PUBLIC INSPECTION COPY

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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.

OMB No. 1545-0047

Open to Public Inspection

Α	For t	he 2018 calen	dar year, or tax	year begini	ning 6	/01	, 2018,	and endir	າ g 5,	/31		, 2019	
В	Check	if applicable:	С							D Emplo	yer identi	ification number	
	A	ddress change	Houston Sy	zmphony	Socie	± 57				74-	1157	373	
	-		615 Louisi	iana St	#102	Сy				E Teleph			
		ame change	Houston,							1			
	In	itial return	nous con,	111 //002	_					/13	-224	-4240	
	Fir	nal return/terminated											
	Aı	mended return								G Gross	receipts	\$ 31,589	,895.
	A	pplication pending	F Name and addre	ess of principal	officer: .T/	ohn Mangi	ım		H(a) Is this	s a group retu	rn for sub	oordinates? Yes	X No
			Same As C	Ahove	01	Jiii Haiige	1111		H(b) Are a	II subordinate ," attach a lis	s included	d? Yes	
$\overline{}$	Tav	exempt status:	X 501(c)(3)	501(c) (\◀	(insert no.)	4947(a)(1) or	527	If "No	," attach a lis	t. (see ins	structions)	
		•				(IIISELL IIU.)	4347(a)(1) 01	JLI					
J			w.houstons			 	1.			exemption n			
K		n of organization:	X Corporation	Trust	Association	Other ►	L'	Year of forma	tion: 19]	L3 W	State of I	egal domicile: T	<u> </u>
Pa	art I	Summar											
	1		be the organizat										
a)		to inspi	re and eng	<u>gage a l</u>	arge a	<u>and diver</u>	<u>se audie</u>	nce in	Great	<u>er Hou</u>	<u>ston</u>	and beyo	nd
Governance		through	exceptiona	<u>l orche</u>	stral	performa	inces, ed	<u>ucatio</u>	nal pr	ograms	and	communit	У
Ĕ		<u>activiti</u>											
Š	2	Check this bo	ox ► if the o	organization	n disconti	nued its opera	ations or disp	osed of m	ore than	25% of its	net as	sets.	
Ğ	3		oting members o								3		112
•ŏ	4	Number of in	dependent votin	g members	of the go	overning body	(Part VI, line	e 1b)			4		111
ë.	5		of individuals e								5		544
Activities &	6	Total number	of volunteers (estimate if i	necessary	/)					6		775
Ac	7a	Total unrelate	ed business reve	enue from F	Part VIII,	column (C), li	ne 12				7a		0.
	b	Net unrelated	l business taxab	le income f	from Forn	n 990-T, line 3	38				7b		0.
										Prior Year		Current Y	'ear
	8	Contributions	and grants (Pa	rt VIII, line	1h)				1	8,447,	168.	17,930	495.
Revenue	9		vice revenue (Pa							0,882,		12,524	
ķ	10	Investment in	ncome (Part VIII	, column (A), lines 3	, 4, and 7d).				50,			,810.
æ	11		e (Part VIII, colu		-	-				-204,			,947.
	12		e – add lines 8 t							9,175,8		30,468	
_	13		imilar amounts p							<i>5</i> / ± / 0 / ·	300.	00,100	7002.
	14		to or for member	-			-						
										1 010 /	220	01 606	071
တ္ဆ	15		er compensation							1,910,0		21,698	
use	16 a	Professional	fundraising fees	(Part IX, c	olumn (A), line 11e)				170,	953.	26	670.
Expenses	b	Total fundrais	sing expenses (F	Part IX, coli	umn (D),	line 25) ►	2,98	30,733.					
ŭ	17		ses (Part IX, colu							2,023,	683	11,421	595
	18	•	es. Add lines 13			•				4,104,		33,147	
	_		es. Add filles 15 expenses. Sub									· · · · · ·	•
	19	Revenue less	expenses. Sub	tract line re	5 110111 1111	e 12			_	4,928,		-2,678	•
9 of		-	(D L) (16)							ing of Curre		End of Y	
sset Salai	20		(Part X, line 16).							0,401,0		8,399	635.
t Ag	21	Total liabilitie	s (Part X, line 2	(6)					. 2	7,902,3	311.	29,943	, 902.
Net Assets	22	Net assets or	fund balances.	Subtract lin	ne 21 fror	n line 20			1	7,501,2	231.	-21,544	,267.
Pa	art II	Signatur	e Block										
Und	er penal	Ities of perjury, I de	eclare that I have examiner (other than officer	mined this retu	rn, including	accompanying sc	hedules and stater	ments, and to	the best of	my knowledge	and beli	ef, it is true, correc	ct, and
com	plete. D	eclaration of prepa	rer (other than officer	r) is based on a	all informatio	n of which prepare	er has any knowle	dge.					
		► Ele	ctronicall	ly File	d								
Sig	nc	Signatu	re of officer	•						Date			
He	re	► Eli:	zabeth Con	dic					CFO				
			print name and title						01.0				
		Print/Type p	preparer's name		Preparer's	signature		Date		Check	if	PTIN	-
ъ.	الہ:					ara Mu	rphu	01/	28/20	self-employ		P01386215	5
Pa			a Murphy	, C 17a++			11-1-9	101/2	-0/20	> sen-emplo)	rcu	101300213	,
	epare e On	.1								<u> </u>		0060066	
US	e Of	Firm's addre			•					Firm's EIN		-0269860	
			Housto		77027-					Phone no.	(713	- /	
Ma	y the	IRS discuss th	is return with th	e preparer	shown at	ove? (see ins	structions)					. X Yes	No

(Expenses

4 e Total program service expenses

) (Revenue \$

including grants of

27,925,594.

			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	Х	
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? <i>If 'Yes,' complete Schedule C, Part l</i>	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		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		Х
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? If 'Yes,' complete Schedule D, Part IV.	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If 'Yes,' complete Schedule D, Part V.</i>	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	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	Х	
k	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	I 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		Х
e	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Х	
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		Х
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	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
14 a	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
t	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
	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	X	
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
20a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		Х
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

Form 990 (2018) Houston Symphony Society Part IV Checklist of Required Schedules (continued)

			Yes	No
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	
24 8	a 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		
	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	24-		
	any tax-exempt bonds?d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24c 24d		
25 8	a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
I	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete 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):			
i	a A current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i>	28a		Х
ļ	b A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i>	28b	Х	
(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? <i>If 'Yes,' complete Schedule M</i>	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			.,
31	contributions? If 'Yes,' complete Schedule M	30 31		X
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete	<u> </u>		
32	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		Х
34	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	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
I	b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b	Х	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	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? <i>If 'Yes,' complete Schedule R, Part VI</i>	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	
Pa	rt 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			<u>. </u>
_			Yes	No
	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
	b 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	X	
BAA				(2018)

Form 990 (2018) Houston Symphony Society

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			Yes	No
2 8	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 544			
ŀ	of 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 <i>e-file</i> (see instructions)			
3 8	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		Х
ŀ	of '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		
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		Х
ŀ	olf '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 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
(: If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 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		Х
ŀ	olf '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).			
á	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7.	Х	
	services provided to the payor?	7 a	X	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file	7 0	Λ	
•	Form 8282?	7с		Х
(If 'Yes,' indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Х
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
ł	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	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.			
	Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)	10-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue gualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
ł	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			
14 a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
ŀ	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14 b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		Х
	If 'Yes,' see instructions and file Form 4720, Schedule N.			17
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If 'Yes,' complete Form 4720, Schedule O.	16		X

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.... 112 If there are material differences in voting rights among members See Sch. 0 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 ... 111 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 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?..... 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? 10b 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 15 a **b** Other officers or key employees of the organization...See .Schedule . 0..... 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 (1024 or 1024-A 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 X Upon request Own website Another's website 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 (2018)	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	one l both	box, an o	unles officer /truste		on	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	week	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 F. Clark	4									
President	0	Х		Χ				0.	0.	0.
(2) Steven P. Mach	4									
Imm Past Pres	0	Χ		X				0.	0.	0.
(3) Barbara B. McCelvey	4									•
Secretary	0	Χ		X				0.	0.	0.
(4) Danielle C. Batchelor	4			3.7				0	0	0
Chair Pops Pgm	0 4	Χ		Χ				0.	0.	0.
	$-\frac{4}{0}$	Х		Х				0.	0.	0.
(6) Brett Busby	4	Λ		Λ				0.	0.	<u> </u>
Chair Art./Orch	0	Х		Χ				0.	0.	0.
(7) Dr. Mary Kathryn Campion	4	21		21				0.	0.	<u></u>
Chair Pension	0	Х						0.	0.	0.
(8) Bradley Corson	4									
Chair GLC	0	Х		Χ				0.	0.	0.
(9) Viviana Denechaud	4									
Chair Dev Comm	0	Х		Χ				0.	0.	0.
(10) Tracy Dieterich	4									
Chair Comm Ptns	0	Χ		Χ				0.	0.	0.
(11) Mary Lynn Marks	44									
Chair Vol/Evts	0	Χ		Χ				0.	0.	0.
(12) Billy McCartney	4							_		_
Chair Education	0	Χ		Χ				0.	0.	0.
(13) David R. Pruner	4	.,						•	•	•
Chair Planning	0	Χ		Χ				0.	0.	0.
(14) Robert Orr	4	v		v				0	0	0
Co-Chr Planning	0	Χ		Χ				0.	0.	0.

