## **PUBLIC INSPECTION COPY**

Form **990** 

#### **Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ► Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

<u> </u>	ror i	the 2017 Calent	uar year, or tax year begin	illig 6/UI	, 2017,	and ending	5/3	ΣŢ	,	2018	
В	Check	if applicable:	С					D Employ	er identif	ication number	
	P	Address change	Houston Symphony	Society				74-	11573	373	
	-	Name change	615 Louisiana St						ne numb		
	-	-	Houston, TX 7700					710	004	4040	
	$\vdash$	nitial return		_				/13	-224-	-4240	
	F	inal return/terminated									
		Amended return						<b>G</b> Gross r			361.
	P	Application pending	F Name and address of principa	lofficer: John Mangur	n		` '	a group retur		'c³	X No
			Same As C Above	,		ŀ	l(b) Are all	subordinates attach a list.	included	? Yes	No
ī	Tax	c-exempt status	X 501(c)(3) 501(c) (	) ◀ (insert no.)	4947(a)(1) or	527	11 140,	attaon a not.	(300 11131	uctions)	
J	We	ebsite: ► ww	w.houstonsymphon	7.org	-		H(c) Group e	exemption no	ımber ►		
K	For	m of organization:	X Corporation Trust	Association Other ►	LY	ear of formation	n: 1913	3 <b>M</b> s	State of le	gal domicile: TX	
Pa	ırt I	Summar		L L	l.						
. •	1	Briefly descri	be the organization's missi	on or most significant ag	ctivities:The	missio	n of t	the Ho	ustor	Symphon	v is
	•		re and engage a								
ည			exceptional orch								
<u>na</u>		activiti		periorman	1 <u>005</u> ,_ <u>04</u> 0	<u>.cacron</u>	<u> </u>	<u>grams</u>	<u>ana</u>	<u>communit cy</u>	
ě	2	Check this bo		n discontinued its opera	tions or dispo	sed of mor	e than 2	5% of its	net ass		
છે	3		oting members of the gover						3		125
•ಶ	4		dependent voting members						4		125
<u>.e</u>	5		of individuals employed ir						5		535
≅	6		of volunteers (estimate if						6		775
Activities & Governance	7 a	Total unrelate	ed business revenue from I	Part VIII, column (C), lin	e 12				7a		0.
			I business taxable income						7b	59	,763.
				<u> </u>				rior Year		Current Ye	
	8	Contributions	and grants (Part VIII, line	1h)			21	,024,6	30	18,447	
Revenue	9		vice revenue (Part VIII, line	•				,002,9		10,882	
Ne Ne	10		ncome (Part VIII, column (A					,002,3	02.		,670.
æ	11		e (Part VIII, column (A), lir	-				-449,3	60		,456.
	12		e – add lines 8 through 11					,578,2		29,175	
	13		imilar amounts paid (Part I					, 510, 2	32.	25,115	, 005.
	14		to or for members (Part I)				<u> </u>				
		•	·					F 4 C C	0.6	01 010	
S	15		er compensation, employee				21	,546,0		21,910	
nse	16 a	a Professional	fundraising fees (Part IX, o	column (A), line 11e)				226,1	95.	170	<u>,953.</u>
Expenses	Ł	Total fundrais	sing expenses (Part IX, col	umn (D), line 25) ►	2,93	1,287.					
ш	17	Other expens	ses (Part IX, column (A), li	nes 11a-11d, 11f-24e)			11	,658,0	59.	12,023	. 683.
	18		es. Add lines 13-17 (must	·				,430,2		34,104	
	19	•	expenses. Subtract line 1	•				,852,0		-4,928	
- ×		1.0101140 1000	oxportage. Captrage into 1	0 110111 11110 12::::::				g of Currer		End of Ye	
ances	20	Total assets (	(Part X, line 16)					, 498, 4		10,401	
See Bal	21		s (Part X, line 26)					,438,4 ,678,6		27,902	
Net Assets Fund Balan	21		•								
			fund balances. Subtract li	ne 21 from line 20			-13	,180,1	.99.	-17,501	,231.
Pa	rt II	Signatur	e Block								
Unde	er pena	alties of perjury, I de	eclare that I have examined this returner (other than officer) is based on	irn, including accompanying sche	edules and statem	nents, and to th	ne best of my	y knowledge	and belie	f, it is true, correct	, and
		\ <del></del> 7									
٠.		Signatur	<u>ectronically Fil</u>	<u>ea                                    </u>			Dat	to			
Siç	jn	Signatur									
He	re		zabeth Condic				CFO				
			print name and title	_		1					
		Print/Type p	oreparer's name	Preparer's signature		Date	. (	Check	<b>ζ</b> if F	PTIN	
Pa	id	Jody E	Blazek	Jody Blazek	<u> </u>	04/12	2/19	self-employ	ed [	200072674	
Pre	epar		Blazek & Vett	terling							
	ė Oı							Firm's EIN	<b>76-</b>	0269860	
			Houston, TX	•			Phone no. (713) 439-5739				
May	/ the	IRS discuss th	nis return with the preparer		ructions)					X Yes	No
				. (	-,						

Га	Check if Schedule O contains a response or note to any line in this Part III	Х
1	Briefly describe the organization's mission:	Λ
'		
	The mission of the Houston Symphony is to inspire and engage a large and diver	
	audience in Greater Houston and beyond through exceptional orchestral performa	inces,
	educational programs and community activities.	
2	2 Did the organization undertake any significant program services during the year which were not listed on the prior	
_	Form 990 or 990-EZ?	X No
	If 'Yes,' describe these new services on Schedule O.	Y MO
2		X No
3		No X
	If 'Yes,' describe these changes on Schedule O.	
4	4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total	expenses.
	and revenue, if any, for each program service reported.	,
4 8	4a (Code: ) (Expenses \$ 13,401,123. including grants of \$ ) (Revenue \$ 4,3	61,950.)
	See Schedule 0	
41	<b>4b</b> (Code: ) (Expenses \$ 8,934,281. including grants of \$ ) (Revenue \$ 2,1	10 122 \
41		
	See Schedule O	
4 (	4c (Code:) (Expenses \$ 5,105,304.       including grants of \$) (Revenue \$ 4,3	72 <b>,</b> 110.
	See Schedule O	
		<b></b>
4 (	4 d Other program services (Describe in Schedule O.)	
	(Expenses \$ including grants of \$ ) (Revenue \$	)
4 (	<b>4e</b> Total program service expenses ► 27, 440, 708.	

			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 (see instructions)?	2	Χ	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I.	3		Х
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If 'Yes,' complete Schedule C, Part II</i>	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
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		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If 'Yes,' complete Schedule D, Part II</i>	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		Х
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? <i>If 'Yes,' complete Schedule D, Part IV</i>	9		Х
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	Х	
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	X	
t	Did the organization report an amount for investments – other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII.	11 b		Х
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 c		Х
c	1 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 Part X, line 16? If 'Yes,' complete Schedule D, Part IX.	11 d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Χ	
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	11 f		Х
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a		X
Ł	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
Ł	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If 'Yes,' complete Schedule F, Parts III and IV</i>	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions).	17	Х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II.	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.	19		Х

# Form 990 (2017) Houston Symphony Society Part IV Checklist of Required Schedules (continued)

			Yes	No
20a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		X
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	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.	21		Х
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	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J.</i>	23	Х	
	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	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
C	I Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	respection 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	25a		Х
t	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 Schedule L, Part I	25b		Х
26	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,' complete Schedule L, Part II.	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or 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.	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		X
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	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Χ
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If 'Yes,' complete Schedule R, Part l</i>	33		X
	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Х	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
t	olf '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	Х	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2.	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note. All Form 990 filers are required to complete Schedule O	38	Х	

# Form 990 (2017) Houston Symphony Society Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V....

	Check if Schedule O contains a response of note to any line in this rare v			.
			Yes	No
	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
(	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Х	
2 8	a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 535			
ı	f at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	Χ	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3 8	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a	Χ	
ı	<b>a</b> If 'Yes,' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation in Schedule O.</i>	3 b	Χ	
4 8	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		Χ
ı	o If 'Yes,' enter the name of the foreign country: ►			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5 8	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
	a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		Χ
ı	o If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).			
ä	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7 a	Х	
	a If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b	Χ	
	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		Х
(	d If 'Yes,' indicate the number of Forms 8282 filed during the year			
•	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		Х
1	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Х
9	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 q		
ı	n If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7 h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring			
_	organization have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
	a Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
	b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
	Section 501(c)(7) organizations. Enter:			
	a Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter:			
	a Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.).			
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	a If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	4.5		
ć	a Is the organization licensed to issue qualified health plans in more than one state?	13a		
	<b>Note.</b> See the instructions for additional information the organization must report on Schedule O.			
	b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			77
	a Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14b	000	(2017
ΑΑ	TFFA0105L 08/08/17	Form	990 (	ZU1 /

Form 990 (2017) Houston Symphony Society 74-1157373 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. Section A. Governing Body and Management No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year..... 125 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. **b** Enter the number of voting members included in line 1a, above, who are independent . . . 125 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? See Schedule 0 2 Χ 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 Χ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Χ Did the organization become aware during the year of a significant diversion of the organization's assets?..... 5 Χ 5 Did the organization have members or stockholders?....See.Schedule.0..... Χ 6 7 a 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? See Schedule 0. 7 a Χ **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... Χ 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?..... Χ 8 a X **b** Each committee with authority to act on behalf of the governing body?..... 8 b 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O..... 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10 a Did the organization have local chapters, branches, or affiliates?..... 10 a Χ b 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? 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... Χ b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O Χ 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13...... 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b Χ to conflicts?..... c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done ... See .Schedule .0 ...... Χ 12c 13 Did the organization have a written whistleblower policy?..... 13 Χ 14 Did the organization have a written document retention and destruction policy?..... Χ 14 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.. See . Schedule.. 0...... Χ 15a **b** Other officers or key employees of the organization...See .Schedule..Q..... 15 b X If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions). 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?..... Χ 16 a **b** If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?. 16 b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website X Upon request Other (explain in Schedule O) Describe in Schedule 0 whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. See Schedule O State the name, address, and telephone number of the person who possesses the organization's books and records:

Houston TX 77002 713-238-1465

CPA 615 Louisiana St.

