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Form 990-EZ

Short Form Return of Organization Exempt From Income Tax

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

OMB No. 1545-1150 20**14**

Open to Public

Inspection

Department of the Treasury

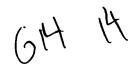
▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

		ide Gervice			· · · · · · · · · · · · · · · · · · ·			
A F	For the 2	2014 calenda	r year, or tax year beginning July 1	, 2014,	and ending		ine 30	
В	Check if app	plicable	C Name of organization			D Emplo	yer ide	entification number
<u> </u>	Address ch	hange	Green Mountain Youth Symphony, Inc.	<u> </u>				6-1690919
=	Name char	_	Number and street (or P.O box, if mail is not delivered to stree	t address)	Room/suite	E Teleph	none nu	ımber
=	Initial return		PO Box 384				80	2-888-4470
=	Amended :	n/terminated	City or town, state or province, country, and ZIP or foreign pos	tal code		F Grou	p Exer	nption
=	Application		Montpelier, VT 05601-0384			Num	ber 🕨	•
		ing Method:	Cash		н	Check ▶	· 🗆 ıt	f the organization is not
	Nebsite:	•						ach Schedule B
			ck only one) — 📝 501(c)(3) 🔲 501(c) () ◀ (insert n	o.) 4947(a)(1) or		-)-EZ, or 990-PF).
			✓ Corporation ☐ Trust ☐ Association					,
n 1	Add Imee	organization.	b to line 9 to determine gross receipts. If gross receipts		nore or if total	assets		
) are \$500,000 or more, file Form 990 instead of Form 9				•	
_			e, Expenses, and Changes in Net Assets o			inetrue	tions	for Part I)
F	art I							
			the organization used Schedule O to respond t					
	1		ns, gifts, grants, and similar amounts received.				1	15,716
	2	_	rvice revenue including government fees and cor			· ·	2	87,872
	3		p dues and assessments				3	
	4	Investment				· ·	4	
	5a	Gross amo	unt from sale of assets other than inventory .					
	b		or other basis and sales expenses				- 1	
	С	Gain or (los	s) from sale of assets other than inventory (Subtra	act line 5b from li	ne 5a)	[5c	
	6		d fundraising events					
	a	Gross inco	ome from gaming (attach Schedule G if great	ater than				
9		\$15,000) .		6a		į.		
Revenue	Ь	Gross inco	me from fundraising events (not including \$	of	contribution	s		
<u></u>			using events reported on line 1) (attach Schedul	e G if the				
_			n gross income and contributions exceeds \$15,00				i	
	l c	Less: direc	expenses from gaming and fundraising events	6c				
	ď		e or (loss) from gaming and fundraising events (add lines 6a and	6b and sub	tract		
	-	line 6c) .				[6d	
	7a	•	of inventory, less returns and allowances	7a		130		
	, a		of goods sold	7b		150		
	C		t or (loss) from sales of inventory (Subtract line 7b				7c	130
	1		nue (describe in Schedule O)				8	130
	8 9		nue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8			· 🗼 🖡	9	102 710
	+				<u> </u>	•	10	103,718
	10		similar amounts paid (list in Schedule O) .	· · · · · · · · · · · · · · · · · · ·	/		11	10,532
	11		id to or for members	1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			12	
98	12		her compensation, and employee benefits					73,627
ű	13		al fees and other payments to independent contra	ctors	2016		13	203
Expenses	. 14		, rent, utilities, and maintenance	1	Pain .		14	17,705
ш	1		blications, postage, and shipping		×		15	3,298
	16		nses (describe in Schedule O)	المتاريخ والمتاريخ	المت المتعادلة	· ·	16	13,487
	17	Total expe	nses. Add lines 10 through 16	- · · · · · · · · · · · · · · · · · · ·	minden diamin	. ▶	17	118,852
Ś	18		deficit) for the year (Subtract line 17 from line 9)			[18	(15,134)
set	19		or fund balances at beginning of year (from line]	
Ąŝ		_	r figure reported on prior year's return)				19	16,032
Net Assets	20	Other char	ges in net assets or fund balances (explain in Sch	edule O)		[20	
	21		or fund balances at end of year. Combine lines 18				21	897