Part VII Section A. Officers, Directors, Tru		Key	Em	•		es,	and	d Highest Con	pensated Ei	mple	yees	(conti	nued)
	(B)			((•								
(A) Name and title	Average hours per week (list any	offic	cer an	ss pe	erson direct	than is both or/trus	n an tee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation fro related organizatic (W-2/1099-MISC	ns	amou	(F) stimated ant of oth pensation from the	her
	hours for related organiza - tions below dotted line)	ndividual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	ırmer	(1.2.33	(1. 2.133566		orga and	anization d related anization	d
(15) Manolo Sanchez	4												
Chair Mkt Comm	0	X		Χ				0.		0.			0.
(16) Mike S. Stude	4												
Chairman Emerit	0	X		Χ				0.		0.			0.
(17) Paul R. Morico	4												
General Counsel	0	X		Χ				0.		0.			0.
(18) Maureen Higdon	4												
Pres-HS League	0	Х		Χ				0.		0.			0.
(19) Farida Abjani	2							, , , , , , , , , , , , , , , , , , ,		-			
Governing Dir	0	Х						0.		0.			0.
(20) Michael Adler	2							<u> </u>		•			
Governing Dir	0	Χ						0.		0.			0.
(21) Ann Ayre	2							0.		<u> </u>			
Trustee	0	X						0.		0.			0.
(22) Marcia Backus	2	21						0.		0.		-	<u> </u>
Governing Dir	0	X						0.		0.			0.
(23) Philip A. Bahr	2							<u> </u>		•			
Trustee	0	Х						0.		0.			0.
(24) Janice Barrow	2												
Governing Dir	0	Х						0.		0.			0.
(25) Gary Beauchamp	2												
Governing Dir	0	Х						0.		0.			0.
1 b Sub-total							>	0.		0.	-		0.
c Total from continuation sheets to Part VII, Secti	on A						▶	2,196,799.		0.	2	53,8	
d Total (add lines 1b and 1c)							▶	2,196,799.		0.		53,8	
2 Total number of individuals (including but not limited	to those I	isted	abov	/e) \	who	recei	ved		0 of reportable c	ompe	nsatior	1	
from the organization ► 12													
												Yes	No
3 Did the organization list any former officer, direct on line 1a? If 'Yes,' complete Schedule J for suc	tor, or tru	stee,	, key	em	ploy	yee,	or h	nighest compensa	ted employee		3		Х
· ·													
4 For any individual listed on line 1a, is the sum of the organization and related organizations greate such individual.	er than \$1	50,00	00?	lf '\	∕es,	' com	ıple	te Schedule J for			4	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If 'Yes,' complete Schedule J for such person												Х	
Section B. Independent Contractors													
Complete this table for your five highest compen compensation from the organization. Report compen	sated ind sation for	epen the c	dent alend	coı dar	ntra year	ctors endii	tha	at received more to with or within the or	han \$100,000 o ganization's tax	f year.			
(A) Name and business add	ress							(B) Description	of services	C	(C Compe	;) nsatio	n
Strike Marketing 906 Rutland Street Housto	n. TX 7	7008						Marketing			6	97,8	315
Travtours, Inc. 71-703 Highway 111 #2E Ran	•			92	270			Orchestra tou	r			45,8	
Finds for Jones Hall 55 Wayah Dr #601 Houst				, 4	_,,			Bldg maint s					346

(A) Name and business address	(B) Description of services	(C) Compensation
Strike Marketing 906 Rutland Street Houston, TX 77008	Marketing	697,815.
Travtours, Inc. 71-703 Highway 111 #2E Rancho Mirage, CA 92270	Orchestra tour	545,816.
Fndn for Jones Hall 55 Waugh Dr #601 Houston, TX 77007	Bldg maint, security	350,346.
Opus 3 Artists LLC 470 Park Ave S 9th Floor N New York, NY 10016	Professional service	308,422.
Infovine Inc. 1100 W 23rd St #100 Houston, TX 77008	Marketing, printing	283,814.
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 > 22		

Continuation Sheet for Form 990

OMB No. 1545-0047

2018

Department of the Treasury Internal Revenue Service

ivame 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	Employee	S								
(A)	(B)			(C				(D)	(E)	(F)
Name and Title	Average hours per					hat app		Reportable compensation from	Reportable compensation from	Estimated amount of other
	week (list any	Individual trustee or director	stitu	Officer	Key employee	ighe	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization
	hours for related	dual ector	tion	Ή	ηpl	st co	er.			and related organizations
	organiza- tions	trus	3 1)yee	mpe				organizations
	below dotted line)	tee	Institutional trustee			Highest compensated employee				
James Bell	2		-			ed				
Trustee	$-\frac{1}{0}$	X						0.	0.	0.
Devinder Bhatia	2	Λ						0.	0.	<u> </u>
Trustee	$-\frac{1}{0}$	Х						0.	0.	0.
Marie Taylor Bosarge	2	Λ						0.	0.	<u></u>
Governing Dir	$-\frac{1}{0}$	Х						0.	0.	0.
Nancy S. Bratic	2	21						0.	0.	<u> </u>
Trustee		Х						0.	0.	0.
Terry A. Brown	2	21						0.	0.	\
Trustee		Х						0.	0.	0.
Ralph Burch	2	71						0.	0.	<u></u>
Governing Dir		Х						0.	0.	0.
Andrew Calder	2	71						0.	0.	<u></u>
Governing Dir		Х						0.	0.	0.
Dougal A. Cameron	2							Ŭ.	0.	<u> </u>
Trustee		Х						0.	0.	0.
John T. Cater	2							Ŭ.	0.	<u> </u>
Trustee		Х						0.	0.	0.
Michael H. Clark	2									
Governing Dir	0	Χ						0.	0.	0.
Kelli Cohen Fein	2									
Trustee	0	Χ						0.	0.	0.
Evan D. Collins	2									
Trustee		Х						0.	0.	0.
Andrew Davis	2									
Trustee		Х						0.	0.	0.
Michael Doherty	2									
Governing Dir	0	Χ						0.	0.	0.
Terry Everett	2									_
Governing Dir	0	Χ						0.	0.	0.
Jeffrey B. Firestone	2									
Trustee	0	Χ						0.	0.	0.
Eugene A. Fong	2									
Trustee	0	Χ						0.	0.	0.
Julia A. Frankel	2									
Trustee	0	Χ						0.	0.	0.
Ronald G. Franklin	2									
Governing Dir	0	Χ						0.	0.	0.
Betsy Garlinger	2									
Trustee	0	Χ						0.	0.	0.
Allen M. Gelwick	2									
Trustee	0	Χ						0.	0.	0.
										Form 990 Cont 2018

Continuation Sheet for Form 990

OMB No. 1545-0047

2018

Department of the Treasury Internal Revenue Service

Name of the Organization

Houston Symphony Society

74-1157373

Houston Symphony Society

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

Highest Compensated I	Employee	S					•				
(A)	(B)		(C)					(D)	(E)	(F)	
Name and Title	Average		ition ((check	all t	hat app		Reportable compensation from	Reportable compensation from	Estimated amount of other	
	Average hours per week	Indi or c	ısul	ΉО	Κе)	Hìg em _l	Former	the organization	related organizations (W-2/1099-MISC)	compensation	
	(list any hours for	dire.	ituti	Officer	Key employee	hest bloy	ı≋	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization	
	related	호호	oma	•	oldı	; cor	~			and related organizations	
	organiza- tions	Individual trustee or director	Į,		/ee	npe				. 3	
	below dotted line)	ee	Institutional trustee			Highest compensated employee					
Evan B. Glick	2					8					
Trustee	$-\frac{2}{0}$	Х						0.	0.	0.	
Jennifer H. Gravenor	2							J.	, , , , , , , , , , , , , , , , , , ,		
Trustee	0	Х						0.	0.	0.	
Susan A. Hansen	2										
Trustee	0	Х						0.	0.	0.	
Eric J. Haufrect	2										
Trustee	0	X						0.	0.	0.	
Gary L. Hollingsworth	2	ļ									
Trustee	0	X						0.	0.	0.	
Brian James	2	ļ 						_		_	
Trustee	0	X						0.	0.	0.	
Joan Kaplan	2	,						0	0	0	
Trustee	0 2	X						0.	0.	0.	
Sippi Khurana	$-\frac{2}{0}$	v						0.	0.	0	
Governing Dir I.R. Kirk	2	Х						0.	0.	0.	
Trustee	$-\frac{2}{0}$	Х						0.	0.	0.	
Ulyesse J. LeGrange	2	Λ						0.	0.	<u> </u>	
Trustee		Х						0.	0.	0.	
Rochelle Levit	2							· ·	0.	<u> </u>	
Governing Dir	0	Х						0.	0.	0.	
Carlos J. López	2										
Trustee	0	Х						0.	0.	0.	
Cora Sue Mach	2									_	
Governing Dir	0	Х						0.	0.	0.	
Michael Mann	2										
Trustee	0	X						0.	0.	0.	
Paul M. Mann	2	ļ -									
Governing Dir	0	X						0.	0.	0.	
Rodney H. Margolis	2	<u> </u>						_			
Governing Dir	0	X						0.	0.	0.	
Jay Marks	2	ļ ,,								•	
Governing Dir	0	Х						0.	0.	0.	
John N. Matzer, III	2	77						0	0	0	
Trustee Magazz	0 2	X						0.	0.	0.	
<u>Jackie W. Mazow</u> Trustee	$-\frac{2}{0}$	v						0.	0.	0	
Alexander K. McLanahan	2	Х						U.	U.	0.	
Governing Dir	$-\frac{2}{0}$	Х						0.	0.	0.	
Gary Mercer	2	Λ						0.	0.	<u> </u>	
Trustee		Х						0.	0.	0.	
1145000	1 0	L 23						U 0 1	٠٠١	Form 000 Cont 2019	