	Form 990 (2017)	Houston	Symphony	Society
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74-1157373

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

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

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

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

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

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

					(C)					
(A) Name and Title	(B) Average hours per	thar	n one t s both :	oox, an o	unles fficer truste		n	(D)  Reportable compensation from the organization	(E)  Reportable compensation from related organizations	(F) Estimated amount of other compensation
	week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) Janet Clark	4									
President	0	Χ		Χ				0.	0.	0.
(2) Steven Mach	4									
Imm Past Pres	0	Χ		Χ				0.	0.	0.
(3) Bobby Tudor	_ 4							_		_
Chairman	0	Χ		Χ				0.	0.	0.
(4) Jesse B. Tutor	4							•		•
Chair Audit Cm	0	Χ		Χ			_	0.	0.	0.
(5) Mike S. Stude	4	ļ .,						•	•	•
Chairman Emerit	0	Х		Χ				0.	0.	0.
	4	.,		3,7				0	0	0
Secretary, Dir	0	Х		Χ			_	0.	0.	0.
(7) Brad Corson	4			37				0	0	0
Chair Brd Gov	0	Х		Χ				0.	0.	0.
(8) Justice Brett Busby	4	Х		Х				0.	0.	0.
Chair Art./Orch  (9) Donna Shen	4	Λ		Λ				0.	0.	0.
Chair Comm Ptns	- 4 -	Х		Х				0.	0.	0.
(10) Tracy Dieterich	4	Λ		Λ				0.	0.	<u> </u>
CoChair Comm Pt	- 4 -	Х		Х				0.	0.	0.
(11) Barbara Burger	4	Λ		Λ			_	0.	0.	<u> </u>
Chair Finance	4	Х		Х				0.	0.	0.
(12) Gloria G. Pryzant	4	Λ		Λ			_	0.	0.	<u></u>
Chair Marketing		Х						0.	0.	0.
(13) Viviana Denechaud	4	21					_	0.	0.	
CoChair Develp		Х		Х				0.	0.	0.
(14) Danielle Batchelor	4	-23	$\vdash$	21			1	J •	0.	<u> </u>
Chair Pops Pgm		Х		Х				0.	0.	0.
DAA								٠.	0.	Farm 000 (2017)

Part VII Section A. Officers, Directors, 11	T	ney	Em	•		es,	and	Hignest Con	ipensated Em	1DIO	yees	(conti	пиеа)
	(B)			(0	•								
(A)	Average	(do	not ch	Pos neck	sition more	than	one	(D)	(E)			(F)	
Name and title	hours per		, unles cer and		directo	or/trus	tee)	Reportable compensation from	Reportable compensation from	1		timated int of otl	
	week (list any	우 글	킀	Q	줐	음 프	끙	the organization (W-2/1099-MISC)	related organization (W-2/1099-MISC)	is	com	pensation	
	hours for	ndividual trustee or director		Officer	Key employee	ples	Ĭ	( =)	(,		org	anization d related	
	related organiza	ttor	Jong	¥.	nplc	rt co	4					nization	
	- tions below	) trus	T T		уее	퓛							
	dotted line)	tee	nstitutional trustee			Highest compensated employee							
	,		413			e e							
(15) Paul R Morico	4												
General Counsel	0	X		Χ				0.	(	).			0.
(16) Mary Katherine Campion, Ph.D.	4							0.		, ,			
Chair Pension		X						0.	ſ	).			0.
(17) David Pruner	4	71	H					· ·		<del>, ,  </del>			<u> </u>
Chair Planning		Х		Χ				0.	ſ	).			0.
(18) Manolo Sanchez	4	71		71				0.		, .			<u> </u>
		v						0	c				0
Chair Mkt Comm	0	X	-					0.		).			0.
(19) Billy McCartney	4	37		3.7				0					^
Chair Education	0	X	1	Χ				0.		).			0.
(20) Mary Lynn Marks	4												•
Chair Vol/Evts	0	X		X				0.	C	).			0.
(21) Beth Wolf 4												_	
Pres HS League	0	X		X				0.	C	).			0.
(22) Farida Abjani	2								_				
Governing Dir 0 X X 0. 0.													0.
(23) William Ackerman 2													_
Trustee 0 X 0. 0.											0.		
(24) Mike Adler	2												
Trustee	0	Χ						0.	C	).			0.
(25) Marcia Backus	2												
Governing Dir	0	X					Ļ	0.		).			0.
1 b Sub-total							<b>•</b>	0.		).			0.
c Total from continuation sheets to Part VII, Secti	on A						<b>•</b>	2,124,559.		).		31,6	
d Total (add lines 1b and 1c)							<b>•</b>	2,124,559.		).		31,6	554.
2 Total number of individuals (including but not limited	I to those I	isted	abov	e) v	who	recei	ved	more than \$100,00	0 of reportable co	mper	nsation	า	
from the organization 51													
												Yes	No
3 Did the organization list any former officer, direct	tor, or tru	stee,	, key	em	ploy	/ee,	or h	nighest compensa	ted employee				
on line 1a? If 'Yes,' compléte Schedule J for suc	:h individu	ıal									3		X
4 For any individual listed on line 1a, is the sum o	f reportab	le co	mper	nsa	tion	and	oth	er compensation	from				
the organization and related organizations greate such individual											4	Χ	
											_		
5 Did any person listed on line 1a receive or accrufor services rendered to the organization? If 'Yes	e comper s.' <i>comple</i>	isatio ete So	on tro chedu	om a ule	any <i>J fo</i>	unre <i>r suc</i>	late ch p	ed organization or erson	individual		5		Х
Section B. Independent Contractors	,,						/-						
Complete this table for your five highest compensation from the organization. Report comper	sated ind	epen	dent	COr	ntrac	ctors	tha	t received more the	nan \$100,000 of	oar			
(A)	15411011 101	uic c	aleriu	iai j	ycai	Criui	ng v	(B)		cai.	((	<u>,,</u>	
Name and business add	ress							Description	of services	C	ompe	nsatio	n
Travtours, Inc. 71-703 Highway 111 Ste 2E	Rancho l	Mira	ge,	CA	92	270		Orchestra tou	r		8	78,7	99.
Strike Marketing 906 Rutland Street Housto								Marketing				71,1	
Andres Orozco-Estrada 615 Louisiana Street	,			1,	TX	7700	)2	Conducting				35,7	
5 Star Event Services 1801 Milby St. House				• 1				Event service	s			30,7	
IMG Artists 7 West 54th Street New York								Professional	-			17,6	

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

\$100,000 of compensation from the organization ightharpoonup 39

## **Continuation Sheet for Form 990**

OMB No. 1545-0047

2017

Department of the Treasury Internal Revenue Service

Name of the Organization

Employler Identification number

74-1157373

Houston Symphony Society

Part VII Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Highest Compensated E	mployee	S								
(A)	(B)			(C				(D)	(E)	(F)
Name and Title	Average					hat app		Reportable compensation from	Reportable compensation from	Estimated amount of other
	hours per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
Philip Bahr	2									
Trustee	0	X						0.	0.	0.
Jan Barrow	2									
Governing Dir	0	X						0.	0.	0.
Gary Beauchamp	2									
Governing Dir	0	X						0.	0.	0.
James M Bell	2	ļ								
Trustee	0	X						0.	0.	0.
Devinder Bhatia, M.D.	2									
Trustee	0	X						0.	0.	0.
Anthony Bohnert	2	ļ								
Trustee	0	X						0.	0.	0.
Marie Taylor Bosarge	2	ļ								
Governing Dir	0	X						0.	0.	0.
Nancy Shelton Bratic	2	ļ								
Trustee	0	X						0.	0.	0.
Terry Ann Brown	2	ļ								
Trustee	0	X						0.	0.	0.
Ralph Burch	2									
Governing Dir	0	X						0.	0.	0.
Cheryl Byington	2	1								
Trustee	0	X						0.	0.	0.
Andrew Calder	2							_		_
Governing Dir	0	X						0.	0.	0.
Dougal Cameron	2	ļ								_
Trustee	0	X						0.	0.	0.
John T. Cater	2	ļ								_
Trustee	0	X						0.	0.	0.
Michael H. Clark	2	ļ								_
Governing Dir	0	X						0.	0.	0.
<pre>Evan Collins, M.D., MBA</pre>	2	ļ								_
Trustee	0	X						0.	0.	0.
Andrew Davis, Ph.D.	2	ļ								_
Trustee	0	X						0.	0.	0.
Gene Dewhurst	2	ļ								_
Trustee	2	X						0.	0.	0.
Michael Doherty	2	ļ								_
Governing Dir	0	X						0.	0.	0.
<u>Terry Elizabeth Everett</u>	2									-
Trustee	0	X						0.	0.	0.
Kelli_Cohen_Fein,_M.D	2	ļ ,,								_
Trustee	0	X						0.	0.	0. Form <b>990</b> Cont 2017

### **Continuation Sheet for Form 990**

OMB No. 1545-0047

2017

Department of the Treasury Internal Revenue Service

Name of the Organization

Employler Identification number

74-1157373

Houston Symphony Society

Part VII Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Highest Compensated Er	nployee	S								
(A)	(B)			(C	•			(D)	(E)	(F)
Name and Title	Average hours per week (list any hours for			check Officer	d Key employee	hat employe		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related
	related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee		oloyee	Highest compensated employee				organizations
Jeffrey B. Firestone	2	.,						0	0	0
Trustee	0	Х						0.	0.	0.
Eugene Fong	2	37						0	0	0
Trustee	0 2	X						0.	0.	0.
Craig Fox	. — — — -	v						0.	0.	0
Trustee Julia Anderson Frankel	0 2	X						0.	0.	0.
	0	Х						0.	0.	0
Governing Dir David Frankfort	2	Λ						0.	0.	0.
Governing Dir	0	Х						0.	0.	0.
Ronald G. Franklin	2	Λ						0.	0.	<u></u>
Governing Dir	0	Х						0.	0.	0.
Betsy Garlinger	2	21						0.	0.	<u>.</u>
Governing Dir	0	Х						0.	0.	0.
Stephen Glenn	2	- 21						0.	· ·	<u> </u>
Governing Dir	0	Х						0.	0.	0.
Evan B. Glick	2									
Trustee	0	Х						0.	0.	0.
Alexandra Gottchalk	2									
Trustee	0	Х						0.	0.	0.
Susan Hansen	2									
Governing Dir	0	Х						0.	0.	0.
Eric Haufrect, M.D.	2									
Trustee	0	Χ						0.	0.	0.
Gary L. Hollingsworth, M.D	2									
Trustee	0	X						0.	0.	0.
Brian James	2									
Trustee	0	Х						0.	0.	0.
Rita Justice, Ph.D.	2									
Trustee	0	X						0.	0.	0.
<u>Joan Kaplan</u>	2									
Trustee	0	X						0.	0.	0.
Sippi Khurana, M.D.	2	ļ								
Governing Dir	0	Х						0.	0.	0.
I. Ray Kirk, M.D.	2									
Trustee	0	X						0.	0.	0.
Ulyesse LeGrange	2									•
Trustee Ph. D. D.	0	X						0.	0.	0.
Rochelle Levit, Ph.D.	2	7,7							_	^
Governing Dir	0 2	Х						0.	0.	0.
<u>Carlos J. Lopez</u> Trustee	$\frac{2}{0}$	Х						0.	0.	0.
1143666	ı U	Λ	<u> </u>				<u> </u>	1 0.1		Form <b>990</b> Cont 2017

### **Continuation Sheet for Form 990**

OMB No. 1545-0047

2017

Department of the Treasury Internal Revenue Service

Name of the Organization

Employler Identification number

74-1157373

Houston Symphony Society

Part VII Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Highest Compensated E	mployee	S								
(A)	(B)			(0				(D)	(E)	(F)
Name and Title	Average			•		hat app		Reportable compensation from	Reportable compensation from	Estimated amount of other
	hours per week	Indi)	nsti	Officer	Key employee	emp High	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the
	(list any hours for	rect	utio	Ċ	emp	est o	ner	(W 2/1033 MIGO)	(11 2/1033 111100)	organization and related
	related organiza-	오폴	mal		oloye	com				organizations
	tions below	Individual trustee or director	Institutional trustee		ŏ	pens				
	dotted line)		8			Highest compensated employee				
Cora Sue Mach	2									
Governing Dir	0	Х						0.	0.	0.
Michael Mann, M.D.	2									·
Trustee	0	Χ						0.	0.	0.
Paul M. Mann, M.D.	2									
Governing Dir	0	Х						0.	0.	0.
Rodney Margolis	2									
Governing Dir	0	Χ						0.	0.	0.
Jay Marks	2									
Governing Dir	0	X						0.	0.	0.
David Massin	2									
Governing Dir	0	X						0.	0.	0.
Jack Matzer	2									
Trustee	0	X						0.	0.	0.
Jackie Wolens Mazow	2									
Trustee	0	X						0.	0.	0.
Gene McDavid	2									
Trustee	0	Х						0.	0.	0.
Alexander K. McLanahan	2									
Governing Dir	0	X						0.	0.	0.
<u>Gary Mercer</u>	2	<u> </u>						_	_	
Trustee	0	X						0.	0.	0.
Marilyn Miles	2									
Trustee	0	Х						0.	0.	0.
Janet Moore	2	.,								•
Trustee	0	Х						0.	0.	0.
Judson Morrison	2	.,							0	•
Trustee	0	X						0.	0.	0.
Bobbie Newman	2	.,						0	0	0
Trustee	2	X						0.	0.	0.
Scott Nyquist		v						0.	0.	0
Trustee Kevin O'Gorman	2	Х						0.	0.	0.
	$-\frac{2}{0}$	Х						0.	0.	0
Governing Dir Robert Orr	2	Λ						0.	0.	0.
Governing Dir	$-\frac{2}{0}$	Х						0.	0.	0.
Edward Osterberg Jr.	2	Λ						0.	0.	<u> </u>
Trustee	$-\frac{2}{0}$	Х						0.	0.	0.
Robert Peiser	2	Λ						0.	0.	0.
Trustee	$-\frac{2}{0}$	Х						0.	0.	0.
Cully Platt	2	Λ						0.	0.	<u> </u>
Governing Dir	$-\frac{2}{0}$	Х						0.	0.	0.
governing Dir	U	Λ						U.)	0.	<u> </u>

## **Continuation Sheet for Form 990**

OMB No. 1545-0047

2017

Department of the Treasury Internal Revenue Service

Name of the Organization

Employler Identification number

74-1157373

Houston Symphony Society

Part VII Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Highest Compensated E	mployee	S								
(A)	(B)			(0	;)			(D)	(E)	(F)
Name and Title	Average		tion (	check	all t	hat app		Reportable compensation from	Reportable compensation from	Estimated
	hours per week (list any hours for	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related
	related organiza- tions	or trus	nal tr		loyee	ompo				organizations
	below dotted line)	stee	ustee		,,	ensatec				
Richard Rabinow	2									_
Trustee	0	Χ						0.	0.	0.
Ron Rand	2									
Trustee	0	X						0.	0.	0.
Roman Reed	2	_								
Trustee	0	X						0.	0.	0.
Gabriel Rio	2	_								
Trustee	0	X						0.	0.	0.
Richard Robbins, M.D.	2									
Trustee	0	Χ						0.	0.	0.
J. Hugh Roff Jr.	2									
Trustee	0	Χ						0.	0.	0.
John Rydman	2									
Governing Dir	0	X						0.	0.	0.
Miwa Sakashita	2									
Trustee	0	X						0.	0.	0.
Ed Schneider	2									
Trustee	0	X						0.	0.	0.
Helen Shaffer	2									
Governing Dir	0	X						0.	0.	0.
Michael E. Shannon	2									
Trustee	0	X						0.	0.	0.
Jerry Simon	2									
Trustee	2	X						0.	0.	0.
Robert Sloan, Ph.D.	2									
Trustee	0	X						0.	0.	0.
Jim R. Smith	2									
Governing Dir	0	X						0.	0.	0.
Miles O. Smith	2									
Governing Dir	0	X						0.	0.	0.
Tad Smith	2									
Trustee	0	X						0.	0.	0.
David Stanard	2									
Trustee	0	X						0.	0.	0.
Brian Thomas	2									
Trustee	0	X						0.	0.	0.
L. Proctor (Terry) Thomas	2	_								
Trustee	0	Х						0.	0.	0.
Shirley W. Toomim	2									
Trustee	0	Х						0.	0.	0.
William J. Toomey II	2									
Governing Dir	2	X						0.	0.	0.

### **Continuation Sheet for Form 990**

OMB No. 1545-0047

2017

Department of the Treasury Internal Revenue Service

Employler Identification number

74-1157373

# Houston Symphony Society Part VII Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Highest Compensated Employees										
(A)	(B)	_	(C) Position (check all that apply)		(D)	(E)	(F)			
Name and Title	Average hours per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director		Officer	Key employee	a Highest compensated employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
Andrew Truscott	2									
Trustee	0	X						0.	0.	0.
Betty Tutor	2							_		_
Governing Dir	0	X						0.	0.	0.
Judith Vincent	2							_		_
Gov Director	0	X						0.	0.	0.
Art Vivar	2									•
Trustee	0	X						0.	0.	0.
Margaret Waisman, M.D.	2	.,							0	0
Trustee	0	X						0.	0.	0.
Fredric Weber	2							0	0	0
Trustee	2 2	Х						0.	0.	0.
Mrs. S. Conrad Weil	$-\frac{2}{0}$	Х						0.	0.	0.
Trustee Robert Weiner	2	Λ						0.	0.	0.
Trustee	$-\frac{2}{0}$	Х						0.	0.	0.
Vicki West	2	Λ						0.	0.	0.
Trustee	$-\frac{2}{0}$	Х						0.	0.	0.
Margaret Alkek Williams	2	71						0.	0.	
Governing Dir	0	Х						0.	0.	0.
Steven J. Williams	2							0.	0.	<u> </u>
Trustee	0	Х						0.	0.	0.
Ed Wulfe	2									
Trustee	0	Х						0.	0.	0.
Scott Wulfe	2									
Governing Dir	0	Х						0.	0.	0.
David Wuthrich	2									_
Governing Dir	0	Х						0.	0.	0.
Ellen A. Yarrell	2									
Trustee	0	X						0.	0.	0.
Robert Yekovich	2									
Trustee	0	X						0.	0.	0.
Frank Yonish	2									
Trustee	0	X						0.	0.	0.
Mark Hanson	40									
ED/CEO to 9/17	0			Χ				341,687.	0.	19,218.
Danny Granados	_ 40 _									
CFO to 1/18	0			Χ				164,482.	0.	11,494.
Amanda Dinitz	$-\frac{40}{0}$	}		ι,				100 040		4 04 5
Interim Co-ED	0			Χ				108,048.	0.	1,817.
John Mangum	$-\frac{40}{0}$	}		٦,				_		^
CEO fr 4/18	0			X				0.	0.	0. Form <b>990</b> Cont 2017

#### **Continuation Sheet for Form 990**

OMB No. 1545-0047

2017

Department of the Treasury Internal Revenue Service

Houston Symphony Society

Employler Identification number

74-1157373

Part VII Continuation: Officers, Directors, Trustees, Key Employees, and **Highest Compensated Employees** (C) (D) (F) (E) Position (check all that apply) Reportable compensation from Reportable compensation from Estimated amount of other Name and Title Average Individual to Average hours per week (list any hours for related organiza-tions Officer employee Highest compensated nstitutional trustee -ormer compensation from the organization the organization (W-2/1099-MISC) related organizations (W-2/1099-MISC) employee and related organizations l trustee below dotted line) Elizabeth Condic 40 CFO fr 11/17 0 0 18,323. 4,250. David Chambers 40 Ch Dev Off to 10/17 0 227,455. 0 Χ 17,275. Vicky Dominguez 40 C00 0 161,212. 0 11,465. 40 Trazanna Moreno Chief Marketing Off 0 Χ 170,737. 0 26,368. Brinton Smith 40 0 Musician Χ 184,853. 0. 30,873. Jonathan Fischer 40 Musician 0 Χ 185,274. 0. 15,685. Eric Halen 40 Musician 0 Χ 187,579. 0 22,456. William Ver Meulen 40 Musician 0 Χ 172,991. 0. 34,436. 40 Mark Nuccio Musician 0 Χ 201,918. 0. 36,317.

		Check if Schedule O contains a response or note to an	y line in this Part V	III		
			(A) Total revenue	<b>(B)</b> Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Program Service Revenue and Other Similar Amounts	b c d e f g h c d d e d e	Federated campaigns	18,447,168. 6,510,373. 4,372,110.	6,510,373. 4,372,110.		
P.	g	Total. Add lines 2a-2f ▶	10,882,483.			
	3 4 5	Investment income (including dividends, interest and other similar amounts)	42,666.			42,666.
	6a b c	Royalties  (i) Real  (ii) Personal  Gross rents  Less: rental expenses  Rental income or (loss)				
	7 a	Ret rental income or (loss)  Gross amount from sales of assets other than inventory  (i) Securities (ii) Other  2,717,334.				
	С	Less: cost or other basis and sales expenses	8,004.			8,004.
Other Revenue		Gross income from fundraising events (not including. \$ 1,367,456. of contributions reported on line 1c).  See Part IV, line 18				0,001
돌	С	Net income or (loss) from fundraising events ▶	-204,456.			-204,456.
		Gross income from gaming activities. See Part IV, line 19				
		Less: direct expenses				
	10 a b c	Gross sales of inventory, less returns and allowances				
	11 a b					
	C					
	d	All other revenue				
		Total. Add lines 11a-11d				
	12	Total revenue. See instructions	29,175,865.	10,882,483.	0.	-153,786.

#### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Do i	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.		охропосо	gonoral expenses	охроносо
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign 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	1,033,676.	857,290.	78,210.	98,176.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	15,596,661.	12,935,251.	1,180,077.	1,481,333.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,124,589.	932,689.	85,089.	106,811.
9	Other employee benefits	2,974,513.	2,413,032.	314,992.	246,489.
10	Payroll taxes	1,180,589.	979,134.	89,326.	112,129.
11	Fees for services (non-employees):	1,100,000.	3.3,231	03/0201	
á	Management				
	Legal	49,587.		49,587.	
	: Accounting	80,725.		80,725.	
	<b>I</b> Lobbying	00/:201		307.201	
•	Professional fundraising services. See Part IV, line 17	170,953.			170,953.
f	Investment management fees	,			.,
g	Other. (If line 11g amount exceeds 10% of line 25, column	1,543,725.	1,148,954.	383,855.	10,916.
12	(A) amount, list line 11g expenses on Schedule 0.) Advertising and promotion	927,759.	922,941.	683.	4,135.
13	Office expenses	694,831.	446,433.	76,156.	172,242.
14	Information technology	295,853.	6,638.	289,215.	112,242.
15	Royalties	233,033.	0,050.	203,213.	
16	Occupancy	1,033,688.	605,410.	411,445.	16,833.
17	Travel	378,031.	316,729.	44,393.	16,909.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	370,7021	010/123.	11,0301	10,303.
19	Conferences, conventions, and meetings	193,108.	25,683.	25,421.	142,004.
20	Interest	395,497.	,	395,497.	,
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	241,398.	182,774.	58,624.	
	Insurance	169,374.		169,374.	
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.)				
ā	Concert production expenses	3,333,870.	3,333,870.		
	Stage expense - supplies/equip	2,320,547.	2,320,547.		
	Event expenses	358,796.	7,738.		351,058.
(	Other expenses	6,894.	5,595.		1,299.
•	All other expenses				
25	<b>Total functional expenses.</b> Add lines 1 through 24e	34,104,664.	27,440,708.	3,732,669.	2,931,287.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.  Check here ► ☐ if following SOP 98-2 (ASC 958-720).				

		Check if Schedule O contains a response or note to	any line	e in this Part X		<u>.</u>	
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash – non-interest-bearing			571,217.	1	158,220.
	2	Savings and temporary cash investments			·	2	<u>.                                      </u>
	3	Pledges and grants receivable, net			9,594,414.	3	7,425,630.
	4	Accounts receivable, net		218,956.	4	704,177.	
	5	Loans and other receivables from current and former trustees, key employees, and highest compensated en	mplovee:	s. Complete			
		Part II of Schedule L			21,255.	5	9,585.
	6	Loans and other receivables from other disqualified posection 4958(f)(1)), persons described in section 4958(c)(3) employers and sponsoring organizations of section 501(c) beneficiary organizations (see instructions). Complete		6			
ts	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
Ä	9	Prepaid expenses and deferred charges			1,060,603.	9	1,025,861.
	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10 a	3,268,693.			
	b	Less: accumulated depreciation	10 b	2,191,086.	1,032,013.	10 c	1,077,607.
	11	Investments – publicly traded securities			, ,	11	, ,
	12	Investments – other securities. See Part IV, line 11				12	
	13	Investments - program-related. See Part IV, line 11.		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11			15		
	16	Total assets. Add lines 1 through 15 (must equal line	34)		12,498,458.	16	10,401,080.
	17	Accounts payable and accrued expenses			2,949,622.	17	2,443,375.
	18	Grants payable		L		18	
	19	Deferred revenue		_	3,948,698.	19	4,064,377.
(A	20	Tax-exempt bond liabilities		_		20	
tie	21	Escrow or custodial account liability. Complete Part I		-		21	
Liabilities	22	Loans and other payables to current and former office key employees, highest compensated employees, and Complete Part II of Schedule L	d disqual	ified persons.		22	
	23	Secured mortgages and notes payable to unrelated th	ird parti	es	10,932,854.	23	15,187,695.
	24	Unsecured notes and loans payable to unrelated third	parties.		, ,	24	, , , , , , , , , , , , , , , , , , , ,
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com			7,847,483.	25	6,206,864.
	26	Total liabilities. Add lines 17 through 25			25,678,657.	26	27,902,311.
Ø		Organizations that follow SFAS 117 (ASC 958), check he	re ►	X and complete			
8		lines 27 through 29, and lines 33 and 34.					
<u>a</u>	27	Unrestricted net assets		<u> </u>	-18,048,905.	27	-20,071,988.
Ba	28	Temporarily restricted net assets.			4,868,706.	28	2,570,757.
nd	29	Permanently restricted net assets				29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), ch and complete lines 30 through 34.	ieck here				
ş	30	Capital stock or trust principal, or current funds	apital stock or trust principal, or current funds				
Š	31	Paid-in or capital surplus, or land, building, or equipment	nent fund	l		31	
As	32	Retained earnings, endowment, accumulated income,	or other	funds		32	
let	33	Total net assets or fund balances		<u> </u>	-13,180,199.	33	-17,501,231.
~	34	Total liabilities and net assets/fund balances			12,498,458.	34	10,401,080.

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Pai	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI.				Х
1	Total revenue (must equal Part VIII, column (A), line 12).		29,1	.75,8	365.
2	Total expenses (must equal Part IX, column (A), line 25).	2	34,1	.04,	664.
3	Revenue less expenses. Subtract line 2 from line 1		-4,9	28,	799.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	-13,1	.80,	199.
5	Net unrealized gains (losses) on investments.				
6	Donated services and use of facilities				
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O). See Schedule O	9	6	507,	<u>767.</u>
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	-17,5	01.	231.
Pai	rt XII Financial Statements and Reporting	!!			
	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 O.				
2 8	<b>a</b> 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 review separate basis, consolidated basis, or both:  Separate basis  Both consolidated and separate basis	ed on a			
ı	<b>b</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 separ basis, consolidated basis, or both:	ate			
	Separate basis X Consolidated basis Both consolidated and separate basis				
(	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit review, or compilation of its financial statements and selection of an independent accountant?	, 	2с	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.				
3 8	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		За		Х
I	<b>b</b> If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
BAA					(2017)

TEEA0112L 08/08/17

#### SCHEDULE 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.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2017

Open to Public Inspection

Name of the organization Employer identification number Houston Symphony Society 74-1157373 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 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 government or governmental unit described in section 170(b)(1)(A)(v). 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after 10 June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in 12 lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.** Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations ..... **q** Provide the following information about the supported organization(s). (i) Name of supported organization (iii) Type of organization (described on lines 1-10 above (see instructions)) (v) Amount of monetary (iv) Is the organization listed (vi) Amount of other support (see instructions) support (see instructions) in your governing document? No (A) (B) (C) (D) (E) Total

#### Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
Cale begi	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2013	<b>(b)</b> 2014	<b>(c)</b> 2015	<b>(d)</b> 2016	<b>(e)</b> 2017	<b>(f)</b> Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	17460596.	22062498.	18418761.	21024630.	18447168.	97,413,653.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
<b>4</b> 5	<b>Total.</b> Add lines 1 through 3 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)	17460596.	22062498.	18418761.	21024630.	18447168.	97,413,653. 30,599,874.
6	<b>Public support.</b> Subtract line 5 from line 4						66,813,779.
Sec	tion B. Total Support						
Cale begi	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2013	<b>(b)</b> 2014	<b>(c)</b> 2015	<b>(d)</b> 2016	<b>(e)</b> 2017	(f) Total
7	Amounts from line 4	17460596.	22062498.	18418761.	21024630.	18447168.	97,413,653.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	19,929.	102,367.	38,618.		42,666.	203,580.
9	Net income from unrelated business activities, whether or not the business is regularly carried on	20,020		20,020		,	0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).						0.
	Total support. Add lines 7 through 10						97,617,233.
12	Gross receipts from related activ	rities, etc. (see ins	structions)				53,181,912.
13	<b>First five years.</b> If the Form 990 is organization, check this box and						▶ □
Sec	tion C. Computation of Pul	blic Support P	ercentage				
14	Public support percentage for 20						68.44%
15	Public support percentage from 2						70.59 %
16a	<b>33-1/3% support test—2017.</b> If the and <b>stop here.</b> The organization						
b	<b>33-1/3% support test—2016.</b> If the and <b>stop here.</b> The organization	e organization did qualifies as a pul	I not check a box olicly supported o	on line 13 or 16a rganization	a, and line 15 is 33	3-1/3% or more, o	check this box
17a	<b>10%-facts-and-circumstances te</b> or more, and if the organization the organization meets the 'facts	meets the 'facts-a	ind-circumstances	s' test, check this	box and stop her	e. Explain in Par	t VI how
	<b>10%-facts-and-circumstances te</b> or more, and if the organization organization meets the 'facts-and the organization meets the organization meets the organization meets the 'facts-and the organization meets the 'facts-and the organization organization meets the 'facts-and the organization organization meets the 'facts-and the organization meets the organization meets the organization meets the 'facts-and the organization meets the organization meet	meets the 'facts-a d-circumstances' t	and-circumstances test. The organiza	s' test, check this ation qualifies as	box and <b>stop her</b> a publicly support	<b>re.</b> Explain in Par ed organization.	t VI how the▶
18	Private foundation. If the organiz	zation did not che	ck a box on line 1	13, 16a, 16b, 17a	, or 1/b, check th	is box and see in:	structions •