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 106421

Form **990-EZ** (2014)



orm !	990-EZ (2	2014)					Page 2
Pa	rt II	Balance Sheets (see the instructions	•				_
		Check if the organization used Schedule	O to respond to a	ny question in this			· · · · · · · · · · · · · · · · · · ·
				_	(A) Beginning of year		(B) End of year
22		n, savings, and investments			15,137	_	2
23		and buildings	- · · · · ·			23	
24		er assets (describe in Schedule O)			895	-	895
25		ll assets		· · · · · - -		25	 -
26		Il liabilities (describe in Schedule O)		· · · · ·	16,032	26	
27 • 27	t III	assets or fund balances (line 27 of column Statement of Program Service Accom			76,032 Part III)	21	897
rai	CHI	Check if the organization used Schedule					Expenses
Vha	t is the	organization's primary exempt purpose?	Orchestral music for	young musicians			quired for section (c)(3) and 501(c)(4)
s n	neasure	e organization's program service accomplied by expenses. In a clear and concise melited, and other relevant information for ea	nanner, describe the	f its three largest p	rogram services, I, the number of		anizations; optional for ers.)
28		stra rehearsals & concerts - approximately 110					
	year ar	nd performed concerts at the end of each sem	ester as well as at se	veral events during t	he year.		
	(Grant					288	93,286
29	Summo progra	er Creative Arts & Music Program - 29 student m.	musicians participat	ed in a 7-day residen	tial music		
	(Grant	s\$ 0) If this amount	ıncludes foreign gra	ints, check here	> 🗆	29 a	25,566
30							
	(Grant		includes foreign gra		🕨 🗆	30a	1
31		program services (describe in Schedule O)				24.	
20	(Grant	s \$) If this amount program service expenses (add lines 28a	includes foreign gra			31a	· ·
	t IV	List of Officers, Directors, Trustees, and Ke					1.0/000
еII	LIV	Check if the organization used Schedule				iisiiu	
		Check if the organization used Schedule	T	(c) Reportable	(d) Health benefits.	i	· · · · <u> </u>
		(a) Name and title	(b) Average hours per week devoted to position	compensation (Forms W-2/1099-MISC (if not paid, enter -0-)	contributions to employ benefit plans, and	1.	Estimated amount of other compensation
\nn	Cookso	n					
Во	ard Cha	ir	5	0	<u> </u>	0	0
/lich	ael Fior	illo	_				
Во	ard Vice	e-Chair	5	0	<u> </u>	0	0
ara	h Madru	<u> </u>	_				
Во	ard Sec	retary	5	<u>c</u>)	이	0
	ifer Isal		. _		ŀ	_	_
	ard Trea		5	<u> </u>	<u> </u>	0	0
	Desroc		. _				
	rd men		2		'	0	0
	a Furbe		2			o	0
ВО	ard mer	noer			,	-	
			-				
			-		 	\dashv	· · · · · · · · · · · · · · · · · · ·
			-				
eah	Wilhiel	Im, Orchestra Manager			 	\top	
		Manager	22	23,198	<u>, </u>	0	0
	ert Blais						_
			1	l	.1	.1	