Continuation Sheet for Form 990

OMB No. 1545-0047

2018

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		S						1			
(A)	(B)			(C				(D)	(E)	(F)	
Name and Title	Average 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		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	
Marilyn Miles Trustee	$-\frac{2}{0}$	Х						0.	0.	0.	
Janet Moore	2							<u> </u>		<u> </u>	
Trustee	0	Х						0.	0.	0.	
Bobbie Newman	2										
Trustee	0	Х						0.	0.	0.	
Scott S. Nyquist	2										
Trustee	0	Х						0.	0.	0.	
Edward C. Osterberg, Jr.	2										
Trustee	0	Х						0.	0.	0.	
Robert Peiser	2										
Trustee	0	Х						0.	0.	0.	
Thomas C. Platt	2										
Governing Dir	0	Х						0.	0.	0.	
Alexandra Pruner	2									_	
Endowment Pres	2	Х						0.	0.	0.	
Gloria G. Pryzant	2										
Trustee	0	Χ						0.	0.	0.	
Tadd Pullin	2										
Trustee	0	X						0.	0.	0.	
Richard Robbins	2	1									
Trustee	0	X						0.	0.	0.	
J. Hugh Roff, Jr.	2							_	_	_	
Trustee	0	X						0.	0.	0.	
John Rydman	2	ļ								•	
Governing Dir	0	X						0.	0.	0.	
Miwa Sakashita	2	ļ ,,								•	
Trustee	0	X						0.	0.	0.	
Ed Schneider	2	.,						0	0	0	
Trustee	2	X						0.	0.	0.	
Helen P. Shaffer		v						0	0	0	
Governing Dir	2	Х						0.	0.	0.	
Michael E. Shannon	$-\frac{2}{0}$	Х						0	0.	0	
Trustee Donna N. Shen	2	Λ						0.	0.	0.	
Trustee	$-\frac{2}{0}$	Х						0.	0.	0	
Robert B. Sloan, Jr.	2	Λ						0.	0.	0.	
Trustee	$-\frac{2}{0}$	Х						0.	0.	0	
Jim R. Smith	2	Λ						0.	0.	0.	
Governing Dir	$-\frac{2}{0}$	Х						0.	0.	0.	
Miles O. Smith	2	Λ						0.	0.	<u> </u>	
Governing Dir	$-\frac{2}{0}$	Х						0.	0.	0.	
GOVERNING DIT		Λ	l				l .	0.		Form 990 Cont 2018	

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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 E		S						1				
(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	Institutional trustee	Officer	Key employee	E 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		
Tad Smith Trustee	2	Х						0.	0.	0.		
Ishwaria Subbiah	2							· ·	0.	<u></u>		
Trustee	0	Х						0.	0.	0.		
L. Proctor Thomas, III	2							· ·	0.	<u> </u>		
Trustee	0	Х						0.	0.	0.		
William Toomey, II	2											
Governing Dir	4	Х						0.	0.	0.		
Shirley W. Toomim	2											
Trustee	0	Х						0.	0.	0.		
Andrew Truscott	2									_		
Trustee	0	Χ						0.	0.	0.		
Robert B. Tudor, III	2											
Trustee	0	Х						0.	0.	0.		
Betty Tutor	2											
Governing Dir	0	X						0.	0.	0.		
Jesse B. Tutor	2	<u> </u>						_				
Governing Dir	0	Х						0.	0.	0.		
Judith Vincent	2	.,,								•		
Governing Dir	0	X						0.	0.	0.		
Margaret Waisman	2	v						0	0.	0		
Trustee Fredric A. Weber	2	Х						0.	0.	0.		
Trustee	$-\frac{2}{2}$	Х						0.	0.	0.		
Diana Weil	2	Λ						0.	0.	0.		
Trustee	$-\frac{2}{0}$	Х						0.	0.	0.		
Robert Weiner	2	71						0.	0.	<u> </u>		
Trustee	0	Х						0.	0.	0.		
Vicki West	2							· ·	0.	<u> </u>		
Trustee	0	Х						0.	0.	0.		
Margaret Alkek Williams	2											
Governing Dir	0	Х						0.	0.	0.		
Steven J. Williams	2											
Trustee	0	Х						0.	0.	0.		
Frank_Wilson	2									_		
Trustee	0	X						0.	0.	0.		
Edmond D. Wulfe	2	ļ										
Trustee	0	Х						0.	0.	0.		
Scott Wulfe	2	ļ 										
Governing Dir	0	X						0.	0.	0.		
David J. Wuthrich	2	ļ								•		
Governing Dir	0	X						0.	0.	0. Form 990 Cont 2018		

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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

Highest Compensated Employees										
(A)	(B)			(C				(D)	(E)	(F)
Name and Title	Average hours per week (list any hours for	Individual trustee or director		check Officer	Key employee	hat employee	Former	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)	l trustee r	Institutional trustee		oyee	Highest compensated employee				organizations
Ellen A. Yarrell	2	X						0.	0.	0
Trustee Robert Yekovich	2	Λ						0.	0.	0.
Trustee	2	Х						0.	0.	0.
Frank Yonish	2	Λ						0.	0.	<u> </u>
Trustee		Х						0.	0.	0.
John Mangum	38							Ŭ.	0.	<u> </u>
CEO/Exec Dir	2	-		Χ				314,831.	0.	20,433.
Elizabeth Condic	36							,		-,
CFO	4			Χ				172,375.	0.	28,357.
Andres Orozco-Estrada	40									
Artistic Director	0				Χ			430,750.	0.	28,382.
Vicky Dominguez	40									
C00	0				Χ			177,941.	0.	18,203.
Trazanna Moreno	40									
CMO to Aug 2018	0				X			152,828.	0.	24,232.
Mark Nuccio	40	_								
Musician	0					X		215,923.	0.	34,762.
Eric Halen	$-\frac{40}{0}$					37		101 220	0	22 201
Musician	0					Χ		191,329.	0.	22,391.
Brinton Smith Musician	$-\frac{40}{0}$					Х		185,304.	0.	29,773.
Jonathan Fischer	40					Λ		103,304.	0.	23,113.
Musician	0	-				Х		185,069.	0.	17,529.
Mark Hughes	40					21		103,003.	0.	17,525.
Musician	0					Х		170,449.	0.	29,773.
								270,7130	<u> </u>	237
		-								
		-								
		•								
		-								
		-								
		-								
		-								F 000 0 1 0010
										Form 990 Cont 2018

· u	• • •	Check if Schedule O contains a respo	nse or note to any	y line in this Part V	TIL		
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	b c d	Federated campaigns	1,588,434. 3,759,147. 1,285,078.				
	_	Noncash contributions included in lines 1a-1f: \$	344,729.	17,930,495.			
Program Service Revenue	2a b c d		11130 11130	11,205,824. 1,318,180.	11,205,824.		
Progran		All other program service revenue		12,524,004.			
	3 4 5	Investment income (including dividends, other similar amounts)	ond proceeds	50,810.			50,810.
	b c d	Gross rents Less: rental expenses Rental income or (loss) Net rental income or (loss) (i) Real (ii) Real (iv) Real (iv) Real (iv) Real (iv) Real (iv) Real	(ii) Personal				
	b	Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses	(ii) Other				
Other Revenue	8 a	Net gain or (loss)	1,084,586.				
Other		Less: direct expenses	1,121,533.	-36,947.			-36,947.
•	9 a	Gross income from gaming activities. See Part IV, line 19 a		00/01/1			00,011
		Less: direct expenses	ies▶				
	10 a b	Gross sales of inventory, less returns and allowances					
		Miscellaneous Revenue	Business Code				
	11 a b						
		All other revenue	•				
		Total. Add lines 11a-11d		30,468,362.	12,524,004.	0.	13,863.

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).