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support		product compress :	<u> </u>				
	lar year (or fiscal year beginning in)	<b>(a)</b> 2013	<b>(b)</b> 2014	<b>(c)</b> 2015	<b>(d)</b> 2016	<b>(e)</b> 2017	(f) Total	
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	(a) 2010	(5) 2514	(0) 2010	(a) 2310	(6) 2017	(i) Total	
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.							
3	Gross receipts from activities that are not an unrelated trade or business under section 513.							
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.							
5	The value of services or facilities furnished by a governmental unit to the organization without charge							
	<b>Total.</b> Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons							
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.							
С	Add lines 7a and 7b							
8	Public support. (Subtract line 7c from line 6.)							
	tion B. Total Support				T	T		
	dar year (or fiscal year beginning in)	<b>(a)</b> 2013	<b>(b)</b> 2014	<b>(c)</b> 2015	<b>(d)</b> 2016	<b>(e)</b> 2017	<b>(f)</b> Total	
	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.							
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
	Add lines 10a and 10b.  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on							
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)							
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)							
14	First five years. If the Form 990 organization, check this box and							
Sec	tion C. Computation of Pul	blic Support F	Percentage					
15	Public support percentage for 20	17 (line 8, colum	n (f) divided by lin	e 13, column (f)	)	15	%	
	Public support percentage from 2				<u></u>	16	%	
Sec	tion D. Computation of Inv							
17		•	• • •	-			90	
18	Investment income percentage f	rom <b>2016</b> Schedu	ıle A, Part III, line	17		18	%	
19a	<b>33-1/3% support tests—2017.</b> If t is not more than 33-1/3%, check	the organization of this box and <b>sto</b>	did not check the b <b>p here.</b> The organ	ox on line 14, ar ization qualifies	nd line 15 is more as a publicly supp	than 33-1/3%, and orted organization	I line 17	
	is not more than 33-1/3%, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization							

#### Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents?  If 'No,' describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe			
	the designation. If historic and continuing relationship, explain.	1		
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 <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3a	a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below.	3a		
k	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 <b>Part VI</b> 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 <b>Part VI</b> what controls the organization put in place to ensure such use.	3с		
<b>4</b> a	Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		
t	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	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 <b>Part VI</b> 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	a 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 <b>Part VI</b> , 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		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
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? <i>If</i> 'Yes,' provide detail in <b>Part VI</b> .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).	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 or 990-EZ).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))?  If 'Yes,' provide detail in <b>Part VI</b> .	9a		
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 <b>Part VI</b> .	9b		
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 <b>Part VI</b> .	9с		
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)? If 'Yes,' answer 10b below.	10a		
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.)	10b		

Part	t IV	Supporting Organizations (continued)			
-11	المماا	be exemination accorded a cift or contribution from any of the following mayons 2		Yes	No
		he organization accepted a gift or contribution from any of the following persons?  son who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			
-	gover	rning body of a supported organization?	11a		
b	A fan	nily member of a person described in (a) above?	11b		
		% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.	11c		
Sect	tion I	B. Type I Supporting Organizations			
1	Did th	e directors, trustees, or membership of one or more supported organizations have the power to regularly appoint		Yes	No
'	or ele <b>Part</b> I If the direct	ct at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in <b>VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. organization had more than one supported organization, describe how the powers to appoint and/or remove tors or trustees were allocated among the supported organizations and what conditions or restrictions, if any,			
•		ed to such powers during the tax year.	1		
2	that o	ne organization operate for the benefit of any supported organization other than the supported organization(s) operated, supervised, or controlled the supporting organization? If 'Yes,' explain in <b>Part VI</b> how providing such fit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the orting organization.	2		
Sect	tion (	C. Type II Supporting Organizations			
				Yes	No
1	of eac	a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees ch of the organization's supported organization(s)? If 'No,' describe in <b>Part VI</b> how control or management of the orting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Sect	tion I	D. All Type III Supporting Organizations			
				Yes	No
1	organ	ne organization provide to each of its supported organizations, by the last day of the fifth month of the nization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organ	nization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were organ	any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported nization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in <b>Part VI</b> how rganization maintained a close and continuous working relationship with the supported organization(s).	2		
	trie oi	rganization maintained a close and continuous working relationship with the supported organization(s).			
3	voice	ason of the relationship described in (2), did the organization's supported organizations have a significant in the organization's investment policies and in directing the use of the organization's income or assets at nes during the tax year? If 'Yes,' describe in <b>Part VI</b> the role the organization's supported organizations played			
		s regard.	3		
Sect	tion I	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 year (see instructions).			
а	Т	he organization satisfied the Activities Test. Complete line 2 below.			
b	Т	he organization is the parent of each of its supported organizations. Complete line 3 below.			
С	Т	he organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	ารtruc	tions).	
2	Activi	ties Test. Answer (a) and (b) below.		Yes	No
а	suppo organ respo	substantially all of the organization's activities during the tax year directly further the exempt purposes of the organization(s) to which the organization was responsive? If 'Yes,' then in <b>Part VI identify those supported</b> **nizations and explain how these activities directly furthered their exempt purposes, how the organization was consive to those supported organizations, and how the organization determined that these activities constituted			
		antially all of its activities.	2a		
b	the or	ne activities described in (a) constitute activities that, but for the organization's involvement, one or more of rganization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for rganization's position that its supported organization(s) would have engaged in these activities but for the			
	organ	nization's involvement.	2b		
3	Parer	nt of Supported Organizations. Answer (a) and (b) below.			
а	Did the each	ne organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of of the supported organizations? <i>Provide details in Part VI.</i>	3a		
b		be organization exercise a substantial degree of direction over the policies, programs, and activities of each of its orted organizations? If 'Yes,' describe in <b>Part VI</b> the role played by the organization in this regard.	3b		

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizat	ions	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trus instructions. All other Type III non-functionally integrated supporting organization	t on No	ov. 20, 1970 (explain ir st complete Sections A	n Part VI). <b>See</b> through E.
Sec	tion 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		
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 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		
Sec	tion 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):			
ā	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	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		
Sec	tion 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	<b>Distributable Amount.</b> 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-functionally inte (see instructions).	grated	Type III supporting or	ganization

Schedule A (Form 990 or 990-EZ) 2017

10 Line 8 amount divided by line 9 amount

Pai	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)	
Sec	tion D – Distributions	Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
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	<b>Total annual distributions.</b> Add lines 1 through 6.	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions.	
9	Distributable amount for 2017 from Section C, line 6	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required — explain in Part VI). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2017			
a			
<b>b</b> From 2013			
<b>c</b> From 2014			
<b>d</b> From 2015			
<b>e</b> From 2016			
f Total of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			
i Carryover from 2012 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2017 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
<b>b</b> Applied to 2017 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
<b>6</b> Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2018. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2013			
<b>b</b> Excess from 2014			
c Excess from 2015			
d Excess from 2016			
e Excess from 2017			
PAA		Schodulo A (Fo	rm 990 or 990 EZ) 2017

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Schedule A (Form 990 or 990-EZ) 2017

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, 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; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.) Part VI

#### Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

#### PUBLIC DISCLOSURE COPY

#### **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2017

Employer identification number

Houston Symphony Society		74-1157373
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)( 3 ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a	orivate foundation
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a priva	ate foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by the <b>General</b>	Rule or a Special Rule.	
<b>Note.</b> Only a section 501(c)(7), (8), or (10) orga	inization can check boxes for both the General Rule and a S	pecial Rule. See instructions.
General Rule		
For an organization filing Form 990, 990-EZ property) from any one contributor. Complete	, or 990-PF that received, during the year, contributions tota te Parts I and II. See instructions for determining a contribut	ling \$5,000 or more (in money or or's total contributions.
Special Rules		
under sections 509(a)(1) and 170(b)(1)(A)(vi).	1(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% supp that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 1 ne year, total contributions of the greater of (1) \$5,000 or (2) 0-EZ, line 1. Complete Parts I and II.	6a, or 16b, and that
during the year, total contributions of more	1(c)(7), (8), or (10) filing Form 990 or 990-EZ that received f than \$1,000 <i>exclusively</i> for religious, charitable, scientific, lit children or animals. Complete Parts I, II, and III.	rom any one contributor, erary, or educational
during the year, contributions exclusively for \$1,000. If this box is checked, enter here the charitable, etc., purpose. Don't complete an	1(c)(7), (8), or (10) filing Form 990 or 990-EZ that received for religious, charitable, etc., purposes, but no such contribution e total contributions that were received during the year for a sy of the parts unless the <b>General Rule</b> applies to this organible, etc., contributions totaling \$5,000 or more during the year	ons totaled more than n <i>exclusively</i> religious, zation because
990-PF), but it <b>must</b> answer 'No' on Part IV, lin	he General Rule and/or the Special Rules doesn't file Sched e 2, of its Form 990; or check the box on line H of its Form 9 filing requirements of Schedule B (Form 990, 990-EZ, or 990	990-EZ or on its Form 990-PF,

BAA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Page

1 of

2 of Part I

Houston Symphony Society

Employer identification number

74-1157373

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is	needed.
---	---------

(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$675,000.	Person X  Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ <u>1,000,000</u> .	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$2,217,286.	Person X Payroll  Noncash X  (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	 	\$4,071,112.	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	 	\$836,248.	Person X  Payroll  Noncash   (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>6</u>		\$521,820.	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)

Page

2 of

2 of Part I

Name of organization
Houston Symphony Society

Employer identification number

74-1157373

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Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space	is needed.	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ <u>547,350.</u>	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$ <u>505,000.</u>	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$ <u>570,000.</u>	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10_		\$4 <u>00,000</u> .	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Page

1 to

1 of Part II

Houston Symphony Society

Name of organization

74-1157373

Employer identification number

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
3	Securities - Publicly traded		
		\$ <u>2,039,936.</u>	<u>6/27/17</u>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		_	
		-	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$ 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		- ] - ]\$ - ]	
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Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

1 to

of Part III

Name of organization
Houston Symphony Society

Employer identification number

74-1157373

Part III	Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.)				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
	N/A				
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Rela	ationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
	(e) Transfer of gift Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
	(e) Transferee's name, address, and ZIP + 4		Rela	itionship of transferor to transferee	
(a) No. from	(b) Purpose of gift	(c) Use of gift		(d)  Description of how gift is held	
Part I				· · · · · · · · · · · · · · · · · · ·	
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Rela	ationship of transferor to transferee	
	<u>l</u>			L L D (E	

#### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Inspection

Open to Public

Name of the organization

Houston Symphony Society 74-1157373 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the 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..... 1 Aggregate value of contributions to (during year). . . . . . Aggregate value of grants from (during year)...... Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds No are the organization's property, subject to the organization's exclusive legal control?... Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring No impermissible private benefit? Yes **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 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 a Total number of conservation easements..... 2 a **b** Total acreage restricted by conservation easements. 2 b c Number of conservation easements on a certified historic structure included in (a)..... 2 c d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► 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, No 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 7 ▶\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?..... 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 conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 8. 1 a 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: a Revenue included on Form 990, Part VIII, line 1..... **b** Assets included in Form 990, Part X.....