Part	instructions for Part V) Check if the organization used Schedule O to respond to any question in this			П
•	modulation (are v) are an area of garmanian about a companie to the point of any quantum and		Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33		1
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		1
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business			
	activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a 35b	├	✓
c	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		1
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a			
b	Did the organization file Form 1120-POL for this year?	37b	 	✓
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? .	38a		1
b	If "Yes," complete Schedule L, Part II and enter the total amount involved	30a	 	-
39	Section 501(c)(7) organizations. Enter:	1]
а	Initiation fees and capital contributions included on line 9		İ	1
b	Gross receipts, included on line 9, for public use of club facilities]	1	
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ o ; section 4912 ▶ o ; section 4955 ▶ o			
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b	- -	-
C	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e	_	1
41	List the states with which a copy of this return is filed			
42a		802-88		
b	Located at ▶ PO Box 384 (part time physical office at 46 Barre Street) Montpelier, VT ZIP + 4 ▶ At any time during the calendar year, did the organization have an interest in or a signature or other authority over	0560	1-0384	No
_	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		√
	If "Yes," enter the name of the foreign country: ▶			\Box
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
С	At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c	<u> </u>	✓
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year			▶ □
44-	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be		Yes	No
44a	completed instead of Form 990-EZ	44a		V
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b	-	- V
c d	Did the organization receive any payments for indoor tanning services during the year?	44c		✓
4-	explanation in Schedule O	44d		↓ ✓
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	┼	
b	meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b	-	1

									A
Form 99 46		e organization engage, directly or inc						Yes	
Part	VI :	ididates for public office? If "Yes," co Section 501(c)(3) organizations All section 501(c)(3) organizations 50 and 51. Check if the organization used Sch	only must answer que	estions 47-49b an	d 52, and c	omplete th	•	for line	∟ √ es . □
47	Did th	ne organization engage in lobbying a	activities or have a		tion in effec		tax	Yes	No
48 49a b 50	Is the Did th If "Ye	organization a school as described in le organization make any transfers to s," was the related organization a second blete this table for the organization's byees) who each received more than	section 170(b)(1)(A)(an exempt non-chaction 527 organization five highest comper	ii)? If "Yes," complet antable related orga on? nsated employees (te Schedule (inization? . other than of	ficers, direct	. 48 . 49a . 49b tors, trust	ees an	√ √ d key
	(a)	Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MIS	contribution benefit plan	Ith benefits, ns to employee is, and deferred bensation	(e) Estimate other co		
f 51		number of other employees paid ove		· · ·	o ent contracto	ors who eacl	n received	d more	e than
	\$100	000 of compensation from the organ Name and business address of each independ	nization. If there is n	one, enter "None." (b) Type of s		T) Compensa		
NONE									
d 52 Under p	Did comp	number of other independent contra the organization complete Schedu bleted Schedule A	le A? Note. All s	ection 501(c)(3) or	ements, and to	the best of my k	.► ✓ Ye		No , rt is
Sign Here		Signature of officer Jennifer Isabell, Board Treasurer Type or print name and title				2-11-16 Date	2		
Paid		Print/Type preparer's name	Preparer's signature		Date	Check self-emplo	- 1		

Preparer

Use Only

Firm's name

Firm's address ▶

May the IRS discuss this return with the preparer shown above? See instructions

► ☐ Yes ☐ No

Firm's EIN ▶

Phone no.

SCHEDULE A' (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

2014

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► 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.

