PUBLIC INSPECTION COPY

Form **990**

(Rev. January 2020)

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 2019 calen	dar year, or tax	year begin	ning 6,	/01	, 2019,	and endir	ng 5,	/31		, 2020	
В	Check	if applicable:	С							D Emplo	yer identi	ification number	
	A	ddress change	Houston S	vmnhonv	Socie	+ x7				74-	1157	373	
	\vdash	ame change	615 Louis	iana St	#102	Сy				E Teleph			
		_	Houston,										
	In	itial return	lioubcoii,	111 7700	_					/13	-224	-4240	
	Fir	nal return/terminated											
	1A	mended return								G Gross	receipts	\$ 31,193	,345.
	A	pplication pending	F Name and addr	ess of principal	officer: .Tc	hn Mang	ım		H(a) Is this	s a group retu	rn for sub	oordinates? Yes	s X No
	ш.		Same As C	Above	00	min mange	1111		H(b) Are a	all subordinate o," attach a lis	s included	d? Yes	
ī	Tay-	exempt status:	X 501(c)(3)	501(c) () ◀	(insert no.)	4947(a)(1) or	527	It "No	o," attach a lis	t. (see ins	structions) —	_
<u>.</u>		•				(moore no.)	4047 (d)(1) 01	UL1				_	
			w.houstons			TT S	1.			p exemption n			
K		n of organization:	X Corporation	Trust	Association	Other ►	L.	Year of forma	tion: 19	13 101	State of le	egal domicile: T	X
Pa	art I	Summar											
	1		be the organiza										
ģ		<u>to inspi</u>	re and end	gage_a_l	L <u>arge</u> a	<u>and dive</u> r	<u>se audie</u>	<u>nce in</u>	<u>Great</u>	<u>er Hou</u>	<u>ston</u>	<u>and beyo</u>	nd
Governance		through	exceptiona	al <u>orche</u>	estral	performa	inces, ed	<u>ucatio</u>	<u>nal pr</u>	ograms	and	communit	У
Ĕ		<u>activiti</u>											
Š	2	Check this bo	ox ► if the	organizatio	n discontir	nued its oper	ations or disp	osed of m	ore than	25% of its	net as	sets.	
Ğ	3		oting members of								3		105
•ජ ග	4	Number of in	dependent votir	ng members	s of the go	verning body	(Part VI, line	e 1b)			4		102
<u>ë</u> .	5		of individuals e								5		514
Activities &	6	Total number	of volunteers (estimate if	necessary	')					6		675
Ac	7a	Total unrelate	ed business rev	enue from F	Part VIII, d	column (C), li	ne 12				7a		0.
	b	Net unrelated	l business taxal	ole income i	from Form	n 990-T, line	39				7b		0.
										Prior Year	'	Current \	/ear
	8	Contributions	and grants (Pa	rt VIII, line	1h)				1	7,930,	195.	19,903	3.727.
Revenue	9		vice revenue (Pa							2,524,0		10,718	
Ver	10		ncome (Part VIII							50,8			986.
æ	11		e (Part VIII, col			•				-36,		120	9,759.
			e – add lines 8							0,468,		30,832	
	13		imilar amounts							0,400,	302.	30,032	.,015.
							-						
	14		to or for memb										
Ś	15		er compensation							1,698,		22,113	
Se	16a	Professional	fundraising fees	s (Part IX, c	olumn (A)), line 11e)				26,	670.	115	5,599.
Expenses	b	Total fundrais	sing expenses (Part IX. col	umn (D).	line 25) ►	3 51	7,285.					
ŭ	17		ses (Part IX, col				•			1,421,	- O E	11,948	060
	18	•	es. Add lines 13			•							
	_									3,147,		34,177	-
	19	Revenue less	expenses. Sub	tract line 1	8 from line	e 12			_	2,678,			1,932.
9 of										ing of Curre		End of Y	
ela r	20		(Part X, line 16)							8,399,			1,701.
Asa	21	Total liabilitie	es (Part X, line 2	26)					2	9,943,	902.	33,474	4,197.
Net Assets	22	Net assets or	fund balances.	Subtract lin	ne 21 fron	n line 20			2	1,544,2	267.	-26,049	9,496.
	art II	Signatur	e Block							, - ,			
_				mined this retu	rn. includina	accompanying sc	hedules and state	ments, and to	the best of	mv knowledge	and beli	ef. it is true, corre	ct. and
com	plete. D	eclaration of prepa	eclare that I have exa erer (other than office	r) is based on a	all information	n of which prepare	er has any knowle	dge.		,		., ,	.,
		► Ele	ctronical	lu File	d								
Sig	nr	Signatu	re of officer							Date			
He	re	Fli	zabeth Con	dic					CFO				
	. •		print name and title	uic					CIO				
		Print/Type n	reparer's name		Preparer's s	signature		Date		Charle	:4	PTIN	
_			•			-	iciale ()	4/6/	121	Check	⊸ '''		-
Pa			ra Murphy	~ :	1	ara Mu	rpny	4/0/	21	self-employ	red	P01386215)
	epare												
US	e On	ily Firm's addre	ess <u>2900 V</u>		•	te 200				Firm's EIN	► 76-	-0269860	
			Houst		77027					Phone no.	(713		39
Ma	y the	IRS discuss th	nis return with th	ne preparer	shown ab	ove? (see in:	structions)					. X Yes	No

Page 2

Га	Check if Schedule O contains a response or note to any line in this Part III	Х
1		21
٠	The mission of the Houston Symphony is to inspire and engage a large and diverse	
		- – – -
	audience in Greater Houston and beyond through exceptional orchestral performance	
	educational programs and community activities.	
2	Did the organization undertake any significant program services during the year which were not listed on the prior	
_	Form 990 or 990-EZ?	No
	If "Yes," describe these new services on Schedule O.	
3		No
J	If "Yes," describe these changes on Schedule O.	o
1	Describe the organization's program service accomplishments for each of its three largest program services, as measured by experiences.	ancac
•	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expe	enses,
	and revenue, if any, for each program service reported.	
4 8	a (Code:) (Expenses \$ 22,176,307. including grants of \$) (Revenue \$ 10,117,	368.)
	See Schedule 0	
41	b (Code:) (Expenses \$ 6,176,966. including grants of \$) (Revenue \$ 600,	839.)
	See Schedule 0	
4 (c (Code:) (Expenses \$ including grants of \$) (Revenue \$)
- '		
4	d Other program services (Describe on Schedule O.)	
-,	(Expenses \$ including grants of \$) (Revenue \$)	
4 6	e Total program service expenses ► 28,353,273.	
	1 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	

			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	Χ	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Χ	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I.	3		Х
4	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 donor-restricted endowments or in quasi endowments? If 'Yes,' complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If 'Yes,' complete Schedule D, Part VI</i> .	11 a	Х	
b	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	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)? <i>If 'Yes,' complete Schedule D, Part X.</i>	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
b	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		Х
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	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 (2019) 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		X
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	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
1	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
(c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25	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
ļ	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 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part II.	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If 'Yes,' complete Schedule L, Part III.	27		Х
	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
;	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If 'Yes,' complete Schedule L, Part IV	28a		Х
ļ	b A family member of any individual described in line 28a? If 'Yes,' complete Schedule L, Part IV	28b	X	
•	c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If Yes,' complete Schedule L, Part IV.	28c	Х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
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 I</i>	33		X
	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1.	34	Х	
	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
ļ	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		X
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		Yes	No
	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		103	110
	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
RA/	(gambling) winnings to prize winners?	1 c	X 990 ((0010)
 ^ ^	IEEAUU41 U//31/19	- orm	uuii /	ZITIU

Form 990 (2019) 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 514			
ŀ	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	X	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		X
ŀ	olf 'Yes,' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation on Schedule 0</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).			
	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
(: 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	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7 a	X	
ŀ	b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b	X	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		Х
,	I 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		Х
	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	n If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7 h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring	,		
	organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
ä	Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
ŀ	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			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 b			
	Section 501(c)(12) organizations. Enter:			
	a Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	of If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	12		
č	a Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
	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		X
	a Did the organization receive any payments for indoor tanning services during the tax year?	14a		Λ
	o If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation on Schedule O	14b		
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
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Χ
10	If 'Yes,' complete Form 4720, Schedule O.	13		23

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 on 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. . . . 105 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 on Schedule O. **b** Enter the number of voting members included on line 1a, above, who are independent... 102 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 Χ 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?..... 3 Χ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Χ Did the organization become aware during the year of a significant diversion of the organization's assets?..... 5 Χ Did the organization have members or stockholders?....See.Schedule.Q..... 6 Χ 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?..... 8 a X X **b** Each committee with authority to act on behalf of the governing body?..... 8 b 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses on Schedule Q..... 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10 a Did the organization have local chapters, branches, or affiliates?..... 10 a Χ b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... Χ b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O Χ 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13...... 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b Χ to conflicts?..... c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done ... See .Schedule .0 Χ 12c 13 Did the organization have a written whistleblower policy?..... 13 Χ 14 Did the organization have a written document retention and destruction policy?..... Χ 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official.. See . Schedule.. 0...... X 15 a **b** Other officers or key employees of the organization...See .Schedule..Q..... 15 b X If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?..... 16 a X **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 16b organization's exempt status with respect to such arrangements?.. 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 on Schedule O) Describe on Schedule O 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.

iounded by including booties	Form 990 (2019)	Houston	Symphony	Societ
------------------------------	-----------------	---------	----------	--------

74-1157373

Page 7

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.

See instructions for the order in which to list the persons above.

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	than	n one t both	oox, an o	unles fficer truste		on	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Andres Orozco-Estrada Music Director	$-\frac{40}{0}$				Х			532,354.	0.	28,382.
(2) John Mangum CEO/Exec Dir	$-\frac{40}{2}$			Х	71			344,870.	0.	38,637.
(3) Nancy Giles	40			Λ				344,070.	0.	30,037.
Chief Development Officer	_ 40 _				Х			240,309.	0.	11,396.
(4) Mark Nuccio Musician	$-\frac{40}{0}$					Х		211 660	0.	25 420
	40		-			Λ		211,660.	0.	35,438.
	0					Х		191,302.	0.	35,004.
(6) Victoria Dominguez COO	$-\frac{40}{0}$				Х			100 (10	0	10 002
	_		-		Λ			199,618.	0.	18,893.
	$-\frac{40}{0}$					Х		192,264.	0.	26,160.
(8) Elizabeth Condic CFO	$-\frac{40}{4}$			Х				174,846.	0.	34,865.
(9) William Ver Meulen	40			Λ				1/4,040.	0.	34,003.
Musician	0					Х		170,307.	0.	35,438.
(10) Jonathan Fischer	40									
Musician	0					Χ		187,179.	0.	18,083.
(11) Janet F. Clark	4									
President	0	Χ		Χ				0.	0.	0.
(12) John Rydman	4									
President-Elect	0	Χ		Χ				0.	0.	0.
(13) Steven P. Mach	4									
Chair,Past Pres	0	Χ		Χ				0.	0.	0.
(14) Barbara McCelvey	4									
Secretary	0	Χ		Χ				0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)											inued)		
		(B)			(0								
	(A) Name and title	Average hours per	box.	unles	heck ss pe	erson	than of the thick that the thick tha	n an	(D) Reportable compensation from	(E) Reportable compensation from	Estir	(F) nated an	nount
		week (list any hours for related organiza tions below dotted line)	Individual trustee or director	_	Officer		Highest compensated employee		the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	the	of other ensation organiza nd relate ganizatio	tion d
(15)	Barbara BurgerChair Finance	40	Х		Х				0.	0.			0.
(16)	Bradley Corson Chair GLC	4	X		Х				0.	0.			0.
(17)	Viviana Denechaud Chair Dev Comm	4	Х		Х				0.	0.			0.
(18)	Tracy Dieterich Chair Comm Ptns	<u>-4</u> -	Х		Х				0.	0.			0.
(19)	Evan B. Glick Chair Popu Prog	4	Х		Х				0.	0.			0.
(20)	Mary Lynn Marks Chair Vol/Evts	4	X		Х				0.	0.			0.
	Billy McCartney Chair Education	- <u>4</u> -	Х		Χ				0.	0.			0.
	Robert Orr Chair StratPlan	<u>4</u>	Х		Χ				0.	0.			0.
	Manolo Sanchez Chair Mkt Comm	4	Х		Χ				0.	0.			0.
	Miles O. Smith Chair Art/Orch	4	Х		Χ				0.	0.			0.
	William J. Toomey II Endowment Pres Subtotal	<u>-4</u> -	Х		Χ			•	0.	0.		202	0.
	Subtotal Total from continuation sheets to Part VII, Section	 on A						▶ .	2,444,709.	0.		Z8Z,	<u> 296.</u>
	Total (add lines 1b and 1c)							▶	2,444,709.	0.		202	<u>0.</u> 296.
	Total number of individuals (including but not limited							ved					290.
	from the organization > 70	10 11030 1	istea	abov	/C) \	WIIO	recen	vcu	more than \$100,00	o or reportable com	perisati	J11	
•												Yes	No
	Did the organization list any former officer, direction line 1a? If 'Yes,' complete Schedule J for suc										. 3		Х
	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'?	If 'Y	es,	com	ple	te Schèdule J for		4	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual										Х			
	ion B. Independent Contractors										•		
1	1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.												
	(A) Name and business addi	ess							(B) Description o	of services	Comp	(C) ensati	on
Stri	ke Marketing 906 Rutland St Houston, T	X 77008							Marketing				664.
DCM	330 W 38th Street #207 New York, NY 10	018							Telemarketing				465.
	dation For Jones Hall 55 Waugh Dr #601		-						Bldg maint, s	-			859.
	3 Artists LLC 470 Park Ave S 9th Floo								Professional	services			<u>620.</u>
	city Interactive Consulting LLC 1239 B Total number of independent contractors (including b									than		475,	928.
_	Total harrist of independent contractors (including t	at not mill	icu ll	, 1110	JU 1	اعددا	4 000	v U)	THIS ICCCIVED HIGHE	ulali			

\$100,000 of compensation from the organization ► 20

Continuation Sheet for Form 990

OMB No. 1545-0047

2019

Department of the Treasury Internal Revenue Service

varie 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 Employees (A) (B) (C) (D) (E) (F)													
(A)	(B)							(D)	(E)	(F)			
Name and title	Average hours per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	s 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			
Dobby Tudos	4					ä							
Bobby Tudor Imm Past Chair	-4-	v		Х				0.	0.	0			
Jesse B. Tutor	0 4	Х		Λ				0.	0.	0.			
Chair Audit	4	Х		Χ				0.	0.	0.			
Mike S. Stude	4	Λ		Λ				0.	0.	0.			
Chairman Emerit	4-	Х		Χ				0.	0.	0.			
Paul R. Morico	4	Λ		Λ				0.	0.	<u> </u>			
General Counsel	0	Х		Χ				0.	0.	0.			
Maureen Higdon	4	Λ		Λ				0.	0.	<u> </u>			
Pre-HS League	0	Х		Χ				0.	0.	0.			
Farida Abjani	2	71		21				0.	0.	<u> </u>			
Governing Dir	0	Х						0.	0.	0.			
Michael Adler	2	- 11						0.	0.	<u></u>			
Governing Dir	0	Х						0.	0.	0.			
Ann Ayre	2							J.		<u></u>			
Trustee	0	Х						0.	0.	0.			
Jonathan Ayre	2												
Trustee	0	Х						0.	0.	0.			
Marcia Backus	2												
Governing Dir	0	Х						0.	0.	0.			
Janice Barrow	2												
Governing Dir	0	Х						0.	0.	0.			
Gary Beauchamp	2												
Governing Dir	0	Х						0.	0.	0.			
James Bell, Jr.	2												
Trustee	0	Χ						0.	0.	0.			
Devinder Bhatia	2												
Trustee	0	Χ						0.	0.	0.			
Tony Bradfield	2	1											
Governing Dir	0	X						0.	0.	0.			
Nancy S. Bratic	2												
Trustee	0	X						0.	0.	0.			
Terry A. Brown	2	1											
Trustee	0	X						0.	0.	0.			
Eric Brueggeman	2	1											
Trustee	0	X						0.	0.	0.			
Bill Bullock	2							_	_				
Governing Dir	0	X						0.	0.	0.			
Ralph Burch	2							_	_				
Trustee	0	X						0.	0.	0.			
Justice Brett Busby	2	1,,						_	_	•			
Trustee	0	X						0.	0.	0. Form 990 Cont 2019			

Continuation Sheet for Form 990

OMB No. 1545-0047

2019

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 Employees (A) (B) (C) (D) (E) (F)													
(A)	(B)							(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			
Dougal A. Cameron	2												
Trustee	0	X						0.	0.	0.			
John T. Cater	2	ļ -											
Trustee	0	X						0.	0.	0.			
Terry Cheyney	2	ļ -											
Governing Dir	0	X						0.	0.	0.			
Michael H. Clark	2	<u> </u>											
Trustee	0	X						0.	0.	0.			
<u>Virginia Clark</u>	2	<u> </u>						_	_	_			
Trustee	0	X						0.	0.	0.			
Evan D. Collins	2	ļ						_					
Trustee	0	Х						0.	0.	0.			
Andrew Davis	2									•			
Trustee	0	Х						0.	0.	0.			
Denise Davis	2	.,,								•			
Trustee	0	Х						0.	0.	0.			
Michael Doherty	2	.,,						0	0	^			
Governing Dir	0	X						0.	0.	0.			
Bob Duff	2	.,						0	0	0			
Trustee	2	Х						0.	0.	0.			
<u>Joan Duff</u> Trustee		Х						0.	0.	0.			
Kelli Cohen Fein	2	Λ						0.	0.	<u> </u>			
Trustee	0	Х						0.	0.	0.			
Jeffrey B. Firestone	2	Λ						0.	0.	0.			
Trustee	$-\frac{2}{0}$	Х						0.	0.	0.			
David Flores	2	Λ						0.	0.	<u> </u>			
Trustee	0	Х						0.	0.	0.			
Eugene A. Fong	2							0.	0.	<u></u>			
Trustee	0	Х						0.	0.	0.			
Aggie L. Foster	2							0.	0.				
Trustee	0	Х						0.	0.	0.			
Julia Anderson Frankel	2							<u> </u>					
Trustee	0	Х						0.	0.	0.			
Ron Franklin	2							<u> </u>					
Trustee	0	Х						0.	0.	0.			
Betsy Garlinger	2												
Trustee	0	Х						0.	0.	0.			
Susan A. Hansen	2												
Trustee	0	Х						0.	0.	0.			
Gary L. Hollingsworth	2												
Trustee	0	Х	L					0.	0.	0.			
										Form 990 Cont 2019			

Continuation Sheet for Form 990

OMB No. 1545-0047

2019

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

(A)	(B)	:S		"	• • •			(D)	(E)	(F)		
Name and title	(B)	Posi	tion ((C check		hat appl	lv)	(D)	(E) Reportable			
Name and the	Average hours per week (list any hours for related organizations 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		
Stephen Incavo Trustee	$-\frac{2}{0}$	Х						0.	0.	0.		
Brian James	2									_		
Trustee	0	X						0.	0.	0.		
Tammie Johnson	2											
Trustee	0	X						0.	0.	0.		
Sippi Khurana	2									_		
Governing Dir	0	X						0.	0.	0.		
<u>I. Ray Kirk</u>	2	.,								•		
Trustee	0	X						0.	0.	0.		
David Krieger	2	v						0.	0.	0.		
Trustee Andrew Go Lee	2	Х						0.	0.	0.		
Trustee	$-\frac{2}{0}$	Х						0.	0.	0.		
Ulyesse J. LeGrange	2	Λ						0.	0.	<u> </u>		
Trustee	$-\frac{2}{0}$	Х						0.	0.	0.		
Rochelle Levit	2	21						0.	0.	<u>.</u>		
Governing Dir		Х						0.	0.	0.		
Carlos J. López	2							· ·	0.	<u> </u>		
Trustee	0	Х						0.	0.	0.		
Cora Sue Mach	2											
Governing Dir	0	Х						0.	0.	0.		
Michael Mann	2											
Trustee	0	Х						0.	0.	0.		
Paul M. Mann	2											
Governing Dir	0	X						0.	0.	0.		
Rodney H. Margolis	2											
Governing Dir	0	X						0.	0.	0.		
<u>Jay Marks</u>	2							_		_		
Governing Dir	0	X						0.	0.	0.		
<u>Jack Matzer</u>	2											
Trustee	0	X						0.	0.	0.		
Jackie W. Mazow	2	.,						0	0	0		
Trustee	0	Х						0.	0.	0.		
Nina McGlashan	2	v						0	0	0		
Governing Dir Alexander K. McLanahan	2	Х						0.	0.	0.		
Governing Dir	$-\frac{2}{0}$	Х						0.	0.	0.		
Gary Mercer	2	Λ						0.	0.	0.		
Trustee	$-\frac{2}{0}$	Х						0.	0.	0.		
Marilyn Miles	2	11						0.	<u> </u>	<u></u>		
Trustee	 - 2 -	Х						0.	0.	0.		
							<u> </u>	0.		Form 990 Cont 2019		

Continuation Sheet for Form 990

OMB No. 1545-0047

2019

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 Employees (A) (B) (C) (D) (E) (F)													
, ,	(B)							(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			
Shane A. Miller	2							_	_				
Trustee	0	X						0.	0.	0.			
_Janet_Moore	2							_	_	_			
Trustee	0	X						0.	0.	0.			
<u>Leslie Nossaman</u>	2	ļ											
Trustee	0	X						0.	0.	0.			
Scott S. Nyquist	2							_	_	_			
Trustee	0	X						0.	0.	0.			
Edward C. Osterberg, Jr.	2	ļ								•			
Trustee	0	X						0.	0.	0.			
David Pruner	2	.,,								•			
Trustee	0	X						0.	0.	0.			
Gloria G. Pryzant	2								0	^			
Trustee	0	X						0.	0.	0.			
Tadd Pullin	2	.,						0	0	0			
Trustee	2	Х						0.	0.	0.			
Floyd Robinson		v						0	0.	0			
Treasurer	2	Х						0.	0.	0.			
<u>Miwa Sakashita</u> Trustee	$-\frac{2}{0}$	Х						0.	0.	0.			
Ed Schneider	2	Λ						0.	0.	<u> </u>			
Trustee	$-\frac{2}{0}$	Х						0.	0.	0.			
Christian Schwartz	2	Λ						0.	0.	<u> </u>			
Trustee	$-\frac{2}{0}$	Х						0.	0.	0.			
Helen Shaffer	2	- 71						0.	0.	<u> </u>			
Trustee	0	Х						0.	0.	0.			
Michael E. Shannon	2	71						0.	0.	<u></u>			
Governing Dir	0	Х						0.	0.	0.			
Robert B. Sloan	2							J.					
Trustee	0	Х						0.	0.	0.			
Jim R. Smith	2							<u> </u>		<u> </u>			
Trustee	0	Х						0.	0.	0.			
Quentin Smith	2												
Trustee	0	Х						0.	0.	0.			
Tad Smith	2												
Trustee	0	Х						0.	0.	0.			
Anthony Speier	2												
Governing Dir	0	Х						0.	0.	0.			
Ishwaria Subbiah	2												
Trustee	0	Χ						0.	0.	0.			
L. Proctor Thomas, III	2									_			
Trustee	0	X						0.	0.	0.			
										Form 990 Cont 2019			

Continuation Sheet for Form 990

OMB No. 1545-0047

2019

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 E	Employee	S		,		•	•			
(A)	(B)			(0				(D)	(E)	(F)
Name and title	Average hours per week					hat app	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
	(list any hours for related	Individual trustee or director	Institutional trustee	čer	Key employee	est co loyee	ner	(W-2/1033-WIGG)	(W-2/1033-WIGO)	organization and related organizations
	organiza- tions	trust	i tru)yee	mpe				organizations
	below dotted line)	ee	stee			Highest compensated employee				
Shirley W. Toomim	2							_	_	
Trustee	0	Х						0.	0.	0.
Betty Tutor Governing Dir	$-\frac{2}{0}$	Х						0.	0.	0.
Judith Vincent	2	Λ						0.	0.	<u> </u>
Governing Dir	$-\frac{2}{0}$	Х						0.	0.	0.
Margaret Waisman	2	Λ						0.	0.	0.
Trustee	$-\frac{2}{0}$	Х						0.	0.	0.
Fredric A. Weber	2	21						0.	0.	<u> </u>
Trustee	1-2-	Х						0.	0.	0.
Mrs. Conrad Weil	2									
Trustee	<u> </u>	Х						0.	0.	0.
Robert Weiner	2									
Trustee	0	Х						0.	0.	0.
Vicki West	2									
Trustee	0	Χ						0.	0.	0.
Margaret Alkek Williams	2									_
Governing Dir	0	X						0.	0.	0.
Steven J. Williams	2									
Trustee	0	Х						0.	0.	0.
<u>Frank_Wilson</u>	2									
Trustee	0	X						0.	0.	0.
<u>Jessie Woods</u>	2									
Trustee	0	Х						0.	0.	0.
Scott Wulfe	2	,						0	0	•
Governing Dir	0	X						0.	0.	0.
David J. Wuthrich	2	v						0.	0.	0
Governing Dir Ellen A. Yarrell	2	X						0.	0.	0.
Trustee	$-\frac{2}{0}$	Х						0.	0.	0.
Robert Yekovich	2	Λ						0.	0.	<u> </u>
Trustee	-	Х						0.	0.	0.
Frank Yonish	2	21						0.	0.	<u></u>
Trustee	<u>-</u>	Х						0.	0.	0.
		-								
	+									
	1									
		-								
-	1			<u> </u>			<u> </u>			Form 000 Cont 2010

Forn	1 990 (2019) Houston Symphony Society			74-1157373	Page 9
Par	t VIII Statement of Revenue				
	Check if Schedule O contains a response or note to an	y line in this Part V (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		19,903,727.	revenue		312 314
Program Service Revenue	Business Code 711130 b Education, other programs c d e f All other program service revenue g Total. Add lines 2a-2f	7,428,968. 3,289,239. 10,718,207.	7,428,968. 3,289,239.		
	3 Investment income (including dividends, interest, and other similar amounts). 4 Income from investment of tax-exempt bond proceeds 5 Royalties	80,986.			80,986.
Other Revenue	8 a Gross income from fundraising events (not including \$ 713,057. of contributions reported on line 1c). See Part IV, line 18	129,759.			129,759.

	b Less: cost of goods sold	0b				
	c Net income or (loss) from sales of inv	ventory ▶				
S		Business Code				
e S	11a					
ane	b					
	с					
liscell Rev	d All other revenue					_
Σ	e Total. Add lines 11a-11d					
	12 Total revenue See instructions	>	20 022 670	10 710 207	0	210 745

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 i 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	1,614,170.	928,650.	284,412.	401,108.				
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.				
7	Other salaries and wages	15,388,083.	13,378,430.	679,411.	1,330,242.				
8	Pension plan accruals and contributions (include section 401(k) and 403(b)	,		·					
_	employer contributions)	1,118,802.	1,030,473.	17,223.	71,106.				
9	Other employee benefits	2,756,598.	2,302,833.	115,423.	338,342.				
10	Payroll taxes	1,235,490.	1,049,142.	59,708.	126,640.				
11	` ' ' ' '								
	Management								
	Legal	14,054.	571.	13,483.					
	: Accounting	64,266.		64,266.					
	Lobbying								
•	Professional fundraising services. See Part IV, line 17	115,599.			115,599.				
	Investment management fees								
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0.よch. の	6,091,930.	5,801,980.	159,509.	130,441.				
12	Advertising and promotion.	1,511,430.	1,434,284.	751.	76,395.				
13	_ · · · · · · · · · · · · · · · · · · ·	173,308.	114,354.	17,760.	41,194.				
14	Information technology	296,367.	177,227.	59,813.	59,327.				
15	Royalties	230,301.	111,221.	33,013.	33,321.				
16	Occupancy	985,517.	773,345.	89,559.	122,613.				
17	Travel.	428,916.	395,935.	22,172.	10,809.				
18		420, 510.	373,733.	22,112.	10,005.				
19	Conferences, conventions, and meetings								
20	Interest	507,342.		507,342.					
21	Payments to affiliates								
22	Depreciation, depletion, and amortization	222,753.	208,835.	12,578.	1,340.				
23	Insurance	137,581.	66,033.	48,070.	23,478.				
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)								
ā	Patron Cultivation	593,604.	35,507.	2,661.	555,436.				
ŀ	Production materials/ equip	368,421.	368,421.						
	Merchant fees	362,734.	236,512.	59,121.	67,101.				
	Other expenses	190,646.	50,741.	93,791.	46,114.				
	All other expenses								
25	Total functional expenses. Add lines 1 through 24e	34,177,611.	28,353,273.	2,307,053.	3,517,285.				
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	in this Part X	<u></u>	<u></u> .	
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			137,194.	1	127,546.
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net	6,537,570.	3	5,938,194.		
	4	Accounts receivable, net			384,662.	4	283,755.
	5	Loans and other receivables from any current or form trustee, key employee, creator or founder, substantial controlled entity or family member of any of these per		5			
	6	Loans and other receivables from other disqualified p section 4958(f)(1)), and persons described in section	•	F		6	
	7	Notes and loans receivable, net				7	
S	8	Inventories for sale or use		L L		8	
set	9	Prepaid expenses and deferred charges		<u> </u>	E00 401	9	457 052
Assets	_		509,481.	9	457,952.		
r		Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D		3,282,474.			
	b	Less: accumulated depreciation		2,665,220.	830,728.	10 c	617,254.
	11	Investments — publicly traded securities		<u>-</u>		11	
	12	Investments — other securities. See Part IV, line 11		<u>-</u>		12	
	13	Investments – program-related. See Part IV, line 11.		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	F		15		
	16	Total assets. Add lines 1 through 15 (must equal line	33)		8,399,635.	16	7,424,701.
	17	Accounts payable and accrued expenses	1,727,981.	17	855,470.		
	18	Grants payable				18	
	19	Deferred revenue			4,059,096.	19	4,388,416.
	20	Tax-exempt bond liabilities				20	
ies	21	Escrow or custodial account liability. Complete Part I				21	
Liabilities	22	Loans and other payables to any current or former of key employee, creator or founder, substantial contribu- controlled entity or family member of any of these pe	ficer, dire utor, or 3! rsons	ector, trustee, 5%		22	
_	23	Secured mortgages and notes payable to unrelated the		<u> </u>	15,678,482.	23	13,040,452.
	24	Unsecured notes and loans payable to unrelated third		<u> </u>	15,010,402.	24	13,040,432.
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com	•		8,478,343.	25	15,189,859.
	26	Total liabilities. Add lines 17 through 25			29,943,902.	26	33,474,197.
Ses		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.	, ►	X	·		
an	27	Net assets without donor restrictions		-	-24,624,337.	27	-29,389,010.
3al	28	Net assets with donor restrictions		F	3,080,070.	28	3,339,514.
þι	20	Organizations that do not follow FASB ASC 958, che			3,000,070.	20	3,339,314.
Net Assets or Fund Balance		and complete lines 29 through 33.					
0	29	Capital stock or trust principal, or current funds				29	
ě	30	Paid-in or capital surplus, or land, building, or equipment				30	
455	31	Retained earnings, endowment, accumulated income,		<u></u>		31	
et.)	32	Total net assets or fund balances			-21,544,267.	32	-26,049,496.
ž	33	Total liabilities and net assets/fund balances			8,399,635.	33	7,424,701.

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI.				Х
1	Total revenue (must equal Part VIII, column (A), line 12)	1	30,	832,	679.
2	Total expenses (must equal Part IX, column (A), line 25)	2	34,	177,	611.
3	Revenue less expenses. Subtract line 2 from line 1	3	-3,	344,	932.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	-21,	544,	267.
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 on Schedule O). See Schedule O	9	-1,	160,	297.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	-26	049,	196
Pa	rt XII Financial Statements and Reporting	.0	20,	047,	470.
	Check if Schedule O contains a response or note to any line in this Part XII				·
	Association weekland used to preserve the Ferres 200s. These Wilderwood.			Yes	No
'	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	а	X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewe separate basis, consolidated basis, or both: Separate basis Both consolidated and separate basis	ed on a			
	b Were the organization's financial statements audited by an independent accountant?		2	b X	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separa basis, consolidated basis, or both:	te			
	Separate basis X Consolidated basis Both consolidated and separate basis				
•	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2	c X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.				
3	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 on Schedule O and describe any steps taken to undergo such audits		3	b	
BAA	TEEA0112L 01/21/20		Foi	m 990	(2019)

SCHEDULE A (Form 990 or 990-EZ)

Houston Symphony Society

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.

OMB No. 1545-0047 2019

74-1157373

Open to Public Department of the Treasury Internal Revenue Service Inspection ► Go to www.irs.gov/Form990 for instructions and the latest information. Name of the organization Employer identification number

Part	Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.							
The or	ga	nization 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 170(b)(1)(A)((i).	
2		A school described in section 1	170(b)(1)(A)(ii). (Attach	Schedule E (Form 990 o	r 990-EZ)).)		
3		A hospital or a cooperative h	nospital service organ	nization described in se	ction 170	0(b)(1)(<i>A</i>	۸)(iii).	
4		A medical research organiza	ation operated in conj	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	r the benefit of a colle omplete Part II.)	ege or university owned	l or oper	ated by	a governmental unit de	escribed in
6		A federal, state, or local gov	vernment or governme	ental unit described in s	section 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 pub	olic described
8		A community trust described			•			
9	An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:							
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 saf	ety. See	section	1 509(a)(4).	
12		An organization organized an or more publicly supported o lines 12a through 12d that de	organizations describe	ed in section 509(a)(1) (or sectio	n 509(a)(2). See section 509(a)	ut the purposes of one (3). Check the box in
а		Type I. A supporting organization organization organization (s) the power to recomplete Part IV, Sections A	ion operated, supervise egularly appoint or elec	ed, or controlled by its su	oported o	rganizat	ion(s), typically by giving	the supported on. You must
b		Type II. A supporting organize management of the supporting must complete Part IV, Section 11.	g organization vested in	controlled in connection the same persons that c	with its control or	support manage	ted organization(s), by the supported organizat	having control or ion(s). You
c		Type III functionally integrated organization(s) (see instructi	I. A supporting organiza	tion operated in connection	n with, a	nd functi	onally integrated with, its	supported
d		Type III non-functionally integ functionally integrated. The cinstructions). You must com	urated A supporting or	ranization operated in co	nnaction	with ite	supported organization(s) t and an attentiveness	that is not requirement (see
е		Check this box if the organiz	zation received a writt	ten determination from	the IRS			
f	Er	integrated, or Type III non-function into the number of supported of						
g	Pr	ovide the following informatio	on about the supporte	d organization(s).				
(i)) Na	ame of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) I organizat in your g docur		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					Yes	No		
(A)								
(B)								
(C)								
(-)								
(D)								
(E)								
T								

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	Section A. Public Support							
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total	
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	18418761.	21024630.	18447168.	17930495.	19903727.	95,724,781.	
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.	
4 5	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)	18418761.	21024630.	18447168.	17930495.	19903727.	95,724,781. 32,107,749.	
6	Public support. Subtract line 5 from line 4						63,617,032.	
Sec	tion B. Total Support							
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total	
7	Amounts from line 4	18418761.	21024630.	18447168.	17930495.	19903727.	95,724,781.	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	38,618.		42,666.	50,810.	80,986.	213,080.	
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.	
11	Total support. Add lines 7 through 10						95,937,861.	
12	Gross receipts from related activ	rities, etc. (see ins	structions)			12	55,697,418.	
13	First five years. If the Form 990 is organization, check this box and	for the organization stop here	n's first, second, thi	ird, fourth, or fifth t	ax year as a section	n 501(c)(3)	▶ □	
Sec	tion C. Computation of Pul	blic Support P	ercentage					
14	Public support percentage for 20						66.31 %	
15	Public support percentage from 2					<u> </u>	67.32 %	
16a	33-1/3% support test—2019. If the and stop here. The organization	he organization di qualifies as a pub	d not check the bolicly supported or	ox on line 13, and rganization	d line 14 is 33-1/3	% or more, checl	this box	
b	33-1/3% support test—2018. If the and stop here. The organization	e organization did qualifies as a pul	I not check a box blicly supported o	on line 13 or 16a rganization	, and line 15 is 3:	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	and-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 Private foundation. If the organization	meets the 'facts-a d-circumstances'	and-circumstances test. The organiza	s' test, check this ation qualifies as a	box and stop her a publicly support	e. Explain in Parted organization.	t VI how the	
			G 20% OIT III O I	, . Ju, 100, 17d	, , on ook till			

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		prodes semprete :	<u> </u>				
Calend	dar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total	
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	•		· ·	.,	,		
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		T		T			
	dar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total	
	Amounts from line 6							
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources							
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
	Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on							
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).							
	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					T T		
	Public support percentage for 20	•			•		%	
	Public support percentage from 2					16	0/0	
	tion D. Computation of Inv					T T		
17	Investment income percentage for	•	• • •	-			0/0	
18	Investment income percentage fi					<u> </u>	%	
	33-1/3% support tests—2019. If t is not more than 33-1/3%, check	this box and sto	p here. The organ	ization qualifies a	as a publicly supp	orted organization	▶ ∐	
	3-1/3% support tests—2018. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and ne 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization							

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in 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		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in Part VI when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 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		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If '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		
С	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		
0a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes,' answer 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b		

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

Pa	rt v Trype ill Noll-Fullctionally integrated 509(a)(5) Supporting Orga	annzau	UIIS	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trus instructions. All other Type III non-functionally integrated supporting organization	t on No	v. 20, 1970 (explain in t complete Sections A	n Part VI). See Athrough 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):			
a	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		
•	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C — Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	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).	egrated	Type III supporting or	ganization

Schedule A (Form 990 or 990-EZ) 2019

BAA

in Part VI). See instructions.

	incuscon symphony society	, 1 110,0,0
Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continu	ued)
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	

9 Distributable amount for 2019 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-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required – explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019			
a From 2014			
b From 2015			
c From 2016			
d From 2017			
e From 2018			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			_
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, 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 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015			
b Excess from 2016			
c Excess from 2017			
d Excess from 2018			
e Excess from 2019			

BAA

Schedule A (Form 990 or 990-EZ) 2019

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

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Name of the organization

PUBLIC DISCLOSURE COPY Schedule of Contributors

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

Employer identification number

2019

	on Symphony S		74-1157373
Organiz	ation type (check one	3):	
Filers of	f:	Section:	
Form 99	00 or 990-EZ	\overline{X} 501(c)(3) (enter number) organization	
		4947(a)(1) nonexempt charitable trust not treated as a private foundat	ion
Form 99	00-PF	527 political organization	
		501(c)(3) exempt private foundation	
		4947(a)(1) nonexempt charitable trust treated as a private foundation	
		501(c)(3) taxable private foundation	
		ered by the General Rule or a Special Rule.), (8), or (10) organization can check boxes for both the General Rule and a S	Special Rule. See instructions.
General	Rule		
		iling Form 990, 990-EZ, or 990-PF that received, during the year, contributions total one contributor. Complete Parts I and II. See instructions for determining a contributor.	
Special	Rules		
X	under sections 509(a received from any c	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/39 (1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, limple contributor, during the year, total contributions of the greater of (1) \$5,000, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.	ne 13, 16a, or 16b, and that
	during the year, tota	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that recal contributions of more than \$1,000 exclusively for religious, charitable, scient prevention of cruelty to children or animals. Complete Parts I, II, and III.	
	during the year, cor \$1,000. If this box is charitable, etc., pur	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that recontributions <i>exclusively</i> for religious, charitable, etc., purposes, but no such consist checked, enter here the total contributions that were received during the year pose. Don't complete any of the parts unless the General Rule applies to this usively religious, charitable, etc., contributions totaling \$5,000 or more during	ntributions totaled more than ar for an <i>exclusively</i> religious, organization because
		isn't covered by the General Rule and/or the Special Rules doesn't file Scheo	

Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

Houston Symphony Society

74-1157373

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional s	pace is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ <u>1,000,000</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$2,220,250.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$650,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$1,015,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>5</u>		\$715,750.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>6</u>	 	\$3,802,023.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

Houston Symphony Society

74-1157373

(a) No.	(b) Name, address, and ZIP + 4	(c) Total	(d)
	,,	contributions	(d) Type of contribution
7		\$1 <u>,500,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ 	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Employer identification number

Name of organization

BAA

Houston Symphony Society 74-1157373

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

Employer identification number

74-1157373

Part III	or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.)							
(a) No. from Part I	(b) Purpose of gift	(b) (c) (d) Purpose of gift Use of gift Description of how gift is held						
	N/A							
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relation			ationship of transferor to transferee				
-								
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held				
	<u></u>			 				
		(e)						
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to tra							
(3)	(b)	(6)		(4)				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held				
	<u> </u>							
	(a)							
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Rela	ationship of transferor to transferee				
	<u></u>							
(2)	/b)	(6)		(4)				
(a) No. from Part I	(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				
	<u> </u>	. – – – – – – – – – –						

SCHEDULE D (Form 990)

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

Department of the Treasury Internal Revenue Service Name of the organization

Houston Symphony Society 74-1157373 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered 'Yes' on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year..... Aggregate value of contributions to (during year). Aggregate value of grants from (during year)...... Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?... No Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring No impermissible private benefit?.... Yes **Conservation Easements.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements. 2 a **b** Total acreage restricted by conservation easements. 2 b c Number of conservation easements on a certified historic structure included in (a)..... d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register..... Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, No and enforcement of the conservation easements it holds?.... Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 ▶\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?..... In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1. (ii) Assets included in Form 990, Part X..... If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1..... **b** Assets included in Form 990, Part X.....

Part III Organizations Mainta	ining Collection	s of Art, Histor	rical Treasures, o	or Other Similar Ass	ets (continu	ued)
3 Using the organization's acquisition items (check all that apply):	, accession, and othe	r records, check an	y of the following that r	make significant use of its	collection	
a Public exhibition		d Loan o	r exchange program			
b Scholarly research		e Other				
c Preservation for future gener	rations					
4 Provide a description of the organiz Part XIII.	zation's collections and	d explain how they	further the organization	's exempt purpose in		
5 During the year, did the organiza to be sold to raise funds rather the	han to be maintaine	d as part of the or	ganization's collectior	า?	Yes	No
Part IV Escrow and Custodia line 9, or reported an	I Arrangements. amount on Form	Complete if the 1990, Part X, I	ne organization ar ine 21.	nswered 'Yes' on Fo	rm 990, Pa	rt IV,
1 a Is the organization an agent, trus on Form 990, Part X?	stee, custodian or ot	her intermediary f	or contributions or oth	ner assets not included	☐ Yes [No
b If 'Yes,' explain the arrangement					<u> </u>	
					Amount	
c Beginning balance				1с		
d Additions during the year				1 d		
e Distributions during the year				1 e		
f Ending balance				1f		
2a Did the organization include an a	amount on Form 990	, Part X, line 21, f	for escrow or custodia	al account liability?	Yes	No
b If 'Yes,' explain the arrangement	in Part XIII. Check	here if the explana	ation has been provid	ed on Part XIII		7
Part V Endowment Funds. C	omplete if the or	ganization ans	swered 'Yes' on F	orm 990, Part IV, Iii	<u>าe 10.</u>	
	(a) Current year	(b) Prior year	(c) Two years bad	ck (d) Three years back	(e) Four yea	rs back
1 a Beginning of year balance	75,471,987.	76,888,29	96. 74,610,51	15. 72,640,980.		
b Contributions	2,249,272.	332,72	20. 352,01	L9. 553,844.	4,109	,801.
c Net investment earnings, gains,						
and losses	1,104,697.	2,010,11	18. 5,996,87	74. 6,524,797	2,437	,539.
d Grants or scholarships						
e Other expenditures for facilities	5,302,023.	3,759,14	4,071,11	5,109,106	4,532	133
and programs	3,302,023.	3,739,14	4,071,11	3,109,100	4,332	,433.
q End of year balance	73,523,933.	75,471,98	37. 76,888,29	96. 74,610,515.	. 72,640	000
2 Provide the estimated percentag					12,040	, 900.
a Board designated or quasi-endowm	-	0.16 %	rg, column (a)) neic	i as.		
b Permanent endowment	99.84%	0.10				
c Term endowment ►	99.04°					
The percentages on lines 2a, 2b, a	0 nd 2a chould agual 10	O0/				
The percentages of lines 2a, 2b, a	nu 20 should equal 10	0 76.				
3a Are there endowment funds not in t	the possession of the	organization that ar	e held and administere	ed for the	Yes	No
organization by: (i) Unrelated organizations						No
•					3a(i)	X
(ii) Related organizationsb If 'Yes' on line 3a(ii), are the relations					3a(ii) X	+
	-	•			. 3b X	
4 Describe in Part XIII the intended		zation's endowrner	nt lunus. See Pai	rt XIII		
Part VI Land, Buildings, and Complete if the organi	• •	I 'Yes' on Form	n 990. Part IV. lin	e 11a. See Form 99	0. Part X. I	ine 10.
Description of property	(a) Cos	st or other basis nvestment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book v	
1 a Land	,		16,915.	aspisolation	16	5,915.
b Buildings			10, 515.			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
c Leasehold improvements			284,878.	282,078.		2,800.
d Equipment			2,852,006.	2,275,000.		,006.
e Other						•
Total. Add lines 1a through 1e. (Colum		rm 990 Part Y o	128,675.	108,142.		,533.
BAA	iii (a) iiiasi equal i C	550, r art A, C			ule D (Form 99	, 254.

	Investments − Other Securities.		N/A
			, Part IV, line 11b. See Form 990, Part X, line
(a) Des	scription of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Finan	cial derivatives		
(2) Close	ly held equity interests		
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
<u>(l)</u>			
	umn (b) must equal Form 990, Part X, column (B) line 12.) 🕨	•	
Part VII	Investments – Program Related.	1 1/221 am Farm 000	N/A
	(a) Description of investment	(b) Book value	, Part IV, line 11c. See Form 990, Part X, line (c) Method of valuation: Cost or end-of-year market valuation.
(1)	(a) Description of investment	(b) book value	(c) Welfilod of Valuation. Cost of end-of-year market valu
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(8)			
(9)			
(10)			
	ımn (b) must equal Form 990, Part X, column (B) line 13.)	•	
Part IX	Other Assets.	N/A	
Part IX	Complete if the organization answered	d 'Yes' on Form 990	, Part IV, line 11d. See Form 990, Part X, line
	Complete if the organization answered	N/A d 'Yes' on Form 990 escription	, Part IV, line 11d. See Form 990, Part X, line (b) Book value
(1)	Complete if the organization answered	d 'Yes' on Form 990	
(1)	Complete if the organization answered	d 'Yes' on Form 990	
(1) (2) (3)	Complete if the organization answered	d 'Yes' on Form 990	
(1) (2) (3) (4)	Complete if the organization answered	d 'Yes' on Form 990	
(1) (2) (3)	Complete if the organization answered	d 'Yes' on Form 990	
(1) (2) (3) (4) (5) (6) (7)	Complete if the organization answered	d 'Yes' on Form 990	
(1) (2) (3) (4) (5) (6) (7) (8)	Complete if the organization answered	d 'Yes' on Form 990	
(1) (2) (3) (4) (5) (6) (7) (8) (9)	Complete if the organization answered	d 'Yes' on Form 990	
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)	Complete if the organization answered (a) De	d 'Yes' on Form 990 escription	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (C	Complete if the organization answered (a) De	d 'Yes' on Form 990 escription	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)	Complete if the organization answered (a) De (b) must equal Form 990, Part X, column (column (b) must equal Form 990, Part X, column (column (d 'Yes' on Form 990 escription	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (C.	Complete if the organization answered (a) De Column (b) must equal Form 990, Part X, column (complete if the organization answered 'Yes' on the complete if the organization answered 'Yes' or the complete if the organization and the complete if the complete if the organization and the complete if the comp	B) line 15.)	e or 11f. See Form 990, Part X, line 25.
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (C. Part X	Complete if the organization answered (a) De column (b) must equal Form 990, Part X, column (complete if the organization answered 'Yes' on (a) Desc.	d 'Yes' on Form 990 escription	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (C. Part X 1. (1) Fed.	Complete if the organization answered (a) De column (b) must equal Form 990, Part X, column (complete if the organization answered 'Yes' on the complete if the organization answered organization and o	B) line 15.)	e or 11f. See Form 990, Part X, line 25. (b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (C) Part X 1. (1) Fed. (2) Acc.	Complete if the organization answered (a) De column (b) must equal Form 990, Part X, column (complete if the organization answered 'Yes' on (a) Desc.	B) line 15.)	e or 11f. See Form 990, Part X, line 25.
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (C) Part X 1. (1) Fed. (2) Acc (3) Duc.	Complete if the organization answered (a) De Column (b) must equal Form 990, Part X, column (c) Other Liabilities. Complete if the organization answered 'Yes' on (a) Descention in the complete income taxes crued pension liability	B) line 15.)	(b) Book value e or 11f. See Form 990, Part X, line 25. (b) Book value 8, 058, 30
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (C) Part X 1. (1) Fed. (2) Acc (3) Duc (4) Pay (5)	Complete if the organization answered (a) De Column (b) must equal Form 990, Part X, column (c) Other Liabilities. Complete if the organization answered 'Yes' on (a) Descent income taxes crued pension liability e to affiliated organization	B) line 15.)	(b) Book value e or 11f. See Form 990, Part X, line 25. (b) Book value 8, 058, 30 2, 692, 55
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (C Part X 1. (1) Fed (2) Acc (3) Duc (4) Pay (5) (6)	Complete if the organization answered (a) De Column (b) must equal Form 990, Part X, column (c) Other Liabilities. Complete if the organization answered 'Yes' on (a) Descent income taxes crued pension liability e to affiliated organization	B) line 15.)	(b) Book value e or 11f. See Form 990, Part X, line 25. (b) Book value 8, 058, 30 2, 692, 55
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (C) Part X 1. (1) Fed. (2) Acc. (3) Duc. (4) Pay. (5) (6) (7)	Complete if the organization answered (a) De Column (b) must equal Form 990, Part X, column (c) Other Liabilities. Complete if the organization answered 'Yes' on (a) Descent income taxes crued pension liability e to affiliated organization	d 'Yes' on Form 990 escription B) line 15.)	(b) Book value e or 11f. See Form 990, Part X, line 25. (b) Book value 8, 058, 30 2, 692, 55
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (C) Part X 1. (1) Fed (2) Acc (3) Duc (4) Pay (5) (6) (7) (8)	Complete if the organization answered (a) De Column (b) must equal Form 990, Part X, column (c) Other Liabilities. Complete if the organization answered 'Yes' on (a) Descent income taxes crued pension liability e to affiliated organization	d 'Yes' on Form 990 escription B) line 15.)	(b) Book value e or 11f. See Form 990, Part X, line 25. (b) Book value 8, 058, 30 2, 692, 55
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (C Part X 1. (1) Fed (2) Acc (3) Duc (4) Pay (5) (6) (7) (8) (9)	Complete if the organization answered (a) De Column (b) must equal Form 990, Part X, column (c) Other Liabilities. Complete if the organization answered 'Yes' on (a) Descent income taxes crued pension liability e to affiliated organization	d 'Yes' on Form 990 escription B) line 15.)	(b) Book value e or 11f. See Form 990, Part X, line 25. (b) Book value 8, 058, 30 2, 692, 55
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (C) Part X 1. (1) Fed. (2) Acc (3) Duc (4) Pay (5) (6) (7) (8) (9) (10)	Complete if the organization answered (a) De Column (b) must equal Form 990, Part X, column (c) Other Liabilities. Complete if the organization answered 'Yes' on (a) Descent income taxes crued pension liability e to affiliated organization	d 'Yes' on Form 990 escription B) line 15.)	(b) Book value e or 11f. See Form 990, Part X, line 25. (b) Book value 8, 058, 30 2, 692, 55
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (C) Part X 1. (1) Fed (2) Acc (3) Due (4) Pay (5) (6) (7) (8) (9) (10) (11)	Complete if the organization answered (a) December (b) must equal Form 990, Part X, column (c) Other Liabilities. Complete if the organization answered 'Yes' on (a) Descend income taxes crued pension liability e to affiliated organization ycheck Protection Plan Loan	B) line 15.)	(b) Book value e or 11f. See Form 990, Part X, line 25. (b) Book value 8,058,30 2,692,55 4,439,00
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (C) Part X 1. (1) Fedd (2) Acc (3) Duc (4) Pay (5) (6) (7) (8) (9) (10) (11) Total. (Colu	Complete if the organization answered (a) Decorporation (b) must equal Form 990, Part X, column (complete if the organization answered 'Yes' on a local complete if the organization answered income taxes crued pension liability e to affiliated organization ycheck Protection Plan Loan amn (b) must equal Form 990, Part X, column (B) line 25.)	B) line 15.)	(b) Book value e or 11f. See Form 990, Part X, line 25. (b) Book value 8,058,30 2,692,55 4,439,00

Part XI Reconciliation of Revenue per Audited Financial Statement	ts With Revenue per Re	turn. N/A
Complete if the organization answered 'Yes' on Form 990, P	art 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	2 a	
b Donated services and use of facilities	2 b	
c Recoveries of prior year grants	2 c	
d Other (Describe in Part XIII.)	2 d	
e Add lines 2a through 2d		2 e
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	4a	
b Other (Describe in Part XIII.)	4 b	
c Add lines 4a and 4b		4 c
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).		5
Part XII Reconciliation of Expenses per Audited Financial Statemen		Return. N/A
Part XII Reconciliation of Expenses per Audited Financial Statemer Complete if the organization answered 'Yes' on Form 990, P		Return. N/A
	art IV, line 12a.	Return. N/A
Complete if the organization answered 'Yes' on Form 990, P	art IV, line 12a.	
Complete if the organization answered 'Yes' on Form 990, P 1 Total expenses and losses per audited financial statements	art IV, line 12a.	
Complete if the organization answered 'Yes' on Form 990, P 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	art IV, line 12a.	
Complete if the organization answered 'Yes' on Form 990, P 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	2art IV, line 12a. 2a 2b	
Complete if the organization answered 'Yes' on Form 990, P 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	2a 2b 2c	
Complete if the organization answered 'Yes' on Form 990, P 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.	2a	
Complete if the organization answered 'Yes' on Form 990, P 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.)	2a	1
Complete if the organization answered 'Yes' on Form 990, P 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:	2a	1 2 e
Complete if the organization answered 'Yes' on Form 990, P 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.	2a	1 2 e
Complete if the organization answered 'Yes' on Form 990, P 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.)	2a	1
Complete if the organization answered 'Yes' on Form 990, P 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.	2a	1 2e 3
Complete if the organization answered 'Yes' on Form 990, P 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.)	2a	1

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 X, 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) 2019

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.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Houston Symphony Society

Fundraising Activities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 17.

Form 990-EZ filers are not required to complete this part.

Indicate whether the organization raised funds through any of the following activities. Check all that apply.

X Mail solicitations e X Solicitation of non-government grants X Solicitation of government grants Internet and email solicitations Phone solicitations Special fundraising events X In-person solicitations **b** If 'Yes,' list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (vi) Amount paid to (i) Name and address of individual (iii) Did fundraiser (iv) Gross receipts (or retained by) (ii) Activity (or retained by) or entity (fundraiser) have custody or control of contributions? from activity fundraiser listed in organization column (i) DCM Yes No 330 W 38th St. #207 Χ 1,589,416. 115,599 New York NY 10018 1,473,817. Telefundng 2 3 5 6 7 9 10 Total. 1,589,416. List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Schedule G (Form 990 or 990-EZ) 2019 Houston Symphony Society 74-1157373 Page 2

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
Wine Dinner
(event type)

(b) Event #2
Opening Night
(c) Other events (add column (a) through column (c))

R			(a) Event #1 Wine Dinner (event type)	(b) Event #2 Opening Night (event type)	(c) Other events 1 (total number)	(d) Total events (add column (a) through column (c))		
REVENUE	1	Gross receipts	539,601.	536,151.	127,730.	1,203,482.		
Ě	2	Less: Contributions	285,276.	320,001.	107,780.	713,057.		
	3	Gross income (line 1 minus line 2)	254,325.	216,150.	19,950.	490,425.		
	4	Cash prizes						
	5	Noncash prizes						
D I RECT	6	Rent/facility costs						
	7	Food and beverages	113,141.	73,726.	16,975.	203,842.		
E X P	8	Entertainment		4,000.		4,000.		
EXPERSES	9	Other direct expenses	140,114.	12,710.		152,824.		
S		Direct expense summary. Add lines 4 thrones income summary. Subtract line 10 from				360,666. 129,759.		
Par		Gaming. Complete if the organiza \$15,000 on Form 990-EZ, line 6a.	tion answered 'Yes					
R E V E N U E		\$15,500 CHT CHII 550 EZ, IIIC Cd.	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))		
E	1	Gross revenue						
E	2	Cash prizes						
D I RECT	3	Noncash prizes						
C S T E S	4	Rent/facility costs						
	5	Other direct expenses						
	6	Volunteer labor	Yes%	Yes%	Yes%			
	7	Direct expense summary. Add lines 2 thre	ough 5 in column (d)					
	8	Net gaming income summary. Subtract li	ne 7 from line 1, colum	nn (d)				
		e any of the organization's gaming license es,' explain:		or terminated during th		Yes No		

Sche	edule G (Form 990 or 990-EZ) 2019 Houston Symphony Society	74-1157373	Page 3
	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:		
á	a The organization's facility	13a	%
ŀ	b An outside facility	13b	%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and record	rds:	
	Name ►		
	Address ►		
ŀ	a Does the organization have a contract with a third party from whom the organization receives gaming revenue if 'Yes,' enter the amount of gaming revenue received by the organization square squa	nue? Yes	No
	Name ►		
	Address ►		
16	Gaming manager information:		
	Name ►		
	Gaming manager compensation ► \$		
	Description of services provided ►		
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
á	a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	e □ Yes	□No
ŀ	b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent		
	organization's own exempt activities during the tax year ► \$		
Pai	Supplemental Information. Provide the explanations required by Part I, line 2b, of and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide a information. See instructions.	columns (iii) and (any additional	(v);

SCHEDULE J (Form 990)

Department of the Treasury Internal Revenue Service **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

2019

Open to Public Inspection

Houston Symphony Society

Employer identification number 74-1157373

Par	rt 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, Par VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.	rt ct III			
	First-class or charter travel Housing allowance or residence for personal u	se			
	Travel for companions Payments for business use of personal resider	nce			
	Tax indemnification and gross-up payments X Health or social club dues or initiation fees				
	Discretionary spending account Personal services (such as maid, chauffeur, ch	nef)			
Ŀ	b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or				
	reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain		1 b	Χ	
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	Χ	
3	Indicate which, if any, of the following the 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.				
	X 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 comm	ittee			
	<u>N</u>				
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	a Receive a severance payment or change-of-control payment?		4 a		Χ
	b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	<u> </u>	4 b		Χ
C	c Participate in, or receive payment from, an equity-based compensation arrangement?		4 c		Х
	If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.				
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.				
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:				
a	a The organization?		5 a		Х
Ŀ	b Any related organization?		5 b		Х
	If 'Yes' on line 5a or 5b, describe in Part III.				
6					
	contingent on the net earnings of:				
	a The organization?		6 a		X
t	b Any related organization?		6 b		X
	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.	rt III	7	Χ	
8					
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If 'Yes,' describe in Part III		8		Х
•			-		Λ
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) 2019

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) Detinament	(D) Namtawahla	(E) Total of (E) Companyo		
(A) Name and Title	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns(B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990	
John Mangum (i)	344,870.	0.	0.	10,255.	28,382.	383,507.	0.	
1 CEO/Exec Dir (ii)	0.	0.	0.	0.	0.	0.	0.	
Elizabeth Condic (i)	174,846.	0.	0.	7,278.	27,587.	209,711.	0.	
2 CFO (ii)	0.	0.	0.	0.	0.	0.	0.	
Andres Orozco-Estrada (i)	117,105.	0.	415,249.	0.	28,382.	560,736.	0.	
3 Music Director (ii)	0.	0.	0.	0.	0.	0.	0.	
Victoria Dominguez (i)	199,618.	0.	0.	8,036.	10,857.	218,511.	0.	
4 COO (ii)	0.	0.	0.	0.	0.	0.	0.	
Nancy Giles (i)	240,309.	0.	0.	369.	11,027.	251,705.	0.	
5 Chief Development Officer (ii)	0.	0.	0.	0.	0.	0.	0.	
Mark Nuccio (i)	211,660.	0.	0.	7,056.	28,382.	247,098.	0.	
6 Musician (ii)	0.	0.	0.	0.	0.	0.	0.	
Eric Halen (i)	192,264.	0.	0.	7,056.	19,104.	218,424.	0.	
7 Musician (ii)	0.	0.	0.	0.	0.	0.	0.	
Brinton Smith (i)	191,302.	0.	0.	7,056.	27,948.	226,306.	0.	
8 Musician (ii)	0.	0.	0.	0.	0.	0.	0.	
Jonathan Fischer (i)	<u>187,179.</u>	0.	0.	<u>7,056.</u>	11,027.	205,262.	0.	
9 Musician (ii)	0.	0.	0.	0.	0.	0.	0.	
William Ver Meulen (i)	<u>170,307.</u>	0.	0.	<u>7,056.</u>	28 <u>,</u> 382.	205,745.	0.	
10 Musician (ii)	0.	0.	0.	0.	0.	0.	0.	
(i)	L	L				L		
11 (ii)								
(i)								
12 (ii)								
(i)								
13 (ii)								
(i)								
14 (ii)								
(i)								
15 (ii)								
(i)	L	 				L		
16 (ii)								

BAA

TEEA4102L 8/2/19

Schedule J (Form 990) 2019

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 \$7,866 (of which \$4,185 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 7 - Non-Fixed Payments Not Listed

The Music Director's other reportable compensation is comprised of conducting fees for a series of weekend classical concerts.

TEEA4103L 8/2/19

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 2019

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 section 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) 2019

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	organi	haring of nization's enues?	
				Yes	No	
(1) Rand Group	Owned by Dir	129,362.	IT services		Х	
(2) CCM, LP	Owned by Dir	273,107.	Rent		Х	
(3) Betsy Cook Weber	Trustee Spouse	49,039.	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)

Department of the Treasury Internal Revenue Service

Noncash Contributions

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

► Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Employer identification number 74-1157373 Houston Symphony Society Part I Types of Property

		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Meth- noncash	od of d	d) determir oution a	ning mounts
1	Art – Works of art							
2	Art — Historical treasures							
3	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	11	185,792.	FMV			
10	Securities - Closely held stock							
11	$\label{eq:Securities} \textbf{Partnership, LLC, or trust interests} \; .$							
12	Securities - Miscellaneous							
13	Qualified conservation contribution — Historic structures							
14	Qualified conservation contribution — Other							
15	Real estate – Residential							
16	Real estate — Commercial							
17	Real estate – Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other (Auction items)	X	104	99,325.		pro	ceeds	
26	Other► (Raffle items)	Х	12	6,000.	FMV			
27	Other ()							
28	Other► ()							
29	Number of Forms 8283 received by the organization organization completed Form 8283, Part IV, Done				29			
	organization completed form 6265, Fart IV, Done	e Ackilowie	agement		23		Yes	No
							163	140
30a	During the year, did the organization receive by contri it must hold for at least three years from the date							
	for exempt purposes for the entire holding period			•		30 a		Х
b	of 'Yes,' describe the arrangement in Part II.					00 0		21
31	Does the organization have a gift acceptance poli	cy that requ	ires the review of any r	nonstandard contributio	ns?	31	Χ	
	Does the organization hire or use third parties or noncash contributions?	related orga	nizations to solicit, prod	cess, or sell		32 a		Х
h	If 'Yes,' describe in Part II.					3£ d		Λ
	If the organization didn't report an amount in coludescribe 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) 2019

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 8/5/19 Schedule M (Form 990) 2019

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047
2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

74-1157373

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

Artistic Endeavors

Houston Symphony Society

Music Director Andrés Orozco-Estrada began his sixth season at the helm of the Houston Symphony with an all-Stravinsky program at Jones Hall. The Sunday matinee performance of the classical subscription concert marked the Houston Symphony's first-ever online video broadcast of a concert from Jones Hall. Orozco-Estrada continued the month of September with the return of French piano star Jean-Yves Thibaudet in a program that explored the former's interest in music of the Americas. Then, Music Director Andrés Orozco-Estrada, an all-star cast of vocalists, the Houston Symphony, and the Houston Symphony Chorus united on stage for two thrilling choral masterpieces: Mahler's Das klagende Lied and Mendelssohn: Die erste Walpurgisnacht. During Thanksgiving, Orozco-Estrada and the Symphony delved into the music of Richard Strauss, with works including Strauss' exquisite Four Last Songs with soprano Miah Persson, as well as the composer's Death and Transfiguration, Don Juan, and Till Eulenspiegel's Merry Pranks. The Houston Symphony's commitment to new music continued as it saw the world premiere of a Houston Symphony commission from Composer-in-Residence Jimmy López, in the third and final year of his residency. López' Symphony No. 2, Ad Astra (December 2019), took its inspiration from a Houston space program. In February 2020, Orozco-Estrada led the Schumann Festival, a comprehensive exploration of the works of composer Robert Schumann, with performances in Jones Hall and other venues around the city. The festival included lectures and other special events to illumine further the artistry of the great German composer. Musical works included the composer's four symphonies, the piano concerto with soloist Benjamin Grosvenor, the cello concerto with soloist Alisa Weilerstein, and choral selections from Dichterliebe (A Poet's Life) and Der

Name of the organization

Houston Symphony Society

74-1157373

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

Keyboardist Scott Holshouser and the Houston Symphony Chorus under the direction of Dr. Betsy Cook Weber. The 2019-20 Classical Season also saw the return of esteemed guest soloists including Emanuel Ax, Gil Shaham, and Augustin Hadelich, as well as a chamber music series showcasing musicians of the orchestra and guest luminaries in intimate venues across Houston.

During the 2019-20 POPS Series, Steven Reineke opened his third season as Principal POPS Conductor with Tony Award and Grammy Award-winning actress and vocalist Renée Elise Goldsberry, original cast member of the musical phenomenon Hamilton. The season continued with best-selling travel author and PBS star Rick Steves and former Houston Symphony Principal POPS Conductor Michael Krajewski in an immersive concert experience. In November 2019, Houston audiences experienced the blockbuster film, Star Wars: The Empire Strikes Back on the big screen as the Symphony performed John Williams' award-winning score live led by Principal POPS Conductor Steven Reineke. Former Principal POPS Conductor Michael Krajewski returned to lead the orchestra and Houston Symphony Chorus in a cherished musical holiday tradition: an evening full of holiday tunes like "Silent Night" and "Joy to the World." The program included the Symphony's commissioned holiday piece Glad Tidings. Closing out the holiday season, Steven Reineke welcomed the New Year with an all-Frank Sinatra program with vocalist and jazz pianist Tony DeSare. Reineke and the Symphony celebrated the centennial birthday of Nat King Cole, one of the most celebrated and influential recording artists of the '50s with a concert highlighting his music featuring three-time Grammy-nominated vocalist Ryan Shaw and vocalist Josette Newsam.

After canceling the balance of the 2019-20 Season and its usual slate of summer performances in early March due to the COVID-19 pandemic, the Symphony began turning

Name of the organization
Houston Symphony Society

Employer identification number
74-1157373

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

out content to keep its audiences connected and entertained during quarantine. But above and beyond its on-demand content, the Symphony was in the vanguard of American orchestras with live digital performance. Beginning in May and continuing through June, the Symphony began livestreaming its Living Room Series. Each Friday night, a musician from the Houston Symphony hosted a live-streamed concert from their home, often including musically distinguished family members.

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 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 \$6.1 million, or over 18% of the annual organization budget, during the 2019-20

Name of the organization
Houston Symphony Society

Houston Symphony Society

T4-1157373

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

Season.

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

The Executive Committee of the Society is composed of not more than fifteen of the Governing Directors of the Society, exclusive of ex-officio members. The Executive Committee consists 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 has 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 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.

Betty Tutor, Governing Director & