	(i)	(ii)	(iii)
Seci	tion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2015	Distributable Amount for 2015
_1	Distributable amount for 2015 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2015			
	(reasonable cause required-see instructions)			
_3_	Excess distributions carryover, if any, to 2015:			
a				
b				
С				
<u>d</u>	From 2013			
е	From 2014			
f	Total of lines 3a through e			
_9_	Applied to underdistributions of prior years			
h	Applied to 2015 distributable amount			
i	Carryover from 2010 not applied (see instructions)			
_i	Remainder, Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2015 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2015 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2015, if			
	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2015 Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
	instructions).	1		
7	Excess distributions carryover to 2016. Add lines 3	1	······································	
•	and 4c	[		
8	Breakdown of line 7			
a			<del></del>	
<u>=</u> _		<u> </u>		
	Excess from 2013		<del> </del>	
	Excess from 2014			<del>                                     </del>
	Excess from 2015			

Schedule A	Form 990 or 990 EZ) 2015 Guitars in the Classroom	71-1013691 Page 8
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 1 Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, P Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6. Also complete this part for any ac (See instructions.)	nes 1 and 2; Part IV, Section C, lart V, Section B, line 1e, Part V,
<del></del>		
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	·	
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	· · · · · · · · · · · · · · · · · · ·	

#### SCHEDULE D

### Supplemental Financial Statements

Department of the Treasury Internal Revenue Service

(Fdrm 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. ► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Schedule D (Form 990) 2015

Name of the organization **Employer** identification number Guitars in the Classroom 71-1013691 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) Aggregate value of 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 chantable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. 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 a historically important land area Protection of natural habitat Preservation of a certified historic structure 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 Total number of conservation easements 2a **b** Total acreage restricted by conservation easements <u>2</u>b c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 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 violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, 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) 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 describes the organization's accounting for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8 1a 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 XIII. the text of the footnote to its financial statements that describes these items b 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: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 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 b Assets included in Form 990, Part X

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

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	edule D (Form 990) 2015 Guitars										01369	_	age 2
PE	ert III   Organizations Maintaining												
3	Using the organization's acquisition, access	sion, and of	ther record	ds, chec	k any of the	e following th	at are a	signifi	cant u	ise of its	collection	ı ıten	ns
	(check all that apply)			$\overline{}$									
a			c	╸┝╡		change prog	rams						
b			e	•	Other								
C													
4	Provide a description of the organization's of		=		-	-				se in Pa	rt XIII.		
5	During the year, did the organization solicit									_	_	_	_
<u> </u>	to be sold to raise funds rather than to be n										Yes		No
	rt IV Escrow and Custodial Arrai reported an amount on Form 990, Pa	_		ete if the	e organizati	on answered	! "Yes" 0 	on For	n 990 	, Part IV	, line 9, or		
1a	Is the organization an agent, trustee, custod			•						_	<b>-</b> .	_	_
	on Form 990, Part X?						· · · · · · · · · · · · · · · · · · ·			_	Yes	L_	_ No
b	If "Yes," explain the arrangement in Part XII	l and comp	lete the fo	ollowing	table.			_					
								-			Amount	<u></u>	
¢	Beginning balance								1c				
đ	Additions during the year								1d				
е	Distributions during the year								1e		-		
f	Ending balance								1f	<del></del>	<del></del>		<b>—</b>
	Did the organization include an amount on F		-					•		ــا لـــ	Yes	<u> </u>	ᅴᄱ
	If "Yes," explain the arrangement in Part XIII								.,	*****			
Га	rt V   Endowment Funds. Complete	T							2		14.5-		
4.	Decree of the balance	(a) Curre	ent year	(0)	Prior year	(c) Two yea	ars dack	(0)	nree ye	ars oack	(e) Four	years	Dack
	Beginning of year balance	ļ				+		+					
b	Contributions	<u> </u>				<del>                                     </del>		+	1		<del> </del>		
C	Net investment earnings, gains, and losses					+		┼			<del> </del>		
d	Grants or scholarships	<u> </u>			<del></del>	+		$\vdash$			<del>                                     </del>		
е	Other expenditures for facilities												
	and programs	<u></u> _				<del> </del>		+			┼		
f	Administrative expenses	<u> </u>		<u> </u>				┼			<del> </del>		
g	End of year balance	<u> </u>		<u> </u>				<u> </u>			1		
2	Provide the estimated percentage of the cur	rent year e	ind balanc	-	g, column (	(a)) neid as:							
a	Board designated or quasi-endowment			_%									
b	Permanent endowment	%											
С	Temporarily restricted endowment		<u></u> %										
_	The percentages on lines 2a, 2b, and 2c sho							<b></b>					
Ja	Are there endowment funds not in the posse	ession of tr	re organiza	ation tha	at are neio a	and administr	ered for	trie or	garnza	LION	Г		
	by											Yes	No
	(i) unrelated organizations,	• •••	• • • • • • • • • • • • • • • • • • • •					• •		· · ····	3a(i)		<del> </del>
<b>L</b>	(ii) related organizations	-*.aaa b*-						· · · · ·	******		. (3a(ii)		<del></del>
, 0	If "Yes" on line 3a(ii), are the related organization of the organ					·	••••	•			. <u>3b</u>		L
<del>p</del>	t VI Land, Buildings, and Equipm		ion's endo	winent	iunas						<del></del>		
	Complete if the organization answere		Form 99f	) Part I	/ lino 11a	See Form 90	n Dart Y	( line	10				
	Description of property		Cost or o			t or other		Accum			(d) Book	ah.ı	
	Description of property	1	is (investr			(other)	, , ,	preci		<b>'</b>	(a) Book	valu	Ð
	Lond				04313	(04.01)		, p. 00.			1,812	7	16
	Land		,812,	/ <del>1</del> 0 .			<del> </del>			$\dashv$	1,014	/	±0.
	Buildings	•					<del> </del> -			_			
	Leasehold improvements	·	<del></del>			7,779.		3.0	,11	2	E 0	1 6	67.
	Equipment	1								. 4	20	, 0	0/4
	Other	•				91,113.				_			