Open to Public Inspection

Name o	of the organization					Employer identification	number
Green Mountain Youth Symphony, Inc.					16-16	90919	
Part	Reason for Public Cha	rity Status (All	organizations must	comple	te this p	art.) See instruction	ns.
The o	rganization is not a private founda	tion because it is	s: (For lines 1 through	11, chec	k only or	ne box.)	
1	A church, convention of church	hes, or associate	on of churches descri	bed in se	ction 17	0(b)(1)(A)(i).	
2	A school described in section	170(b)(1)(A)(ii).	(Attach Schedule E.)				
	A hospital or a cooperative hos						
4	A medical research organization hospital's name, city, and state	-	onjunction with a hosp	oital desc	ribed in s	ection 170(b)(1)(A)	(iii). Enter the
5	5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)						
6	A federal, state, or local govern	nment or govern	mental unit described	in secti o	on 170(b)	(1)(A)(v).	
7	An organization that normally described in section 170(b)(1)			port from	a goven	nmental unit or fron	n the general public
8	A community trust described i	n section 170(b)	(1)(A)(vi). (Complete	Part II.)			
9	An organization that normally receipts from activities related support from gross investme acquired by the organization a	to its exempt int income and	functions—subject to unrelated business	certain taxable ıı	exception ncome (l	ns, and (2) no more ess section 511 ta	than 331/3% of its
10	☐ An organization organized and	operated exclus	sively to test for public	safety.	See sect i	ion 509(a)(4).	
11	An organization organized and one or more publicly supported the box in lines 11a through 11	d organizations d	escribed in section 5	09(a)(1) o	r section	509(a)(2). See sect	i on 509(a)(3). Check
a	☐ Type I. A supporting organize the supported organization(sorganization. You must company to the support of t	ation operated, s	supervised, or control egularly appoint or ele	led by its	supporte	ed organization(s), ty	pically by giving
b	☐ Type II. A supporting organic control or management of the organization(s). You must control to the control of the control	e supporting org	janization vested in th				
c	☐ Type III functionally integra its supported organization(s)						y integrated with,
đ	☐ Type III non-functionally in that is not functionally integr requirement (see instructions)	ated. The organi	zation generally must	satisfy a	distributi	on requirement and	
e	Check this box if the organiz						I, Type III
	functionally integrated, or Ty	pe III non-function	onally integrated supp	porting or	ganızatio	n.	
f	Enter the number of supported	organizations .					[]
g	Provide the following information	n about the supp	orted organization(s).				
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	listed in you	rganization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
				Yes	No		
(A)							
(B)							
(C)							
(D)							
(E)							

Part	Support Schedule for Organiza						
	(Complete only if you checked the Part III. If the organization fails to						ality under
Section	on A. Public Support	quality unde	21 1110 10010 110	Aca bolow, p	ioaso compie	,	
	dar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")					.,	
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4.			}			<u> </u>
-	on B. Total Support	<u></u>	T	T		T	T
	dar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7							
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc					12	
13	First five years. If the Form 990 is for the organization, check this box and stop he	_			h, or fifth tax y 		
Secti	on C. Computation of Public Support						
14	Public support percentage for 2014 (line			11, column (f))		14	%
15	Public support percentage from 2013 Sci		-			15	%
16a	331/3% support test-2014. If the organi	zation did not	check the box				check this
	box and stop here. The organization qua			_			🕨 🛚
b	331/a% support test—2013. If the organ check this box and stop here. The organ					e 15 is 33¹/3% 	or more,
17a		014. If the orgets the "facts-facts-and-circle	anization did n and-circumsta	ot check a bo ances" test, ch st. The organiz	x on line 13, 16 leck this box a zation qualifies	nd stop here.	line 14 is Explain ın
b	10%-facts-and-circumstances test—2 15 is 10% or more, and if the organiza Explain in Part VI how the organization in supported organization	tion meets the neets the "fact	e "facts-and-c s-and-circums	ircumstances" stances" test.	' test, check ti The organization	nis box and ston qualifies as	a, and line top here. a publicly

 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 qualify under the tests listed below, please complete Part II.)

Section	on A. Public Support	ander the tee	no notou bore	m, picase co	inplote rare	••/	
	dar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees	(4) 2010	(5) 2011	(0) 2012	(4) 20.0	(0) 20 1 1	(i) Total
•	received. (Do not include any "unusual grants.")	86,205	113,301	142,969	111,201	98,989	EE2 CCE
2	Gross receipts from admissions, merchandise	80,203	113,301	142,303	111,201	30,303	552,665
_	sold or services performed, or facilities						
	furnished in any activity that is related to the						
_	organization's tax-exempt purpose	2,248	2,628	6,730	4,569	4729	20,904
3	Gross receipts from activities that are not an]					
	unrelated trade or business under section 513	O	0	0	0	0	
4	Tax revenues levied for the		ļ				
	organization's benefit and either paid						
	to or expended on its behalf	0	0	0	0	o	
5	The value of services or facilities	İ					
	furnished by a governmental unit to the					ľ	
	organization without charge	0	o	0	0	0	
6	Total. Add lines 1 through 5	88,453	125,929	149,699	115,770	103,718	573,569
7a	Amounts included on lines 1, 2, and 3					1	
	received from disqualified persons .	o	o	0	0	o	0
ь	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000	i					
	or 1% of the amount on line 13 for the year	ol	اه	o	o	o	0
C	Add lines 7a and 7b	0	0	0	0	0	0
8	Public support (Subtract line 7c from		-				<u>v</u>
	line 6.)						573,569
Secti	on B. Total Support				····	.,	0,0,000
_	dar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6	88,453	125,929	149,699	115,770	103,718	573,569
10a	Gross income from interest, dividends,	•	·			•	
	payments received on securities loans, rents,	İ					
	royalties and income from similar sources .	o	o	o	o	o	0
b	Unrelated business taxable income (less						<u></u> _
	section 511 taxes) from businesses						
	acquired after June 30, 1975	o	o	o	o	اه	0
c	Add lines 10a and 10b	0	0	0	0	0	0
11	Net income from unrelated business	-					
• •	activities not included in line 10b, whether						
	or not the business is regularly carried on	o	0	اه	o	o	o
12	Other income. Do not include gain or						
-	loss from the sale of capital assets						
	(Explain in Part VI.)	o	0	o	0	٥	^
13	Total support. (Add lines 9, 10c, 11,		- 0				0
	and 12.)	88,453	125,929	149,699	115,770	103,718	573,569
14	First five years. If the Form 990 is for the				or fifth tax ve	ear as a section	501(c)(3)
	organization, check this box and stop he						▶ □
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2014 (line 8			3, column (f))		15	100 %
16	Public support percentage from 2013 Sch		•			16	100 %
	on D. Computation of Investment In						
17	Investment income percentage for 2014 (y line 13, colun	nn (f))	17	0 %
18	Investment income percentage from 2013					18	0 %
19a	331/3% support tests-2014. If the organ						
	17 is not more than 331/2%, check this box						
b	331/3% support tests-2013. If the organize					-	
-	line 18 is not more than 331/3%, check this l						
20	Private foundation. If the organization di		_				

Part IV **Supporting Organizations**

(Complete only if you checked a box on line 11 of 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.)

Section A. All Supporting O	rganizations
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organizations)? If "Yes," answer (b) below.

determine whether the organization had excess business holdings.)

Secti	on A. All Supporting Organizations		·/	
			Yes	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.	- <u>-</u>		
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).	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.	3a		
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? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c	-	
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.	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	-	t-m.
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 (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	_	
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?	5b		
6 6	Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) 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.	5c		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
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).	8	-	
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 .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.	9Ь		
C	Did a disqualified person (as defined in line 9(a)) 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 .	9c		
10a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting			

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

10a

Part	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	المدا	-	
	below, the governing body of a supported organization?	11a 11b	_	
	A family member of a person described in (a) above? 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		
	on B. Type I Supporting Organizations	1110	<u> </u>	L
	on an approximation of the second of the sec		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	<u> </u>	
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 organization.	2		-
Secti	ion C. Type II Supporting Organizations		L	1
	,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,		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		
Sect	ion D. All Type III Supporting Organizations		V	l NI a
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		Yes	No
•	organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax		1	
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) 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		<u> </u>
3	By reason of the relationship described in (2), did the organization's supported organizations have a		İ	١ '
	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			1
	supported organizations played in this regard.	ایا	ł	. '
Sect	ion E. Type III Functionally-Integrated Supporting Organizations	3	L	
		·	- 47	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i	nstru	Ction	s):
a	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. ☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see the context of the cont	oo inc	ta loti	ione)
)CC 11 13		
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	l	İ	
	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		ļ	
	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			\vdash
_	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			
	activities but for the organization's involvement.	2b	-	- '
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a	 	<u> </u>
Ь	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes " describe in Part VI the role played by the organization in this regard	3h		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations						
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All						
other Type III non-functionally integrated supporting organizations must complete Sections A through E.						
Section A - Adjusted Net Income	(A) Prior Year	(B) Current Year (optional)				
1 Net short-term capital gain	1					
2 Recoveries of prior-year distributions	2					
3 Other gross income (see instructions)	3	L				
4 Add lines 1 through 3	4					
5 Depreciation and depletion	5					
6 Portion of operating expenses paid or incurred for production or						
collection of gross income or for management, conservation, or			1			
maintenance of property held for production of income (see instructions)	6					
7 Other expenses (see instructions)	7					
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8					
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)			
1 Aggregate fair market value of all non-exempt-use assets (see						
instructions for short tax year or assets held for part of year):						
a Average monthly value of securities	1a					
b Average monthly cash balances	1b					
c Fair market value of other non-exempt-use assets	1c					
d Total (add lines 1a, 1b, and 1c)	1d					
e Discount claimed for blockage or other						
factors (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					
Section 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					
5 Income tax imposed in prior year	5					
6 Distributable Amount. Subtract line 5 from line 4, unless subject to	1					
emergency temporary reduction (see instructions)	6					
7 Check here if the current year is the organization's first as a non-functional	y-in	tegrated Type III supporti	ng organization (see			
instructions).						

Part) Supporting Organi	zations (continued)				
Secti	on D - Distributions			Current Year			
<u>`1</u>							
2	Amounts paid to perform activity that directly furthers exe						
	organizations, in excess of income from activity			<u> </u>			
3_	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations				
4	Amounts paid to acquire exempt-use assets						
5_	Qualified set-aside amounts (prior IRS approval required)						
6_	Other distributions (describe in Part VI). See instructions.	 					
7	Total annual distributions. Add lines 1 through 6.						
8	Distributions to attentive supported organizations to whic	h the organization is res	sponsive				
	(provide details in Part VI). See instructions.						
9	Distributable amount for 2014 from Section C, line 6	, , <u>,</u>					
10_	Line 8 amount divided by Line 9 amount						
Se	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014			
1	Distributable amount for 2014 from Section C, line 6						
2	Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions)						
3	Excess distributions carryover, if any, to 2014:		·				
а							
b							
С							
d	, , , , , , , , , , , , , , , , , , , 						
е							
f	Total of lines 3a through e						
g	Applied to underdistributions of prior years						
h	Applied to 2014 distributable amount						
i	Carryover from 2009 not applied (see instructions)						
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.						
4	Distributions for 2014 from Section D, line 7:						
а	Applied to underdistributions of prior years						
b	Applied to 2014 distributable amount						
С	Remainder. Subtract lines 4a and 4b from 4.						
5	Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).						
6	Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).						
7	Excess distributions carryover to 2015. Add lines 3j and 4c.						
8	Breakdown of line 7:						
а							
b							
C							
d	Excess from 2013						
е	Excess from 2014						

Schedule A (F	edule A (Form 990 or 990-EZ) 2014			
Part VI	Supplemental Part III, line 12	Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Also complete this part for any additional information. (See instructions.)	nd	

		······································		

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.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ➤ Attach to Form 990 or 990-EZ.

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

Open to Public Inspection

Employer identification number

Green Mountain Youth Symphony, Inc.	16-1690919	
Form 990EZ Line 10 - Grants and similar amounts paid: Financial aid (tuition reductions) to students	\$10,532	
Form 990EZ Line 16 - Other expenses (rounded)		
Concert expenses	\$2,583	
Fundraising expenses	317	
Board expense	24	
Student supplies	44	
Equipment	1132	
Safety / first aid	52	
Marketing	282	
Transportation	60	
Insurance	5965	
Food	71	
Office supplies	302	
Dues & subscriptions	776	
Instrument rentals	107	
Miscellaneous	11	
Sheet music	1685	
Telephone	75	
TOTAL FOR LINE 16	13,487	
Form 990EZ Line 24 - Other Assets: Opening Equity \$895		