Part III Organizations Maintai	ning Collections	of Art, Histo	rical Treasures,	or Other Similar Ass	sets (continued)
3 Using the organization's acquisition items (check all that apply):	, accession, and other	records, check ar	ny of the following that	are a significant use of its	collection
a Public exhibition		<b>d</b> Loan o	or exchange program	S	
<b>b</b> Scholarly research		e Other			
c Preservation for future gener	ations				
4 Provide a description of the organiz Part XIII.	ation's collections and	explain how they	further the organization	on's exempt purpose in	
5 During the year, did the organiza to be sold to raise funds rather the					Yes No
Escrow and Custodia   line 9, or reported an a				answered 'Yes' on Fo	orm 990, Part IV,
<b>1 a</b> Is the organization an agent, trus	tee, custodian or oth	ner intermediary	for contributions or o	ther assets not included	
on Form 990, Part X?					Yes No
<b>b</b> If 'Yes,' explain the arrangement	in Part XIII and com	plete the following	ng table:		
					Amount
c Beginning balance					
<b>d</b> Additions during the year					
e Distributions during the year				1 e	
<b>f</b> Ending balance					
2 a Did the organization include an a					
<b>b</b> If 'Yes,' explain the arrangement	in Part XIII. Check h	nere if the explan	ation has been provi	ded on Part XIII	
Part V Endowment Funds. C	omplete if the or	ganization an	<u>swered 'Yes' on l</u>		
	(a) Current year	(b) Prior year			(e) Four years back
1 a Beginning of year balance	74,610,515.	72,640,9	80. 75,501,1	51. 73,729,642	
<b>b</b> Contributions	1,339,204.	553,8	44. 4,109,8	01. 3,711,580	. 76,808.
<b>c</b> Net investment earnings, gains,					
and losses	5,996,874.	6,524,7	972,437,5	39. 2,331,320	. 6,500,460.
<b>d</b> Grants or scholarships					
e Other expenditures for facilities and programs	4,071,112.	5,109,1	06. 4,532,4	33. 4,271,391	. 4,124,316.
f Administrative expenses	4,071,112.	3,103,1	4,332,4	4,271,331	1,124,510.
g End of year balance	77,875,481.	74,610,5	15. 72,640,9	80. 75,501,151	. 73,729,642.
2 Provide the estimated percentage					15,125,042.
<b>a</b> Board designated or quasi-endowm	-	%	o 19, 00141111 (4)) 1101		
<b>b</b> Permanent endowment ►	99.998	~			
c Temporarily restricted endowmer		1 %			
The percentages on lines 2a, 2b, ar					
<b>3a</b> Are there endowment funds not in to organization by:	he possession of the o	organization that a	re held and administer	red for the	Yes No
(i) unrelated organizations					3a(i) X
(ii) related organizations					3a(ii) X
<b>b</b> If 'Yes' on line 3a(ii), are the rela					
4 Describe in Part XIII the intended	-				. Ju A
Part VI Land, Buildings, and		ation's endowine	in lands. See Fa	IIL VIII	
Complete if the organi		'Yes' on Forn	n 990, Part IV, Iir	ne 11a. See Form 99	90, Part X, line 10.
Description of property	<b>(a)</b> Cos (ir	t or other basis evestment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1 a</b> Land			16,915	•	16,915.
<b>b</b> Buildings			•		•
c Leasehold improvements			284,878	. 276,294.	8,584.
<b>d</b> Equipment			2,838,225		1,013,882.
<b>e</b> Other			128,675		38,226.
Total. Add lines 1a through 1e. (Column	n (d) must equal Fo	rm 990, Part X, c			1,077,607.
		-			

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Schedule **D** (Form 990) 2017

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Part VII	Investments — Other Securities.	N/ 1 5 000	N/A	. 10
	•		D, Part IV, line 11b. See Form 990, Part X, I	
	cription of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value	
` '	cial derivativesy-held equity interests			
(3) Other	, , ,			
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
<u>(H)</u>				
<u>(l)</u>				
	nn (b) must equal Form 990, Part X, column (B) line 12.)		37 / 3	
Part VIII	Investments – Program Related. Complete if the organization answered	'Yes' on Form 990	N/A ), Part IV, line 11c. See Form 990, Part X, I	ine 13
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)	mn (b) must equal Form 990, Part X, column (B) line 13.) •			
Part IX	Other Assets.	N/A		
T WITE IN	Complete if the organization answered	'Yes' on Form 990	), Part IV, line 11d. See Form 990, Part X, I	
/1\	<b>(a)</b> Des	scription	(b) Book va	lue
(1)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(10)				
	olumn (b) must equal Form 990, Part X, column (b	3) line 15.)	<b>&gt;</b>	
Part X	Other Liabilities.			
	Complete if the organization answered 'Yes' on F		1e or 11f. See Form 990, Part X, line 25	
	(a) Description of liability	(b) Book value		
	eral income taxes	C 064 77	77	
	rued pension liability to affiliated organization	6,064,77 142,08	7	
(4)	e to allillated organization	142,00	111.	
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
<del></del>	nn (b) must equal Form 990, Part X, column (B) line 25.)	6,206,86	34	
			nancial statements that reports the organization's liability for uncertai	n
		=	ly	

TEEA3303L 08/10/17

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.  1 Total revenue, gains, and other support per audited financial statements.  2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:  a Net unrealized gains (losses) on investments.  b Donated services and use of facilities.  c Recoveries of prior year grants.  2 b  2 c	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:  a Net unrealized gains (losses) on investments.  b Donated services and use of facilities.  c Recoveries of prior year grants.  2 b  2 c	
a Net unrealized gains (losses) on investments.  b Donated services and use of facilities.  c Recoveries of prior year grants.  2 a  2 b  2 c	
b Donated services and use of facilities	
c Recoveries of prior year grants	
d Other (Describe in Part XIII.)	
e Add lines 2a through 2d	
3 Subtract line 2e from line 1	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	
a Investment expenses not included on Form 990, Part VIII, line 7b	
b Other (Describe in Part XIII.)	
c Add lines 4a and 4b	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. N/A	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	
1 Total expenses and losses per audited financial statements	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	
a Donated services and use of facilities	
b Prior year adjustments	
c Other losses	
d Other (Describe in Part XIII.)	
e Add lines 2a through 2d	
3 Subtract line 2e from line 1	
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	
a Investment expenses not included on Form 990, Part VIII, line 7b	
b Other (Describe in Part XIII.)	
c Add lines 4a and 4b.       4c         5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.).       5	—

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part XI, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

#### Part V, Line 4 - Intended Uses Of Endowment Fund

Houston Symphony Endowment (the Endowment) was established to support the operations of the Houston Symphony Society. The Endowment holds contributed funds in perpetuity, invests those funds, and makes contributions from time to time to the Society. Such contributions must meet the stated restrictions of donors as well as the current policies of the Endowment. The Endowment is governed by a Board of Directors who are elected by the officers of the Board of Directors of the Society.

BAA Schedule **D** (Form 990) 2017

#### SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

#### Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered 'Yes' on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for the latest instructions.

OMB No. 1545-0047

2017

Open to Public Inspection

Employer identification number

74-1157373 Houston Symphony Society **Fundraising Activities.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. X Mail solicitations e X Solicitation of non-government grants X Solicitation of government grants Internet and email solicitations Phone solicitations Special fundraising events X In-person solicitations X Yes **b** If 'Yes,' list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (vi) Amount paid to (i) Name and address of individual (iii) Did fundraiser (iv) Gross receipts (or retained by) (ii) Activity (or retained by) or entity (fundraiser) have custody or control of contributions? from activity fundraiser listed in organization column (i) DCM Yes No 330 W 38th St STE 207 Χ 165,165 New York NY 10018 Telefundng Aria Comm. Corp 717 West St Germain St. St. Cloud MN 56301 Χ 10,515 5,788 4,727. Telefundng 3 4 5 6 7 9 10 Total. 10,515. 4,727. List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered 'Yes' on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

			(a) Event #1	<b>(b)</b> Event #2	(c) Other events	(d) Total events (add column (a)
ь			Ball	Wine Dinner	1	through column (c)
E V			(event type)	(event type)	(total number)	
REVENUE	1	Gross receipts	1,379,251.	684,872.	54,043.	2,118,166.
Ł	2	Less: Contributions	916,187.	413,596.	37,673.	1,367,456.
	3	Gross income (line 1 minus line 2)	463,064.	271,276.	16,370.	750,710.
	4	Cash prizes				
D	5	Noncash prizes				
I R E C T	6	Rent/facility costs		4,291.		4,291.
	7	Food and beverages	169,093.	101,037.	12,775.	282,905.
X P F	8	Entertainment	34,591.	718.	1,175.	36,484.
EXPERSES	9	Other direct expenses	452,792.	169,246.	9,448.	631,486.
S	10 11	<b>&gt;</b>	955,166. -204,456.			
Par	oorted more than					
. u.		\$15,000 on Form 990-EZ, line 6a.	ittori arisworda i es			sorted more than
REVENUE			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
Ü E	1	Gross revenue				
E	2	Cash prizes				
D I RECT	3	Noncash prizes				
Č S T E S	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes%	Yes%	Yes%	
	7	Direct expense summary. Add lines 2 thr	ough 5 in column (d)		<b>&gt;</b>	
	8	Net gaming income summary. Subtract li	ne 7 from line 1, colum	nn (d)		
а	ls th	er the state(s) in which the organization content organization licensed to conduct gaming o,' explain:	g activities in each of th	nese states?		
		e any of the organization's gaming license es,' explain:	es revoked, suspended,	or terminated during th	e tax year?	Yes No

Sche	edule G (Form 990 or 990-EZ) 2017 Houston Symphony Society	74-1157	373	Page <b>3</b>
	Does the organization conduct gaming activities with nonmembers?		Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed administer charitable gaming?		Yes	No
	Indicate the percentage of gaming activity conducted in:  The organization's facility	13a		%
	An outside facility.			%
	Enter the name and address of the person who prepares the organization's gaming/special events books and recor			
	Name ►			
	Address ►			
ł	Does the organization have a contract with a third party from whom the organization receives gaming reverse of the third party from whom the organization receives gaming reverse of the third party from whom the organization receives gaming reverse of the third party from whom the organization receives gaming reverse of the third party from whom the organization receives gaming reverse of the third party from whom the organization receives gaming reverse of the third party from whom the organization receives gaming reverse of the third party from whom the organization receives gaming reverse of the third party from whom the organization receives gaming reverse of the third party from whom the organization receives gaming reverse of the third party from whom the organization receives gaming reverse of the third party from whom the organization receives gaming reverse of the third party from whom the organization receives gaming reverse of the third party from whom the organization receives gaming reverse of the third party from whom the organization receives gaming reverse of the third party from whom the organization receives gaming reverse of the third party from whom the organization receives gaming reverse of the third party from whom the organization receives gaming reverse of the third party from whom the organization receives gaming reverse of the third party from whom the organization receives gaming reverse of the third party from whom the organization receives gaming reverse of the third party from whom the organization receives gaming reverse of the third party from whom the organization receives gaming reverse of the third party from whom the organization receives gaming reverse of the third party from the organization receives gaming reverse of the third party from the organization receives gaming reverse of the third party from the organization receives gaming reverse of the third party from the organization receives gaming reverse of the third party from the organization receives gaming reverse gam	nue?	Yes	No
	Name •			
	Address ►			; 
16	Gaming manager information:			
	Name ►			
	Gaming manager compensation ► \$			
	Description of services provided ►			
	☐ Director/officer ☐ Employee ☐ Independent contractor			
17	Mandatory distributions:			
	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		Yes	No
k	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent	in the		
_	organization's own exempt activities during the tax year > \$		:::> 1 /	<u> </u>
Par	<b>TIV</b> Supplemental Information. Provide the explanations required by Part I, line 2b, of and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide a information. See instructions.			V);

#### SCHEDULE J (Form 990)

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered 'Yes' on Form 990, Part IV, line 23.

► Attach to Form 990.

► Go to www.irs.gov/form990 for instructions and the latest information

OMB No. 1545-0047

2017

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Houston Symphony Society

Employer identification number 74-1157373

Part I **Questions Regarding Compensation** Yes No 1 a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel Housing allowance or residence for personal use X Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (such as, maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain... Part III 1 b Χ Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?...... 2 Χ Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: **4** a Χ 4 b Χ c Participate in, or receive payment from, an equity-based compensation arrangement?..... 4 c Χ If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: a The organization?..... 5 a Χ **b** Any related organization? 5 h Χ If 'Yes' on line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: 6 a a The organization?..... Χ **b** Any related organization? 6 b Χ If 'Yes' on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If 'Yes,' describe in Part III. 7 Χ Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If 'Yes,' describe in Part III..... Χ If 'Yes' on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?.....

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

Schedule J (Form 990) 2017

# Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

	(B) Breakdown	of W-2 and/or 1099-MIS	SC compensation	(C) Retirement	(D) Nontaxable	(E) Total of	(F) Compensation	
(A) Name and Title	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	and other deferred compensation	benefits	(E) Total of columns(B)(i)-(D)	in column (B) reported as deferred on prior Form 990	
Mark Hanson (i)	341,687.	0.	0.	0.	19,218.	360,905.	0.	
1 ED/CEO to 9/17 (ii)	0.	0.	0.	0.	0.	0.	0.	
Danny Granados (i)	<u>164,482.</u>	0.	0.	0.	11,494.	<u>175,976.</u>	0.	
<b>2</b> CFO to 1/18 (ii)	0.	0.	0.	0.	0.	0.	0.	
David Chambers (i)	<u>227,455.</u>	0.	0.	0.	<u>17,275.</u>	<u>244,730.</u>	0.	
3 Ch Dev Off to 10/17 (ii)	0.	0.	0.	0.	0.	0.	0.	
Vicky Dominguez (i)	161,212.	0.	0.	0.	11,465.	<u>172,677.</u>	0.	
4 COO (ii)	0.	0.	0.	0.	0.	0.	0.	
Trazanna Moreno (i)	<u>170,737.</u>	0.	0.	0.	<u>26,368.</u>	<u>197,105.</u>	0.	
5 Chief Marketing Off (ii)	0.	0.	0.	0.	0.	0.	0.	
Brinton Smith (i)	184,853.	0.	0.	<u>3,180.</u>	27,693.	215,726.	0.	
6 Musician (ii)	0.	0.	0.	0.	0.	0.	0.	
Jonathan Fischer (i)	<u>185,274.</u>	0.	0.	<u>3,180.</u>	12,505.	200,959.	0.	
7 Musician (ii)	0.	0.	0.	0.	0.	0.	0.	
Eric Halen (i)	<u>187,579.</u>	<u> </u>	0.	<u>3,180.</u>	19,276.	210,035.	0.	
8 Musician (ii)	0.	0.	0.	0.	0.	0.	0.	
William Ver Meulen (i)	<u>172,991.</u>	<u> </u>	0.	<u>3,180.</u>	31,256.	<u>207,427.</u>	0.	
9 Musician (ii)	0.	0.	0.	0.	0.	0.	0.	
Mark Nuccio (i)	<u>201,918.</u>	<u>0.</u>	0.	<u>3,180.</u>	33,137.	238,235.	0.	
10 Musician (ii)	0.	0.	0.	0.	0.	0.	0.	
(i)								
11 (ii)								
(i)						L		
12 (ii)								
(i)						L		
13 (ii)								
(i)						L		
14 (ii)								
(i)	L	<b> </b>				L		
15 (ii)								
(i)	L	<b> </b>				L		
16 (ii)		TEE \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \					L/Forms 000) 2017	

BAA

TEEA4102L 08/09/17

Schedule J (Form 990) 2017

## Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

# Part 1, Line 1a - Relevant Information Regarding Compensation Benefits

Due to the social aspect of their positions, the benefits provided are customary and necessary.

# Part I, Line 1b - Reason For Not Following Policy Regarding Payments

Mark Hanson, Chief Executive Officer, and David Chambers, Chief Development Officer were allowed to include companions on some of their business related trips. This is considered necessary due to the social aspect of their positions.

#### **SCHEDULE L** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

(9) (10)

Total.

# Transactions With Interested Persons

► Complete if the organization answered 'Yes' on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b. ► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 2017

Open To Public Inspection

Employer identification number Houston Symphony Society 74-1157373 **Excess Benefit Transactions** (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only). Complete if the organization answered 'Yes' on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. (b) Relationship between disqualified (d) Corrected? 1 (c) Description of transaction (a) Name of disqualified person person and organization Yes No (1) (2) (3)(4) (5) (6) Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958. ▶\$ Loans to and/or From Interested Persons. Complete if the organization answered 'Yes' on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22. (d) Loan to or from the organization? (h) Approved by board or committee? (b) Relationship with organization (c) Purpose of loan (e) Original principal amount (i) Written agreement? (a) Name of interested person (f) Balance due (g) In default? Τo From Yes No Yes No Yes No (1) (2)(3) (4) (5) (6)(7)(8)

# **Grants or Assistance Benefiting Interested Persons.**

Complete if the organization answered 'Yes' on Form 990, Part IV, line 27.

	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)	•		_		
(10)	·				

**▶**\$

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

Schedule L (Form 990 or 990-EZ) 2017

# Part IV Business Transactions Involving Interested Persons. Complete if the organization answered 'Yes' on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	organiz	haring of nization's enues?	
				Yes	No	
(1) Rand Group	Owned by Gov Dir					
(2)		129,533.	IT services		X	
(3) CCM, LP	Owned by Gov Dir					
(4)		336,811.	Rent		X	
(5) Betsy Cooke Weber	Wife of Trustee	50,000.	Compensation		X	
(6)						
(7)						
(8)						
(9)						
(10)						

Part V Supplemental Information
Provide additional information for responses to questions on Schedule L (see instructions).

# SCHEDULE M (Form 990)

Name of the organization

**Noncash Contributions** 

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

► Attach to Form 990.

Department of the Treasury Internal Revenue Service ► Go to www

Houston Symphony Society

► Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2017

Open to Public Inspection

Employer identification number

74-1157373

Par	t I	Тур	es of Property								
					(a) Check if applicable	(b)  Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Meth noncash	od of c	d) determin bution a	ning mounts
1	Art -	– Wo	rks of art								
2	Art -	– His	torical treasures								
3	Art -	– Fra	ctional interests								
4	Bool	ks an	d publications								
5	Clot	hing a	and household goods								
6	Cars	s and	other vehicles							-	
7	Boa	ts and	d planes							-	
8	Intel	llectua	al property							-	
9			s – Publicly traded		Х	22	2,717,334.	NYSE		-	
10			- Closely held stock				27.2.70017	11102			
11			s – Partnership, LLC, or trust								
12			5 — Miscellaneous								
13			conservation contribution – tructures								
14			conservation contribution – O								
15			te – Residential								
			te – Residential								
16			te – Commercial								
17			e – Other es								
18											
19			entory								
20			d medical supplies								
21			y								
22			artifacts								
23			specimens								
24			gical artifacts								
25	Othe	er 🏲	(Auction items	,	X		346,994.				
26	Othe		(Event supplies		Х	6	57,508.	Cost			
27	Othe		(								
28	Othe		(	)				-			
29			Forms 8283 received by the orgion completed Form 8283, Par					29			
										Yes	No
302	Durin	na the	year, did the organization receive	ve hv contri	hution any nr	ronerty renorted in Part I	lines 1 through 28 that				
500	it m	ust ho	old for at least three years from the purposes for the entire hold	n the date	of the initial	contribution, and whice	ch isn't required to be ι	ısed	30 a		Х
h			escribe the arrangement in Pa	٠.							71
			organization have a gift accep		cv that requi	res the review of any r	nonstandard contributio	ns?	31	Х	
			organization hire or use third							- 23	
JŁa			contributions?						32 a		Х
b			escribe in Part II.								
	If the	e orga	anization didn't report an amo	unt in colu	mn (c) for a	type of property for wh	nich column (a) is chec	ked,			

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

BAA TEEA4602L 08/10/17 Schedule M (Form 990) (2017)

# SCHEDULE O (Form 990 or 990-EZ)

# Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization ► Go to www.irs.gov/Form990 for the latest information.

Employer identification number

Houston Symphony Society 74-1157373

### Form 990, Part III, Line 4a - Program Service Accomplishments

Classical Season

Under the leadership of Andrés Orozco-Estrada in his fourth season as music director, the orchestra continued a run of remarkable artistic accomplishments. The 2017-18 Season began with Dvorák's Te Deum, which the Chorus sang to great acclaim in the Czech Republic in June 2017. The piece took on new meaning at free concerts at Rice University, the Symphony's temporary home in the wake of Hurricane Harvey. Andrés continued to explore the symphonies of Charles Ives and also presented Lago de Lagrimas by Composer-in-Residence Jimmy López and Bartók's Music for Strings, Percussion and Celesta, both of which Andrés introduced with special onstage presentations. Our music director also brought his spirit of experimentation to bear on familiar classics with unique performances of A German Requiem and Variations on a Theme of Haydn by Brahms-the latter complete with a post-concert remix from a local DJ. Our Classical Series also featured some of the world's most renowned soloists. In advance of our European Tour, violinist Hilary Hahn helped the orchestra celebrate Leonard Bernstein's 100th birthday with a stunning performance of his Serenade (after Plato's Symposium). James Ehnes gave a spellbinding interpretation of Shostakovich's Violin Concerto No. 1 and pianist Emanuel Ax transported listeners with the elegant perfection of Mozart's Piano Concerto No. 27. A Houston favorite, soprano Nicole Heaston returned to sing the moving solo from Brahms' A German Requiem. As the finale of the 2017-18 Classical Series, the Houston Symphony presented an innovative, 21st-century production of Stravinsky's masterpiece, The Rite of Spring. Collaborating with artist and choreographer Klaus Obermaier and Ars Electronica Futurelab, Andrés and the orchestra brought this revolutionary ballet to life with music, dance and 3D

Name of the organization
Houston Symphony Society

Houston Symphony Society

T4-1157373

#### Form 990, Part III, Line 4a - Program Service Accomplishments

one-of-a-kind experience. The Symphony also won its first Grammy Award for a recording of Alban Berg's opera Wozzeck, which was recorded live in 2013 under former Music Director Hans Graf.

#### Form 990, Part III, Line 4b - Program Service Accomplishments

POPS Season

The 2017-18 Season was the first year for Principal POPS Conductor Steven Reineke, who took over from his predecessor Michael Krajewski. Reineke conducted six of the seven POPS Series concert weekends (two of the regularly scheduled nine concert weekends were cancelled as a result of Hurricane Harvey). The season featured the musical talents of Betsy Wolfe and Jeremy Jordan (Broadway Today); Megan Hilty and the Houston Symphony Chorus (Very Merry Pops); Ashley Brown and Hugh Panaro (The Oscars: Best Original Songs); Chris Botti (Chris Botti Returns); Michael Krajewski (The Best of John Williams); and Storm Large and Matt Doyle (One-Hit Wonders). The POPS Series also included a breathtaking presentation of sequences from Disney's Fantasia films accompanied by the orchestra with Steven Reineke conducting.

#### Form 990, Part III, Line 4c - Program Service Accomplishments

Education and Community

The Houston Symphony continues to expand and professionalize its industry-leading Education and Community Programming. The Symphony 2017-18 was the third year of the Community-Embedded Musician (CEM) initiative, with four musicians who dedicated 80% of their working hours to serving the Houston community through more than 800 services at schools, neighborhood centers, health care settings, and other community

Name of the organization
Houston Symphony Society

Houston Symphony Society

T4-1157373

#### Form 990, Part III, Line 4c - Program Service Accomplishments

venues, bringing the total number of Houston Symphony activities in schools and communities to over 1,000 events. In 2017, the CEM initiative was recognized with a grant from the League of American Orchestras' new Futures Fund program. The CEMs played a crucial role in the third year of the Symphony's residency at Crespo Elementary School presented by BBVA Compass, the Music and Wellness Initiative, a summer program with the Barbara Bush Houston Literacy Foundation, and pre- and post-concert school visits that enhance classroom instruction related to the Student Concert Series. They also participated in the ongoing High School Residency Program, supported by Occidental Petroleum, which provides workshops, rehearsals, master classes and performances to music students at eight area high schools. Despite the devastating effects of Hurricane Harvey on the schools' resources, the Student Concert Series welcomed more than 46,000 students 259 public, private and home schools. Student concerts truly serve the entire Greater Houston area, with 34 local school districts participating.

# Form 990, Part VI, Line 2 - Business or Family Relationship of Officers, Directors, Etc.

Joan Kaplan, Governing Director & Trustee and Rodney Margolis, Governing Director and Trustee have a family relationship. Betty Tutor, Governing Director & Lifetime Trustee and Jesse Tutor, Governing Director and Lifetime Trustee have a family relationship. Cora Sue Mach, Governing Director and Lifetime Trustee and Steven P. Mach, Governing Director and Trustee have a family relationship. Janice Barrow, Governing Director and Lifetime Trustee and Barbara McCelvey, Gov. Director and Trustee have a family relationship.

# Form 990, Part VI, Line 6 - Explanation of Classes of Members or Shareholder

Members of the Society are defined as anyone who has contributed, or on whose behalf there has been a contribution of at least \$100. Ten or more members shall constitute a quorum at any meeting.

#### Form 990, Part VI, Line 7a - How Members or Shareholders Elect Governing Body

One regular meeting of the members of the Society shall be held each year in the month of May for the purpose of electing a Board of Trustees for the ensuing fiscal year. The Board of Trustees elect the Governing Directors and Officers of the Society. The Board of Trustees are not listed in Part VII as the governance of the Society is entrusted to the Governing Directors.

#### Form 990, Part VI, Line 11b - Form 990 Review Process

The Form 990 is reviewed by the Financial Controller and CFO. After internal review, Form 990 is sent to the Governing Directors electronically for their review, questions, and suggested edits. Once their review is complete, the HSS electronically files the Form 990 with the IRS.

#### Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

The Conflict of Interest Policy is provided annually to the Governing Board for their review and signature. If a conflict is noted the Trustee is asked to recuse himself from any applicable decisions.

# Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO & Top Management

Annually the Human Resources staff obtains salary surveys for both the Houston area and orchestras of a similar budget size. The Senior Human Resources Manager then shares the information with the Board President. The Compensation Committee, consisting of the Board President, Board Chairman, and any other members as may be appointed by the Executive Committee, are responsible for reviewing the comparative data and approving the Executive Director/CEO's compensation package. Budget constraints are taken into account.

#### Form 990, Part VI, Line 15b - Compensation Review & Approval Process - Officers & Key Employees

Annually the Senior Human Resources Manager obtains salary surveys for both the Houston area and the Symphony universe. The Director then shares the information with the Board President. The Compensation Committee, consisting of the Board

Name of the organization	Employer identification number
Houston Symphony Society	74-1157373

# Form 990, Part VI, Line 15b - Compensation Review & Approval Process - Officers & Key Employees (continued)

President, Board Chairman, and any other members as may be appointed by the Executive Committee from time to time, are responsible for approving the compensation packages for the Chief Financial Officer and other key employees. Budget constraints are taken into account.

# Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

The audited financial statements and Form 990 are available on our website. Governing documents are available upon request through the Symphony offices.

# Form 990, Part XI, Line 9 Other Changes In Net Assets Or Fund Balances

Change in value of pension liability under FASB 87	\$ 607,767.
	607,767.

# SCHEDULE R (Form 990)

**Related Organizations and Unrelated Partnerships** 

Part I Identification of Disregarded Entities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 33.

► Complete if the organization answered 'Yes' on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

(c)

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Houston Symphony Society

Employer identification number

74-1157373

(e)

ivame, address, and Em (ii applicable) of disregarded e	Tillly Primary a	or foreign	n country)	rotal income	End-or-year assets		entity	
<u>(1)</u>								
<u>(2)</u>								
(3)								
Part II Identification of Related Tax-Exempt On had one or more related tax-exempt org	<b>rganizations.</b> Complete anizations during the t	e if the organization ax year.	answered '\	Yes' on Form 99	0, Part I	V, line 34, b	ecause it	
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Cod section	le Public charity (if section 501	status (c)(3))	(f) Direct controll entity	ling Sec 51 controll	<b>g)</b> 2(b)(13) ed entity?
(1) Houston Symphony Endowment 615 Louisiana St. #102 Houston, TX 77002 20-8350227	Support the Houston Symphony	TX	501 (c) (3	3) 509(a)(	3) 1	Houstor Symphon Society	У	No
(2)								
(3) 								
<u>(4)</u>								

Part III	Identification of Related Organizations Taxable as a Partnership	o Complete if the organization answered 'Yes' on Form 990, Part IV, line 34, artnership during the tax year.
	because it had one or more related organizations treated as a pa	artnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(h) (i) Disproportionate amount in box 20 of Schedule K-1 (Form 1065)		i) ral or aging ner?	(k) Percentage ownership
		country)		512-514)			Yes	No	1065)	Yes	No	
<u>(1)</u>												
(2)	  -											
	-											
	-											
-												
(3)	-											
	-											
	-											

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered 'Yes' on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	Sec 512 controlled	) (b)(13) d entity?
		country)	Critity	or trusty				Yes	No
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(2)									-
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	†								
(3)									
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Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

Χ

Yes No

1 a

Part V Transactions With Related Organizations. Complete if the organization answered 'Yes' on Form 990, Part IV, line 34, 35b, or 36.

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

<b>b</b> Gift, grant, or capital contribution to related organization(s)			1b		X			
c Gift, grant, or capital contribution from related organization(s)			1 с	Χ				
d Loans or loan guarantees to or for related organization(s)			1 d		Х			
e Loans or loan guarantees by related organization(s)								
				Х				
f Dividends from related organization(s)			1f		Х			
g Sale of assets to related organization(s)			1g		X			
h Purchase of assets from related organization(s)			1h		X			
i Exchange of assets with related organization(s)			1i		X			
j Lease of facilities, equipment, or other assets to related organization(s)			1j		X			
k Lease of facilities, equipment, or other assets from related organization(s)			1k		Х			
I Performance of services or membership or fundraising solicitations for related organization(s)				Χ				
m Performance of services or membership or fundraising solicitations by related organization(s)				21	X			
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				Х	21			
o Sharing of paid employees with related organization(s)								
• Sharing of paid employees with related organization(s)			10		X			
n Paimbursament naid to related organization(s) for expenses			1p		Х			
p Reimbursement paid to related organization(s) for expenses								
d Reinibursement paid by related organization(s) for expenses.			1q	Х				
" Other transfer of each or property to related examination(s)			1		37			
r Other transfer of cash or property to related organization(s).					X			
s Other transfer of cash or property from related organization(s).			1s		X			
2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including cover				ı.				
<b>(a)</b> Name of related organization	<b>(b)</b> Transaction	<b>(c)</b> Amount involved	Method of	i) determ	nining			
	type (a-s)		amount	involv	ed			
1) Houston Symphony Endowment c 4,071,11								
2) Houston Symphony Endowment	15,187,695.	Loan du	aran	tee				
-, nouseon symphony showmone	e	13/10//033.	noun gu	ar an				
2)								
3)								
4)								
5)								
6)								
TEEA5003L 11/29/17	- I	Schedu	le <b>R</b> (Forn	1 990)	2017			
			•	,				

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered 'Yes' on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unre- lated, excluded from tax under	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		<b>(k)</b> Percentage ownership
			from tax under sections 512-514)	Yes	No			Yes	No	(1 01111 1 0 0 0 )	Yes	No	i I
(1)													
	_												
	-												
(2)													
	]												
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Schedule R (Form 990) 2017

Part VII Supplemental Information.

Provide additional information for responses to questions on Schedule R. See instructions.