	Check if Schedule O contains a response or note to any line in this Part IX								
Do 6b,	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	(D) Fundraising expenses				
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21								
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 5	Benefits paid to or for members								
6	trustees, and key employees Compensation not included above, to	898,525.	531,131.	247,680.	119,714.				
O	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	15,460,073.	13,551,391.	553,998.	1,354,684.				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	,	·	·					
9	Other employee benefits	1,207,909.	1,074,985.	28,703.	104,221.				
-	Payroll taxes	2,900,143.	2,403,256.	212,753.	284,134.				
10	Fees for services (non-employees):	1,232,221.	1,052,417.	55,595.	124,209.				
	a Management								
	b Legal	45 202	F 401	20.000					
	Accounting	45,323.	5,421.	39,902.					
	Lobbying.	74,559.		74,559.					
	Professional fundraising services. See Part IV, line 17	26 670			26 670				
	Investment management fees	26,670.			26,670.				
-	। Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0.象ch. ℚ	4,163,577.	3,914,078.	134,395.	115,104.				
	Advertising and promotion	1,121,017.	1,115,510.		5,507.				
13		1,107,591.	971,651.	16,311.	119,629.				
14	Information technology	312,866.	189,392.	57,327.	66,147.				
15	Royalties								
16	Occupancy	964,182.	877,896.	79,947.	6,339.				
17	Travel	650,840.	614,316.	22,465.	14,059.				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials								
19	Conferences, conventions, and meetings	21,322.	7,334.	6,636.	7,352.				
20	Interest	536,747.		536,747.					
21	Payments to affiliates								
22	Depreciation, depletion, and amortization	251,381.	228,232.	17,260.	5,889.				
23	Insurance	192,312.	124,675.	46,896.	20,741.				
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.)								
á	Production_materials/_equip	793,422.	793,422.						
	Patron Cultivation	580,308.	139,583.	4,902.	435,823.				
	Merchant fees	408,673.	302,475.	18,403.	87,795.				
(Other expenses	197,475.	28,429.	86,330.	82,716.				
	All other expenses								
25	Total functional expenses. Add lines 1 through 24e	33,147,136.	27,925,594.	2,240,809.	2,980,733.				
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			
					(A) Beginning of year		(B) End of year
	1	Cash – non-interest-bearing	158,220.	1	137,194.		
	2	Savings and temporary cash investments		L		2	
	3	Pledges and grants receivable, net			7,425,630.	3	6,537,570.
	4	Accounts receivable, net			704,177.	4	384,662.
	5	Loans and other receivables from current and former trustees, key employees, and highest compensated er Part II of Schedule L	mplovees	s. Complete	0.505		
	_	Loans and other receivables from other disqualified pe			9,585.	5	
	6	section 4958(f)(1)), persons described in section 4958(c)(3 employers and sponsoring organizations of section 501(c) beneficiary organizations (see instructions). Complete	d contributing tary employees' of Schedule L		6		
ts	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
Ä	9	Prepaid expenses and deferred charges			1,025,861.	9	509,481.
	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10 a	3,273,195.			
	b	Less: accumulated depreciation	10 b	2,442,467.	1,077,607.	10 c	830,728.
	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)		10,401,080.	16	8,399,635.
	17	Accounts payable and accrued expenses			2,443,375.	17	1,727,981.
	18	Grants payable				18	
	19	Deferred revenue	4,064,377.	19	4,059,096.		
	20	Tax-exempt bond liabilities				20	
ies	21	Escrow or custodial account liability. Complete Part I'		L		21	
Liabilities	22	Loans and other payables to current and former office key employees, highest compensated employees, and Complete Part II of Schedule L	l disqual	ified persons.		22	
	23	Secured mortgages and notes payable to unrelated th	ird partie	es	15,187,695.	23	15,678,482.
	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			6,206,864.	25	8,478,343.
	26	Total liabilities. Add lines 17 through 25			27,902,311.	26	29,943,902.
ces		Organizations that follow SFAS 117 (ASC 958), check he lines 27 through 29, and lines 33 and 34.					
an	27	Unrestricted net assets		<u>L</u>	-20,071,988.	27	-24,624,337.
Bal	28	Temporarily restricted net assets			2,570,757.	28	3,080,070.
Þ	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.					
9	30	Capital stock or trust principal, or current funds		30			
8	31	Paid-in or capital surplus, or land, building, or equipm	ent fund	l		31	
As	32	Retained earnings, endowment, accumulated income,	or other	funds		32	
let.	33	Total net assets or fund balances		<u> </u>	-17,501,231.	33	-21,544,267.
_	34	Total liabilities and net assets/fund balances	10,401,080.	34	8,399,635.		

Pa	rt XI Reconciliation of Net Assets									
	Check if Schedule O contains a response or note to any line in this Part XI.					. X				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	30	, 46	68,3	362.				
2	Total expenses (must equal Part IX, column (A), line 25)	2	33	, 14	47,1	L36.				
3	Revenue less expenses. Subtract line 2 from line 1	3	-2	, 6	78,7	774.				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4				231.				
5	Net unrealized gains (losses) on investments	5								
6	Donated services and use of facilities	6								
7	Investment expenses	7								
8	Prior period adjustments	8								
9	Other changes in net assets or fund balances (explain in Schedule O). See Schedule O	9	-1	, 36	64,2	262.				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,									
	column (B))	10	<u>-21</u>	, 54	44,2	<u> 267.</u>				
Pa	Part 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	a Were the organization's financial statements compiled or reviewed by an independent accountant?			2 a		Χ				
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviews separate basis, consolidated basis, or both: Separate basis Both consolidated and separate basis	ed on a								
ı	b Were the organization's financial statements audited by an independent accountant?			2b	X					
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Separate basis X Consolidated basis Both consolidated and separate basis	ite								
•	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?			2 c	Χ					
_	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.									
	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?			3 a		Х				
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required aud or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3 b						
BAA	TEEA0112L 08/03/18		F	orm	990 ((2018)				

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

2018

Open to Public Inspection

	or the organization					•	loyer identifica		er
	ston Symphony Society						-115737		
	t I Reason for Public Cha		•				e instruc	tions.	
The o	organization is not a private found	dation because it is: ((For lines 1 through 12,	check o	nly one	box.)			
1	A church, convention of church	nes, or association of c	hurches described in sec	tion 1 <mark>70</mark> (b)(1)(A)((i).			
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 h	nospital service organ	nization described in sec	ction 17	0(b)(1)(A	A)(iii).			
4	A medical research organiza	tion operated in coni	unction with a hospital	describe	d in sec	ction 170(b)(1)(A)(iii). E	nter the	hospital's
	name, city, and state:	,							
5	An organization operated for section 170(b)(1)(A)(iv). (Co		ege or university owned	or oper	ated by	a governme	ntal unit de	escribed	in
6	A federal, state, or local gov		ental unit described in s	ection 1	70(b)(1))(A)(v).			
7	X An organization that normally r in section 170(b)(1)(A)(vi).	receives a substantial ¡ Complete Part II.)	part of its support from a	governm	ental un	it or from the	general pul	blic descr	ibed
8	A community trust described		(A)(vi). (Complete Part	1.)					
9	An agricultural research organi				oniunctio	on with a land	d-grant colle	ane	
3	or university or a non-land-grai								
	university		•			and otato or	ooogo		
10	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 June 30, 1975. See section 509(a)(2). (Complete Part III.)								
11	An organization organized ar	nd operated exclusive	ely to test for public safe	ety. See	section	1 509(a)(4).			
12	An organization organized an or more publicly supported o	rganizations describe	ed in section 509(a)(1) d	r sectio	n 509(a)(2). See se	ction 50 9(a	ut the pu)(3). Che	rposes of one ck the box in
	lines 12a through 12d that de	escribes the type of s	supporting organization	and con	nplete lir	nes 12e, 12f	, and 12g.		
а	Type I. A supporting organization organization (s) the power to recomplete Part IV, Sections A	gularly appoint or elec	t a majority of the directo	ported or rs or trus	organizat stees of t	the supporting	lly by giving g organizati	g the supp on. You n	oorted nust
b	Type II. A supporting organiz management of the supporting must complete Part IV. Secti	organization vested in	controlled in connection the same persons that c	with its ontrol or	support manage	ted organiza the supporte	tion(s), by ed organizat	having c ion(s). Yo	ontrol or ou
С	· '		tion operated in connectio	n with, a	nd function	onally integra	ted with, its	supported	d
d									
	functionally integrated. The continuations instructions. You must com	organization generally	y must satisfy a distribu	tion req	uiremen	it and an att	entiveness	requiren	nent (see
е	Check this box if the organiz integrated, or Type III non-fu	ation received a writt inctionally integrated	ten determination from supporting organization	the IRS	that it is	s a Type I, T	ype II, Typ	e III fund	tionally
	Enter the number of supported	-							
	Provide the following information	n about the supporte	d organization(s).			1			
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	organizat in your g	s the tion listed poverning ment?	(v) Amount support (see			Amount of other (see instructions)
				Yes	No				
(A)									
(B)									
(C)	с)								
(D)	(D)								
<u>(E)</u>									
.									

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						
begi	ndar year (or fiscal year nning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	22062498.	18418761.	21024630.	18447168.	17930495.	97,883,552.
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.
	Total. 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)	22062498.	18418761.	21024630.	18447168.	17930495.	97,883,552. 31,832,206.
6	Public support. Subtract line 5 from line 4						66,051,346.
Sec	tion B. Total Support						· · · · · · · · · · · · · · · · · · ·
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	22062498.	18418761.	21024630.	18447168.	17930495.	97,883,552.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	102,367.	38,618.		42,666.	50,810.	234,461.
9	Net income from unrelated business activities, whether or not the business is regularly carried on	·	·		·	·	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						98,118,013.
12	Gross receipts from related activ	ities, etc. (see ins	structions)			12	55,168,007.
13	First five years. If the Form 990 is organization, check this box and	for the organization stop here	's first, second, thi	rd, fourth, or fifth t	ax year as a sectio	n 501(c)(3)	▶ □
Sec	tion C. Computation of Pul Public support percentage for 20	olic Support P	ercentage				
	Public support percentage for 20 Public support percentage from 2						67.32 %
	33-1/3% support test-2018. If the	ne organization di	d not check the b	ox on line 13, and	d line 14 is 33-1/3	or more, checl	68.44 % k this box
b	and stop here. The organization 33-1/3% support test—2017. If th and stop here. The organization	e organization did	I not check a box	on line 13 or 16a	, and line 15 is 33	3-1/3% or more, o	check this box
17a	10%-facts-and-circumstances te 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 Part	t VI how
	10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-and	meets the 'facts-a d-circumstances' t	ind-circumstances est. The organiza	s' test, check this ition qualifies as a	box and stop her a publicly support	e. Explain in Parted organization.	t VI how the▶
18	Private foundation. If the organiz	zation did not che	ck a box on line 1	3, 16a, 16b, 17a	, or 17b, check thi	s box and see ins	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	osts fisted selett,	prodes semprete :	u. (11.)					
Calend	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total		
1	Gifts, grants, contributions, and membership fees received. (Do not include any unusual grants.)	.,					7		
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								
	Total. 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				1				
	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total		
	Amounts from line 6								
	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.).								
	Total support. (Add lines 9, 10c, 11, and 12.)								
	First five years. If the Form 990 organization, check this box and	stop here	· · · · · · · · · · · · · · · · · · ·						
	tion C. Computation of Pul					, ,			
	Public support percentage for 20	•			•		%		
	Public support percentage from 2					16	0/0		
	tion D. Computation of Inv					1 1			
17	Investment income percentage for	•	• • •	-			0,0		
18	Investment income percentage fi						%		
	33-1/3% support tests—2018. If t is not more than 33-1/3%, check	this box and sto	p here. The organ	ization qualifies	as a publicly supp	orted organization	▶ ∐		
	line 18 is not more than 33-1/3%	33-1/3% support tests—2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and ine 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions							

