

Short Form Return of Organization Exempt From Income Tax

OMB No. 1545-1150

2008

Form **990-EZ**

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

Department of the Treasury
Internal Revenue Service

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form.
The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

A For the 2008 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization		D Employer identification number	
		PLAYING FOR CHANGE FOUNDATION		20-8568061	
		Number and street (or P.O. box, if mail is not delivered to street address)		Room/suite	E Telephone number
		715 N. CRESCENT HEIGHTS BLVD.			310-288-6202
		City or town, state or country, and ZIP + 4		F Group Exemption Number	
		LOS ANGELES, CA 90046			

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting method: Cash Accrual
Other (specify) _____

I Website: WWW.PLAYINGFORCHANGE.ORG

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

J Organization type (check only one) 501(c) (3) (insert no.) 4947(a)(1) or 527

K Check if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$1,000,000 or more, file Form 990 instead of Form 990-EZ. \$ 139,202.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

		1	2	3	4	5a	5b	5c	6a	6b	6c	7a	7b	7c	8	9	10	11	12	13	14	15	16	17	18	19	20	21
Revenue	1	Contributions, gifts, grants, and similar amounts received														138,622.												
	2	Program service revenue including government fees and contracts																										
	3	Membership dues and assessments																										
	4	Investment income														580.												
	5a	Gross amount from sale of assets other than inventory																										
	5b	Less: cost or other basis and sales expenses																										
	5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (attach schedule)																										
	6	Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here <input type="checkbox"/>																										
	a	Gross revenue (not including \$ _____ of contributions reported on line 1)																										
b	Less: direct expenses other than fundraising expenses																											
c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)																											
7a	Gross sales of inventory, less returns and allowances																											
b	Less: cost of goods sold																											
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)																											
8	Other revenue (describe _____)																											
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8														139,202.													
Expenses	10	Grants and similar amounts paid (attach schedule) STMT 3														4,000.												
	11	Benefits paid to or for members																										
	12	Salaries, other compensation, and employee benefits																										
	13	Professional fees and other payments to independent contractors														3,625.												
	14	Occupancy, rent, utilities, and maintenance														10,770.												
	15	Printing, publications, postage, and shipping														73.												
	16	Other expenses (describe _____ SEE STATEMENT 1)														58,912.												
17	Total expenses. Add lines 10 through 16														77,380.													
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)														61,822.												
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)														37,282.												
	20	Other changes in net assets or fund balances (attach explanation)																										
	21	Net assets or fund balances at end of year. Combine lines 18 through 20														99,104.												

Part II Balance Sheets. If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 instead of Form 990-EZ. (See the instructions for Part II.)

		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments	25,108.	86,818.
23	Land and buildings		
24	Other assets (describe _____ SEE STATEMENT 2)	12,174.	12,286.
25	Total assets	37,282.	99,104.
26	Total liabilities (describe _____)	0.	0.
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	37,282.	99,104.

Part III Statement of Program Service Accomplishments (See the instructions for Part III.)		Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts; optional for others.)	
What is the organization's primary exempt purpose? RESOURCES TO MUSICIANS GLOBALLY			
Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title.			
28	SEE STATEMENT 5		
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>		28a	31,461.
29	BUILDING SCHOOLS IN ORDER TO PROVIDE A SAFE, CREATIVE OUTLET FOR THE CHILDREN WHILE CONNECTING THEM TO OTHER STUDENTS AROUND THE WORLD THROUGH MUSIC.		
(Grants \$ 4,000.) If this amount includes foreign grants, check here <input checked="" type="checkbox"/>		29a	32,041.
30			
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>		30a	
31	Other program services (attach schedule)		
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>		31a	
32	Total program service expenses (add lines 28a through 31a)	32	63,502.

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated. (See the instructions for Part IV.)				
(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-.)	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
WHITNEY KROENKE BURDITT, 715 N. CRESCENT HEIGHTS BLVD., LOS ANGELES, CA 90046	DIRECTOR 2.00	0.	0.	0.
MARK JOHNSON, 715 N. CRESCENT HEIGHTS BLVD., LOS ANGELES, CA 90046	DIRECTOR 2.00	0.	0.	0.
DAVID BACON, 715 N. CRESCENT HEIGHTS BLVD., LOS ANGELES, CA 90046 0	DIRECTOR 2.00	0.	0.	0.
HEATHER O'BRIEN BACON, 715 N. CRESCENT HEIGHTS BLVD., LOS ANGELES, CA 90046	DIRECTOR 2.00	0.	0.	0.
JEREMY GOULDER, 715 N. CRESCENT HEIGHTS BLVD., LOS ANGELES, CA 90046	DIRECTOR 2.00	0.	0.	0.
JOEL GOULDER, 715 N. CRESCENT HEIGHTS BLVD., LOS ANGELES, CA 90046	DIRECTOR 2.00	0.	0.	0.
GREG JOHNSON, 715 N. CRESCENT HEIGHTS BLVD., LOS ANGELES, CA 90046	DIRECTOR 2.00	0.	0.	0.
KEVIN KRUPITZER, 715 N. CRESCENT HEIGHTS BLVD., LOS ANGELES, CA 90046	DIRECTOR 2.00	0.	0.	0.
JONATHAN WALLS, 715 N. CRESCENT HEIGHTS BLVD., LOS ANGELES, CA 90046	DIRECTOR 2.00	0.	0.	0.
RAAN WILLIAMS, 715 N. CRESCENT HEIGHTS BLVD., LOS ANGELES, CA 90046	DIRECTOR 2.00	0.	0.	0.