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

Guitars in the Classroom

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Schedule D (Form 990) 2015

Schedule D (Form 990) 2015

	dule D (Form 990) 2015 Guitars in the Classroom		<u>71-1013691 </u> ₽	Page
Pai	t XI Reconciliation of Revenue per Audited Financial Statemen	nts With Revenue per	Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.			
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a	]	
ь	Donated services and use of facilities	2b	7	
c	Recoveries of prior year grants	l t	7	
d	Other (Describe in Part XIII )		7	
	Add lines 2a through 2d		2e	
3			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
-	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
			-	
	Add by a district of		<b>⊢</b> _	
	Add lines 4a and 4b		4c	
	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		- Botuen	
ar	t XII Reconciliation of Expenses per Audited Financial Stateme	ents with Expenses pe	r neturn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		1	
	Total expenses and losses per audited financial statements		1	
	Amounts included on line 1 but not on Form 990, Part IX, line 25.	1 1		
а	Donated services and use of facilities	2a	1	
b	Prior year adjustments	2b		
C	Other losses			
d	Other (Describe in Part XIII)			
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	Other (Describe in Part XIII )	4b	7	
	Add lines 4a and 4b		4c	
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			
	XIII Supplemental Information.		1 = 1,	
⊋s 2 	d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additi	ional information		
		·		

Schedule D (Form 990) 2015

#### SCHEDULE M (Form 990)

**Noncash Contributions** 

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

2015

Department of the Treasury Internal Revenue Service Attach to Form 990.

Open To Public Inspection

Name of the organization

Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990. Inspection

Employer identification number

	Guitars in t	he Cla	lssroom		1 71-	10136	91
Pa	rt I Types of Property						
		(a) Check if applicable		(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d Method of d noncash contrib	leterminin	•
1	Art - Works of art						
2	Art - Historical treasures						
3	Art - Fractional interests				<u> </u>		
4	Books and publications	<u> </u>					
5	Clothing and household goods						
6	Cars and other vehicles	ļ					
7	Boats and planes	<u> </u>					
8	Intellectual property			<u></u>			
9	Securities - Publicly traded						
10	Securities - Closely held stock						
11	Securities · Partnership, LLC, or		į				
	trust interests				<u> </u>		
12	Securities - Miscellaneous						
13	Qualified conservation contribution -						
	Historic structures						
14	Qualified conservation contribution - Other						
15	Real estate - Residential						
16	Real estate · Commercial						
17	Real estate - Other						
18	Collectibles						
19	Food inventory						
20	Drugs and medical supplies						
21	Taxidermy				<del></del>		
22	Historical artifacts				<del>-</del>		
23	Scientific specimens						
24	Archeological artifacts						
25	Other (Instruments a)	<u> </u>	193	109,319.	Fair market	: val	ue fr
26	Other ()		<u></u>				
27	Other ()						
28	Other (						
29	Number of Forms 8283 received by the organiz	_	· -				
	for which the organization completed Form 828	33, Part IV, [	Donee Acknowledg	jement			<del></del>
						Y	es No
30a	During the year, did the organization receive by					1 1	İ
	must hold for at least three years from the date		l contribution, and	which is not required to be	used for		
	exempt purposes for the entire holding period?	••••			••• • • • • • • • • • • • • • • • • • •	30a	X
	If "Yes," describe the arrangement in Part II.		_				
31	Does the organization have a gift acceptance p	-	•		itions?	31	X
32a	Does the organization hire or use third parties of	or related or	ganizations to solid	cit, process, or sell noncash			)
	contributions?					32a	X_
	If "Yes," describe in Part II		_				
33	If the organization did not report an amount in	column (c) fo	or a type of proper	ty for which column (a) is chi	ecked,		
	describe in Part II.					1 1	1

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is prompt in Part I, or any additional information.  Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is provided by Part I, lines 30b, 32b, and 33, and whether the organization is provided by Part I, lines 30b, 32b, and 33, and whether the organization is provided by Part I, lines 30b, 32b, and 33, and whether the organization is provided by Part I, lines 30b, 32b, and 33, and whether the organization is provided by Part I, lines 30b, 32b, and 33, and whether the organization is provided by Part I, lines 30b, 32b, and 33b, and whether the organization is provided by Part I, lines 30b, 32b, and 33b, and whether the organization is provided by Part I, lines 30b, 32b, and 33b, and whether the organization is provided by Part I, lines 30b, 32b, and 33b, and whether the organization is provided by Part I, lines 30b, 32b, and 33b, and whether the organization is provided by Part I, lines 30b, 32b, and 33b, and whether the organization is provided by Part I, lines 30b, 32b, and 33b, and whether the organization is provided by Part I, lines 30b, 32b, and 32	Schedule M	(Form 990) (2015)	<u>Guitars</u>	in the	Classroo	m		71-1013691	Page 2
	Part []	Supplementa is reporting in Par	I information. t i, column (b), the	Provide the number of o	information requirential information requirements in the contributions, the	red by Part I, lines 30 number of items rece	b, 32b, and 33, eived, or a comb	and whether the organi nnation of both Also co	zation mplete
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#### 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.

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

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

Inspection

Guitars in the Classroom	71-1013691
Form 990, Part I, Line 1, Description of Organization Mis	sion:
ongoing professional development classes containing music	
music integration training, and music leadership training	
Form 990, Part III, Line 1, Description of Organization M	ission:
hands-on music with lessons in English language arts, mat	
social studies and more. Our work promotes teacher effect	iveness,
student engagement, collaboration, creativity, communicat	ion, critical
thinking & academic achievement, essential skills for the	21st century.
Form 990, Part VI, Section A, line 2:	
Harry Finkel and Anna Ress are both board members who are	married to each
other.	
Form 990, Part VI, Section B, line 11:	
Our finance committe works together with our bookkeeper,	Brandiann Whitten
and our accountants at Mann and Associates APC to develop	and discuss the
990. In past years, our president has taken the lead. This	s year, our
treasurer is fulfilling that role.	
Form 990, Part VI, Section B, Line 12c:	
Review annually with members of board. Discuss in monthly	board meetings.
Form 990, Part VI, Section B, Line 15a:	
Our Executive Director's salary was discussed by the board	d and approved and
has remained stable for the past three years. The amount of	was determined to
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.  Sched 532211 09-02-15	ule O (Form 990 or 990-EZ) (2015)

Schedule O (Form 990 or 990-EZ) (2015)	Page 2
Name of the organization  Guitars in the Classroom	Employer identification number 71-1013691
Total Other Fees on Form 990, Part IX, line 11g, Col A	32,836.
Form 990, Part XI, line 9, Changes in Net Assets:	
Depreciable fixed assets not depreciated in FYE 6/30/15,	
corrected in CY	-19,556.
Expenses not recorded on prior return	
Total to Form 990, Part XI, Line 9	-19,556.
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Schedule O (Form 990 or 990-EZ) (2015)