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 Part VI 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 Part VI how the organization determined that the supported organization was			
	described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below.	За		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in Part VI when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in Part VI what controls the organization put in place to ensure such use.	3с		
4 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		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5а	Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by	5a		
b	amendment to the organizing document). Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?			
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5b 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 'Yes,' provide detail in Part VI.</i>	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as 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 Part VI .	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 Part VI .	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 Part VI .	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		

P a	art iv Supporting Organizations (Continued)			
			Yes	No
	Has the organization accepted a gift or contribution from any of the following persons?			
	a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
	b A family member of a person described in (a) above?	11b		
	c A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.	11c		
Se	ction B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Se	ction C. Type II Supporting Organizations			
	,		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Se	ction D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played in this regard.	3		
Se	ction 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).			
	a The organization satisfied the Activities Test. Complete line 2 below.			
	b The organization is the parent of each of its supported organizations. Complete line 3 below.			
	c The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	ıstruci	tions).	
2	Activities Test. Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i>			
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If 'Yes,' describe in Part VI the role played by the organization in this regard.</i>	3b		

Page 6

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 trust instructions. All other Type III non-functionally integrated supporting organization	on No	ov. 20, 1970 (explain ir st complete Sections A	Part VI). See 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):			
á	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	d Total (add lines 1a, 1b, and 1c)	1d		
	e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035.	6		
_ 7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
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	3	4		
	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally inte (see instructions).	grated		-
BAA			Schedule A (Fo	orm 990 or 990-F7) 2018

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Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (co	ontinued)
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	Total annual distributions. Add lines 1 through 6.	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	

9 Distributable amount for 2018 from Section C, line 6

10 Line 8 amount divided by line 9 amount

Section E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required — explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2018			
a From 2013			
b From 2014			
c From 2015			
d From 2016			
e From 2017			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2018 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2019. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2014			
b Excess from 2015			
c Excess from 2016			
d Excess from 2017			
e Excess from 2018			
BAA		Schedule A (Fo	rm 990 or 990-EZ) 20

BAA

Schedule A (Form 990 or 990-EZ) 2018

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

2018

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 not treated as a	private 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	
	D. C. CID.	
Check if your organization is covered by the General	Rule or a Special Rule.	
Note: Only a section 501(c)(7), (8), or (10) orga	anization 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. Comple	 c, 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 tor'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.	l6a, or 16b, and that
For an organization described in section 50 during the year, total contributions of more purposes, or for the prevention of cruelty to contributor name and address), II, and III.	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 (entering 'N/A' in colu	rom any one contributor, terary, or educational umn (b) instead of the
during the year, contributions exclusively fo \$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 General Rule applies to this organiale, 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 must answer 'No' on Part IV. Iin	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) (2018)

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

Employer identification number

Houston Symphony Society

(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$1,600,000.	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		\$1,055,250.	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		\$3,759,147.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(6)	(4)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
Number	Name, address, and ZIP + 4	Total contributions	Person X Payroll
_	Name, address, and ZIP + 4	contributions	Person X Payroll Noncash (Complete Part II for
4(a)	(b)	\$862,578.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
4 (a) Number	(b)	\$ 862,578. (c) Total contributions	Person X Payroll Noncash (Complete Part II for noncash contributions.) (d) Type of contribution Person X Payroll Noncash (Complete Part II for the contribution)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018) Name of organization Houston Symphony Society

Employer identification number

Part I	Contributors (see instructions).	Use duplicate copies of Par	t I if additional space is needed.
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(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$750,000.	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
		\$	Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)

1 1 Pa

Houston Symphony Society

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

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional sp	pace is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	N/A		
		\$ 	
(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
		_	
		İ\$	

Houston Symphony Society

Employer identification number

or (10) that total more than \$1,000 for the following line entry. For organizations of	he year from any one contrib ompleting Part III, enter the tota	outor. Comple al of <i>exclusiv</i> e	ete columns (a) through (e) and ely religious, charitable, etc.,
Use duplicate copies of Part III if additional	space is needed.		(d) Description of how gift is held
N/A			
Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Rela	ationship of transferor to transferee
(b) Purpose of gift	Use of gift		(d) Description of how gift is held
Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Rela	ationship of transferor to transferee
(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Rela	ationship of transferor to transferee
(b)	(c)		(d)
Purpose of gift	Use`of gift		(d) Description of how gift is held
Transferee's name, addres		Rela	ationship of transferor to transferee
	·		
	or (10) that total more than \$1,000 for the following line entry. For organizations of contributions of \$1,000 or less for the year. Use duplicate copies of Part III if additional N/A	or (10) that total more than \$1,000 for the year from any one contribit the following line entry. For organizations completing Part III, enter the total contributions of \$1,000 or less for the year. (Enter this information once. So Use duplicate copies of Part III if additional space is needed. (b) Purpose of gift N/A Transferee's name, address, and ZIP + 4 Purpose of gift Use of gift Transferee's name, address, and ZIP + 4 Transferee's name, address, and ZIP + 4 Purpose of gift Transferee's name, address, and ZIP + 4 Transfereo's name, address, and ZIP + 4 Transfereo's name, address, and ZIP + 4 Purpose of gift Transfereo's name, address, and ZIP + 4	Purpose of gift N/A Transferee's name, address, and ZIP + 4 Transfer of gift Transferee's name, address, and ZIP + 4 Transfer of gift Transferee's name, address, and ZIP + 4 Transfer of gift Transferee's name, address, and ZIP + 4 Rela Transferee's name, address, and ZIP + 4 Rela Transferee's name, address, and ZIP + 4 Rela Transferee's name, address, and ZIP + 4 Transfer of gift Transferee's name, address, and ZIP + 4 Rela Transferee's name, address, and ZIP + 4

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection
Employer identification number

	Houston Symphony Society			74-1157373
Par	t Organizations Maintaining Dono			counts.
	Complete if the organization answ	vered 'Yes' on Form 990, Part IV	/, line 6.	
		(a) Donor advised funds	(b)	Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and dor are the organization's property, subject to the	or advisors in writing that the assets he organization's exclusive legal control?	ld in donor advised	d funds
6	Did the organization inform all grantees, donor for charitable purposes and not for the benefit impermissible private benefit?	of the donor or donor advisor, or for an	v other purpose co	nferring
Par	Conservation Easements. Complete if the organization answ	vered 'Yes' on Form 990, Part IV	/, line 7.	
1	Purpose(s) of conservation easements held by		,	
	Preservation of land for public use (e.g., r	ecreation or education)	ation of a historica	ally important land area
	Protection of natural habitat	Preserv	ation of a certified	historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization h	eld a qualified conservation contribution in	the form of a conse	rvation easement on the
	last day of the tax year.			Held at the End of the Tax Year
	Total number of conservation easements			Tield at the Lind of the Tax Teal
	Total acreage restricted by conservation easer		-	
	: Number of conservation easements on a certif			
	Number of conservation easements included in	, ,	 	
•	structure listed in the National Register		2d	
3	Number of conservation easements modified, trantax year ►	sferred, released, extinguished, or terminat	ted by the organizati	on during the
4	Number of states where property subject to conse	rvation easement is located >		
5	Does the organization have a written policy re-			
	and enforcement of the conservation easemer			
6	Staff and volunteer hours devoted to monitoring, i	nspecting, handling of violations, and enfor	cing conservation ea	asements during the year
7	Amount of expenses incurred in monitoring, inspe	cting, handling of violations, and enforcing	conservation easem	nents during the year
8	Does each conservation easement reported or and section 170(h)(4)(B)(ii)?	line 2(d) above satisfy the requirement	s of section 170(h)	(4)(B)(i)
9	In Part XIII, describe how the organization reports include, if applicable, the text of the footnote to conservation easements.	conservation easements in its revenue and o the organization's financial statements	d expense statements that describes the	t, and balance sheet, and e organization's accounting for
Par		ctions of Art, Historical Treasure vered 'Yes' on Form 990, Part IV	es, or Other Si /, line 8.	milar Assets.
1 8	If the organization elected, as permitted under art, historical treasures, or other similar assets he in Part XIII, the text of the footnote to its finan	ld for public exhibition, education, or resea	rch in furtherance of	ent and balance sheet works of public service, provide,
ŀ	If the organization elected, as permitted under historical treasures, or other similar assets held for following amounts relating to these items:	r public exhibition, education, or research i	in furtherance of pub	olic service, provide the
	(i) Revenue included on Form 990, Part VIII,			
	(ii) Assets included in Form 990, Part X \dots			
	If the organization received or held works of art, hamounts required to be reported under SFAS	I16 (ASC 958) relating to these items:		
	Revenue included on Form 990, Part VIII, line	1		
	Accete included in Form 990 Part Y			▶ \$

Part III Organizat	ions Maintai	ining Colle	ections	of Art, Histo	orical	Treasures, or	r Othei	r Similar Ass	ets (c	ontinu	ıed)
3 Using the organizat items (check all the	ion's acquisition, at apply):	, accession, a	nd other	records, check a	any of t	he following that a	re a sign	nificant use of its	collection	n	
a Public exhibiti	on			d Loan	or exc	hange programs					
b Scholarly rese	arch			e Other	·						
c Preservation f	or future genera	ations		_						•	
4 Provide a description Part XIII.	· ·				•	· ·	·				
5 During the year, d to be sold to raise	funds rather th	nan to be ma	intained	as part of the of	organiz	zation's collection	?		Yes		No
Part IV Escrow ar	eported an a	amount on	Form	990, Part X,	the of	rganization an 21.	swered	d 'Yes' on Fo	rm 99	u, Par	t IV,
1 a Is the organization	an agent, trus	tee, custodia	an or oth	er intermediary	for co	ntributions or oth	er asset	ts not included	-	F	٦
on Form 990, Part									Yes	·	No
b If 'Yes,' explain th	e arrangement	in Part XIII a	ana com	plete the follow	ing tat	ole:			Λ 100 0 1 1 10		
- Paginning halanas									Amour	π	
c Beginning balanced Additions during the											
e Distributions during to											
f Ending balance								-			
2a Did the organization									Yes		No
b If 'Yes,' explain th								- 1			
Part V Endowme	mt Funda O	omanlata if	the ere	vanisation or		ad Waal on Fa	OO	10 Dort IV Lin	. 10		
Part v Endowme	nt Funds. C				1	red 'Yes' on Fo) Three years back		Four years	o book
1 a Beginning of year	halance	(a) Current 76,888	-	(b) Prior yea 74,610,5		(c) Two years back 72,640,98		75,501,151	_	,729,	
b Contributions	F		, 720.	352,0		553,84		4,109,801.		,729,	
_	F	332	, 120.	332,0	119.	333,04	4.	4,109,001.)	, / ,	300.
c Net investment ea and losses		2,010	118	5,996,8	874	6,524,79	7 -	2,437,539.	2	,331,	320
d Grants or scholars	-	2,010	, 110.	3,330,0	,,,,,	0,324,73	' 	2,457,555.		, 551,	320.
e Other expenditure	·										
and programs		3,759	,147.	4,071,1	12.	5,109,10	6.	4,532,433.	4	,271,	391.
f Administrative exp	enses										
g End of year baland		75,471		76,888,2		74,610,51		2,640,980.	75	,501,	151.
2 Provide the estimate	ated percentage	e of the curre	nt year	end balance (lir	ne 1g,	column (a)) held	as:				
a Board designated o	•			<u>.01</u> %							
b Permanent endowm		99.08 %									
c Temporarily restric			0.9								
The percentages or	ı lines 2a, 2b, ar	nd 2c should e	equal 100	%.							
3 a Are there endowme	nt funds not in tl	he possession	of the o	rganization that	are hel	d and administered	d for the				
organization by:		·								Yes	No
(i) unrelated orga									3a(i)		X
(ii) related organiz									3a(ii)	X	
b If 'Yes' on line 3a(• • •	•		•					. 3b	X	
4 Describe in Part X				ation's endowm	ent fur	nds. See Par	t XII	I			
Part VI Land, Buil Complete				'Yes' on For	m 99	0, Part IV, line	e 11a. :	See Form 99	0, Pa	rt X, Iir	ne 10.
Description	on of property			or other basis vestment)		Cost or other casis (other)	(c) A	Accumulated preciation	(d)	Book va	alue
1 a Land				•		16,915.				16.	,915.
b Buildings						,					
c Leasehold improve	ements					284,878.		279,186.		5.	,692.
d Equipment						2,842,727.	2	,063,568.			,159.
e Other						128,675.		99,713.			,962.
Total. Add lines 1a thro	ugh 1e. (Colum	n (d) must e	qual For	m 990, Part X,	colum						,728.
DAA								Calaad	ula D /F	Orm 000	

Schedule D (Form 990) 2018

	Investments -			N/A	
), Part IV, line 11b. See Forn	
(a) Desci	ription of security or cate	egory (including name of security)	(b) Book value	(c) Method of valuation: Cost or er	nd-of-year market value
` '					
(2) Closely	y-held equity interes	sts			
(3) Other					
(A)					
(B)					
(C)					
(D)					
(E)					
<u>(F)</u>					
(G) (H)					
			-		
(l)	nn (h) must saual Form 0	 190, Part X, column (B) line 12.) •			
		- Program Related.		N/A	
rart viii	Complete if the	e organization answere	d 'Yes' on Form 990), Part IV, line 11c. See Form	n 990, Part X, line 13.
	(a) Description of		(b) Book value	(c) Method of valuation: Cost or e	
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
Part IX		90, Part X, column (B) line 13.) •			
raitix	Other Assets. Complete if the	e organization answere	N/A d 'Yes' on Form 990), Part IV, line 11d. See Form	n 990, Part X, line 15.
raitix	Complete if the		d 'Yes' on Form 990 escription), Part IV, line 11d. See Form	n 990, Part X, line 15. (b) Book value
(1)	Complete if the		d 'Yes' on Form 990), Part IV, line 11d. See Form	
(1)	Complete if the		d 'Yes' on Form 990), Part IV, line 11d. See Form	
(1) (2) (3)	Complete if the		d 'Yes' on Form 990), Part IV, line 11d. See Form	
(1) (2) (3) (4)	Complete if the		d 'Yes' on Form 990), Part IV, line 11d. See Form	
(1) (2) (3) (4) (5)	Complete if the		d 'Yes' on Form 990), Part IV, line 11d. See Form	
(1) (2) (3) (4) (5) (6)	Complete if the		d 'Yes' on Form 990), Part IV, line 11d. See Form	
(1) (2) (3) (4) (5) (6) (7) (8)	Complete if the		d 'Yes' on Form 990), Part IV, line 11d. See Form	
(1) (2) (3) (4) (5) (6) (7) (8) (9)	Complete if the		d 'Yes' on Form 990), Part IV, line 11d. See Form	
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)	Complete if the	(a) De	d 'Yes' on Form 990), Part IV, line 11d. See Form	
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co	Complete if the	(a) De	d 'Yes' on Form 990), Part IV, line 11d. See Form	
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)	Complete if the	(a) De	d 'Yes' on Form 990 escription), Part IV, line 11d. See Form	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co	Complete if the	(a) De al Form 990, Part X, column al Form 990, Part X, column again anization answered 'Yes' on	d 'Yes' on Form 990 escription (B) line 15.)), Part IV, line 11d. See Form	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co	Complete if the office of the complete if the comple	(a) De	d 'Yes' on Form 990 escription), Part IV, line 11d. See Form	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co	Other Liabilitie Complete if the Complete if the org (a) Descrip ral income taxes	(a) De all Form 990, Part X, column as a second sec	(B) line 15.)	le or 11f. See Form 990, Part X, line	(b) Book value
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(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co Part X (1) Fede (2) Acc (3) Due (4) (5) (6) (7)	Other Liabilitie Complete if the Complete if the org (a) Descrip real income taxes crued pension	(a) De al Form 990, Part X, column as a second seco	(B) line 15.)	le or 11f. See Form 990, Part X, line	(b) Book value
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(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co Part X (1) Fede (2) Acc (3) Due (4) (5) (6) (7) (8) (9) (10) (11) Total. (Column	Other Liabilitie Complete if the Complete if the org (a) Descrip ral income taxes rued pension to affiliat	(a) Definition of liability liability ed organization 190, Part X, column (B) line 25.)	(B) line 15.)	e or 11f. See Form 990, Part X, line 3.	(b) Book value

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per F	Return. N/A
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	
1 Total revenue, gains, and other support per audited financial statements	. 1
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
a Net unrealized gains (losses) on investments	
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.	. 2e
3 Subtract line 2e from line 1.	. 3
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	" Detruce N / A
	r Return. N/A
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	r Return. N/A
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements	
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:	
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. 2 a 2 c	
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. 2 a 2 b	
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. 2 a 2 c	. 1
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.). 2 d	. 1
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:	. 1
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. 4 a	. 1
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. 4 a b Other (Describe in Part XIII.) 4 b	2e 3
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.	2e 3
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. 4 a b Other (Describe in Part XIII.) 4 b	2e 3

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 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) 2018

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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 instructions and the latest information.

2010

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Name of the organization
Houston Symphony Society
Tundraising 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.

1	Indicate whether the organization	raised funds thr	ough any		~		
	Mail solicitations				X Solicitation of non-		
k	Internet and email solicitations	S		f	X Solicitation of gove	rnment grants	
C	: X Phone solicitations			g	X Special fundraising	events	
C	IX In-person solicitations						
	Did the organization have a written of employees listed in Form 990, Pal	rt VII) or entity i	n connect	ion with p	rofessional fundraising	services?	
t	olf 'Yes,' list the 10 highest paid incompensated at least \$5,000 by the	dividuals or enti ne organization.	ties (fundi	raisers) pu	rsuant to agreements u	under which the fundrai	ser is to be
(i)	Name and address of individual or entity (fundraiser)	(ii) Activity	have_custoo	fundraiser dy or control ibutions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in column (i)	(vi) Amount paid to (or retained by) organization
	SD&A Teleservices, Inc.		Yes	No			_
1	5757 W. Century Blvd #300						
	Los Angeles CA 90045	Telefundng		X	32,760.	18,096.	14,664.
	DCM						
2	330 W 38th St. #207						
	New York NY 10018	Telefundng		X		8,574.	
3							
4							
5							
6							
7							
8							
9							
10							
Гotа	l	1	1	 	32,760.	26,670.	14,664.
3	List all states in which the organizati or licensing.				ontributions or has been	notified it is exempt from	
	<u>TX</u>				. – – – – – – – –		

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) Event #2	(c) Other events	(d) Total events (add column (a)		
R			Ball (event type)	Opening Night (event type)	2 (total number)	through column (c))		
REVENUE		Oint-	1 055 104	F0.4.0F0	601 500	0 670 000		
Ď N	1	Gross receipts	1,257,134.	734,378.	681,508.	2,673,020.		
	2	Less: Contributions	841,603.	323,128.	423,703.	1,588,434.		
	3	Gross income (line 1 minus line 2)	415,531.	411,250.	257,805.	1,084,586.		
	4	Cash prizes						
D	5	Noncash prizes						
D R E C T	6	Rent/facility costs		4,500.	13,547.	18,047.		
	7	Food and beverages	155,406.	126,613.	124,927.	406,946.		
X	8	Entertainment	48,630.	3,990.	2,660.	55,280.		
EXPENSES	9	Other direct expenses	306,696.	201,333.	133,231.	641,260.		
S	10	Direct expense summary. Add lines 4 three						
Davi	11	Net income summary. Subtract line 10 fro				-36,947.		
<u>Par</u>	l III	Gaming. Complete if the organiza \$15,000 on Form 990-EZ, line 6a.	tion answered res	s on Form 990, Par	rt iv, line 19, or rep	ported 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	1	Gross revenue						
_	2	Cash prizes						
D P E N C E S T S	3	Noncash prizes						
C S T E S	4	Rent/facility costs						
	5	Other direct expenses						
	6	Volunteer labor	Yes 8	Yes% No	Yes 8			
	7	Direct expense summary. Add lines 2 thr	ough 5 in column (d)					
	8	Net gaming income summary. Subtract li	ne 7 from line 1, colum	nn (d)	>			
9 Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? b If 'No,' explain:								
10 a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?								

Sche	dule G (Form 990 or 990-EZ) 2018 Houston Symphony Society	74-1157373	Page 3
11	Does the organization conduct gaming activities with nonmembers?		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?		No
13	Indicate the percentage of gaming activity conducted in:		
ā	The organization's facility.	13a	%
ŀ	An outside facility.	13b	%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and reco	rds:	
	Name •		
	Address ►		
ŀ	Does the organization have a contract with a third party from whom the organization receives gaming reverse of Yes,' enter the amount of gaming revenue received by the organization \$ and of gaming revenue retained by the third party \$ If 'Yes,' enter name and address of the third party:		i No
	Name ►		
	Address ►		
16	Gaming manager information:		
	Name ►		
	Gaming manager compensation ► \$		
	Description of services provided		
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
â	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	e	i ∏No
ŀ	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 ► \$		
Par	Supplemental Information. Provide the explanations required by Part I, line 2b, and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide information. See instructions.	columns (iii) and any additional	(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

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Houston Symphony Society

Employer identification number 74-1157373

Pai	t I Questions Regarding Compensation			
			Yes	No
1 a	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. Part III			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments \overline{X} Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
	I form of the house on line 1e are checked did the armonimation follows a written notice recording no month or			
ı	a 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	1 b	Х	
2	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	Х	
3	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 X Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	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: a Receive a severance payment or change-of-control payment?	40	v	
	b Participate in, or receive payment from, a supplemental nonqualified retirement plan?			v
	c Participate in, or receive payment from, a supplemental nonqualined retirement plans	4 b		X
•	If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Part III	_		Λ
	Ture 111			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	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:			
á	a The organization?	5 a		Х
ŀ	a Any related organization?	5 b		Х
	If 'Yes' on line 5a or 5b, describe in Part III.			
6	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:			
á	a The organization?	6 a		Х
ŀ	Any related organization?	6 b		Х
	If 'Yes' on line 6a or 6b, describe in Part III.			
7	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		Х
8	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	8		Х
9	If 'Yes' on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations			
•	section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2018

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-MI	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
John Mangum	(i)	290,186.	0.	24,645.	0.	20,433.	335,264.	0.
1 CEO/Exec Dir	(ii)	0.	0.	0.	0.	0.	0.	0.
Elizabeth Condic	(i)	172,375.	0.	0.	834.	27,523.	200,732.	0.
2 CFO	(ii)	0.	0.	0.	0.	0.	0.	0.
Andres Orozco-Estrada	(i)	116,635.	0.	314,115.	0.	28,382.	459,132.	0.
3 Artistic Director	(ii)	0.	0.	0.	0.	0.	0.	0.
Vicky Dominguez	(i)	177,941.	0.	0.	7,170.	11,033.	196,144.	0.
4 COO	(ii)	0.	0.	0.	0.	0.	0.	0.
Trazanna Moreno	(i)	125,890.	0.	26,938.	4,603.	19,629.	177,060.	0.
5 CMO to Aug 2018	(ii)	0.	0.	0.	0.	0.	0.	0.
Mark Nuccio	(i)	215,923.	0.	0.	6,380.	28,382.	250,685.	0.
6 Musician	(ii)	0.	0.	0.	0.	0.	0.	0.
Eric Halen	(i)	191,329.	0.	0.	6,502.	15,889.	213,720.	0.
7 Musician	(ii)	0.	0.	0.	0.	0.	0.	0.
Brinton Smith	(i)	185,304.	0.	0.	6,502.	23,271.	215,077.	0.
8 Musician	(ii)	0.	0.	0.	0.	0.	0.	0.
Jonathan Fischer	(i)	185,069.	0.	0.	6,502.	11,027.	202,598.	0.
9 Musician	(ii)	0.	0.	0.	0.	0.	0.	0.
Mark Hughes	(i)	170,449.	0.	0.	6,502.	23,271.	200,222.	0.
10 Musician	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)		L		L		L]
11	(ii)							
	(i)		L		L		L]
12	(ii)							
	(i)		L		L		L]
13	(ii)							
	(i)		L		L		L]
14	(ii)							
	(i)		L		L		L	
15	(ii)							
	(i)		L		L		L	
16	(ii)			_				
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TEEA4102L 10/29/18

Schedule J (Form 990) 2018

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

The Society paid dues/entertainment costs to The Coronado Club on behalf of John Mangum during the fiscal year for a total \$25,236.34 (of which \$13,140.50 was membership fees). This amount was not treated as taxable compensation. Due to the social aspect of his position as CEO, these benefits are customary and necessary.

Part I, Line 4 - Received Severance, Supplemental NQ Retirement, Equity-Based Compensation

Trazanna Moreno received a severance package of \$26,938.

TEEA4103L 10/29/18

SCHEDULE L (Form 990 or 990-EZ)

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 2018

Open To Public Inspection

Department of the Treasury Internal Revenue Service 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 person and (d) Corrected? (c) Description of transaction 1 (a) Name of disqualified person 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 (e) Original principal amount (i) Written agreement? (a) Name of interested person (c) Purpose of (f) Balance due (g) In default? Τo From Yes No Yes No Yes No (1) (2)(3) (4) (5) (6)(7)(8) (9) (10)**▶**\$ Total **Grants or Assistance Benefiting Interested Persons.** Part III Complete if the organization answered 'Yes' on Form 990, Part IV, line 27. (b) Relationship between interested person and the organization (a) Name of interested person (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) 2018

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	(e) Sha organiz rever	aring of ization's nues?	
				Yes	No	
(1) Rand Group	Owned by Gov Dir	100,385.	IT services		Х	
(2) CCM, LP	Owned by Gov Dir	332,790.	Rent		Х	
(3) Betsy Cook Weber	Trustee Spouse	51,923.	Compensation		Х	
(4)						
(5)						
(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)

Noncash Contributions

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

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

► Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization			Emp	loyer identification number
Houston Symphony Society			74	-1157373
Part I Types of Property				
·	(a) Check if	(b) Number of	(c) Noncash contribution	(d) Method of determining

		applicable	contributions or items contributed	amounts reported on Form 990, Part VIII, line 1g	noncash	contributi	on ar	nounts
1	Art – Works of art							
-	Art – Historical treasures.							
	Art – Fractional interests.							
4	Books and publications.							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities – Publicly traded	Х	13	116,721.	EM77			
10	Securities – Closely held stock	Λ	13	110,721.	LMA			
11								
	Securities – Miscellaneous							
	Qualified conservation contribution —							
	Historic structures							
	Qualified conservation contribution — Other							
	Real estate — Commercial							
17	Real estate – Other							
18								
	Food inventory.							
	Drugs and medical supplies							
	Historical artifacts.							
	Scientific specimens							
23								
	Archeological artifacts.	V	100	212 025	T'NAT 7			
20	Other (Auction items)	X X	198 13	212,025.				
	Other► (<u>Raffle_items</u>)	Λ	13	15,983.	I M V			
28								
29	Number of Forms 8283 received by the organization d organization completed Form 8283, Part IV, Done				29			
	organization completed from 0200, Fart IV, Bone	c / teltilowiec	igomont		23	Y	es	No
							C3	110
30a	During the year, did the organization receive by contri it must hold for at least three years from the date	bution any pr	operty reported in Part I,	lines 1 through 28, that	cod			
	for exempt purposes for the entire holding period?					30 a		X
h	If 'Yes,' describe the arrangement in Part II.					304		71
	Does the organization have a gift acceptance police	cv that requi	res the review of any n	onstandard contributio	ns?	31	Х	
	Does the organization hire or use third parties or i							
	noncash contributions?	•				32 a		X
	If 'Yes,' describe in Part II.	(-) (data and many 2001	ll			
33	If the organization didn't report an amount in colu describe in Part II.	mn (c) for a	type of property for wh	nich column (a) is chec	ked,			
					_ 			

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

Schedule M (Form 990) 2018

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 10/22/18 **Schedule M (Form 990) 2018**

SCHEDULE 0 (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.

2018

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection

OMB No. 1545-0047

Houston Symphony Society

74-1157373

Employer identification number

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

Artistic Endeavors

Music Director Andrés Orozco-Estrada began his fifth season at the helm of the Houston Symphony with a tour of 33 musicians to his home country of Colombia to commemorate the 31st anniversary of the Teatro Metropolitano in Medellín. Soloist Hilary Hahn joined the orchestra for the sold-out concert, performing Sibelius's ever-challenging Violin Concerto. Back home, the 2018-19 Season kicked off with its Opening Night program featuring the illustrious pianist Yuja Wang conquering Ravel's virtuosic Concerto for the Left Hand. September at the Symphony featured powerful works of reflection, including Mahler's Resurrection, sung by soprano Nicole Heaston, and Dvorák's Stabat Mater, which included the Houston Symphony Chorus. Andrés continued his exploration of Charles Ives by programming one movement each from his Fourth Symphony onto four different concerts throughout the year, encouraging patrons to continually return to hear the full piece. The Season welcomed familiar favorites, such as Tchaikovsky's Violin Concerto and Brahms's Fourth Symphony; also featured were 20th Century nuances from Gershwin's original jazz band score to Rhapsody in Blue and a semi-staged production of Kurt Weill's The Seven Deadly Sins which highlighted the vocal talents of Storm Large. In March, the Symphony and Chorus presented Orff's visceral Carmina Burana. After each concert, quests ushered into the lobby to hear a DJ who remixed elements from the piece to create a modern "house music" version of the familiar work. The season concluded with another semi-staged production, this time Bartók's riveting thriller, Bluebeard's Castle. The cast included mezzo-soprano Michelle DeYoung and baritone Matthias Goerne while Adam Larsen designed the set of mesh curtains that draped the stage to create the series of doors pivotal to the piece's

Name of the organization

Houston Symphony Society

74-1157373

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

Eschenbach, as well as a host of esteemed guest soloists including Itzhak Perlman,
Joshua Bell, Letica Moreno, and Susan Graham. The season also premiered Jimmy López
Bellido's Aurora under the baton of the music director.

Steven Reineke returned from his second season as Principal POPS conductor, kicking off the season with a glitzy homage to the wonder and excitement of Las Vegas.

Vocalist and pianist Frankie Moreno performed a wide array of works from Frank

Sinatra, the Beatles, and even Elvis. The season continued by welcoming Finnish a capella ensemble Rajaton for a tribute to ABBA. Also included this year were two films-to-live-orchestra, An American in Paris, featuring upbeat tunes by Gershwin, and the first installment of Star Wars, which was met with sold-out bravo by audiences. Broadway legend Ali Ewoldt ushered in holiday cheer with the Symphony and Chorus in December for its annual Very Merry Pops. For Valentines Day weekend, a trio of Broadway stars, Montego Glover, Capathia Jenkins, and N'Kenge, schmoozed audiences with romantic standards by the great Ella Fitzgerald, and in April beloved former conductor Michael Krajewski returned as the Cirque de la Symphonie troupe performed death-defying aerial stunts above the orchestra. The 2018-19 POPS Season also included a vintage weekend of 1980s hits and a musical journey of Broadway hits old and new.

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

Education and Community

The Houston Symphony is committed to increasing the quality of life in Houston by addressing priority community issues, including education, healthcare, building community between disparate populations, and improving the welfare of underserved populations. The Symphony accomplishes this by presenting an extraordinary range of music education and community engagement programs both inside Jones Hall and in

Name of the organization

Houston Symphony Society

74-1157373

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

community venues throughout the Greater Houston area.

Through nearly 1,000 interactions with Houston Symphony musicians and Community-Embedded Musicians, partnerships with schools, community centers, hospitals and other non-profits, the Society serves a wide range of Houstonians that reflects the diversity of the city. Whether they are underserved students, cancer patients, refugees, or homeless families, we put the people we serve first, asking how music can best meet their needs. Our goal is to remove economic and geographical barriers to music so that Houstonians from all walks of life can benefit from the art form. Houston Symphony Education and Community Engagement programs served more than 200,000 Houstonians of all ages and backgrounds and represented an investment of \$6.4 million, or over 18% of the annual organization budget, during the 2018-19 Season.

Form 990, Part VI, Line 1a - Explanation of Delegated Broad Authority to Committee

There shall be an Executive Committee of the Society composed of not more than fifteen of the Governing Directors of the Society, exclusive of ex-officio members. The Executive Committee shall consist of the Society's President, Chairman of the Board of Trustees, President-Elect (if and when in office), Vice Presidents, General Counsel, Secretary, and such other persons as may be designated annually by the President from among the elected Governing Directors.

The Executive Committee shall have the power to propose the strategic direction of the Society for approval by the Governing Directors, propose any major policy of the Society for approval by the Governing Directors, propose the disposition of the properties and funds of the Society (through the proposal of the Society's budget) to the Governing Directors, make recommendations to the Governing Directors to

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

Form 990, Part VI, Line 1a - Explanation of Delegated Broad Authority to Committee (continued)

retain or terminate the employment of the Music Director, and to take such other actions as shall be delegated to the Executive Committee by the Governing Directors from time to time.

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, Governing 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.

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

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 Society 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 President, Board Chairman, and any other members as may be appointed by the Executive Committee, 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 the Houston Symphony website. Governing documents are available upon request through the Symphony offices.

	<u> </u>
Name of the organization	Employer identification number
Houston Symphony Society	74-1157373

Form 990, Part IX, Line 11g Other Fees For Services

		(A)	(B)	(C)		(D)
	_	Total	Program Services	Management <u>& General</u>	_	Fund- raising
Artist fees		3,914,078.	3,914,078.			
Professional services		249,499.		134,395.		115,104.
	Total	\$ 4,163,577.	\$ 3,914,078.	\$ 134,395.	\$	115,104.

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

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

► 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.

2018

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

Part I Identification of Disregarded Entities. C	Complete i	if the organiza	ition ansv	vered 'Yes'	on Form 9	990, Part IV, lind	e 33.				
(a) Name, address, and EIN (if applicable) of disregarded er	ntity	(b) Primary ac	tivity	(c) Legal domici or foreign c	ile (state country)	(d) Total income	End-c	(e) if-year assets	Direc	(f) t control entity	ling
<u>(1)</u>											
<u>(2)</u>											
<u>(3)</u>											
Part II Identification of Related Tax-Exempt Or had one or more related tax-exempt organized to the control of	r ganizatio anizations	ons. Complete s during the ta	if the org ax year.	ganization a	nswered '	Yes' on Form 9	90, Part	: IV, line 34,	becaus	se it	
(a) Name, address, and EIN of related organization	Prima	(b) ary activity	Legal dom	c) icile (state n country)	(d) Exempt Coo section	de Public charit (if section 50		(f) Direct contro entity	olling	(g) Sec 512(l controlled	b)(13)
(1) Houston Symphony Endowment										Yes	No
O DOUSTON SYMBHONY FINDOWNIENT.			1								

Part III	Identification of Related Organizations Taxable as a Partnership	Complete if the organization answered 'Yes' on Form 990, Part IV, line 34,
	because it had one or more related organizations treated as a part	rtnership 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	l tior	h) ropor- nate itions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana part	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) 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(b)(13) controlled entity?	
		country)	Critity	or trusty				Yes	No
(1)									
	Ī								
	Ī								
(2)									-
=======================================	†								
	†								
(3)									
<u></u>	†								
	†								
	†								
							<u> </u>		

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

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 Gift, grant, or capital contribution to related organization(s)			1b		X			
c Gift, grant, or capital contribution from related organization(s)				X				
d Loans or loan guarantees to or for related organization(s)			1 d		X			
e Loans or loan guarantees by related organization(s)			1е	X				
f Dividends from related organization(s).					X			
g Sale of assets to related organization(s).					X			
h Purchase of assets from related organization(s).					X			
i Exchange of assets with related organization(s).					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).					X			
Performance of services or membership or fundraising solicitations for related organization(s)				X	X			
m Performance of services or membership or fundraising solicitations by related organization(s)								
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				X				
o Sharing of paid employees with related organization(s)			10		X			
			1p		X			
p Reimbursement paid to related organization(s) for expenses								
q Reimbursement paid by related organization(s) for expenses.			1q	X				
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	·			-1\				
(a) Name of related organization	(b) Transaction	(c) Amount involved) Method of	detern	mining			
•	type (a-s)		amount	involv	/ed			
(1) Houston Symphony Endowment	С	3,759,147.0	Cash					
2) Houston Symphony Endowment	е	15,678,482.I	Loan ga	rant	tee			
(3)								
(4)								
\' '								
75)								
(5)								
(6) BAA TEEA5003L 06/07/18		0-1- 1-1	e R (For	000	2010			

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)	income (related, unre- lated, excluded	(e) Are all partners section 501(c)(3) organizations?		(e) Are all partners section 501(c)(3) organizations?		Share of total income	of Share of end-of-year assets		n) ropor- nate tions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managing		(k) Percentage ownership
			from tax under sections 512-514)	Yes	No			Yes	No		Yes	No			
<u>(1)</u>	-														
	<u> </u>														
	-														
(2)															
	-														
	1														
(3)	-														
	 -														
	-														
<u>(4)</u>															
32	1														
	1														
<u>(5)</u>	-														
	-														
	-														
(6)															
33	1														
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BAA TEEA5004L 06/07/18 Schedule **R** (Form 990) 2018

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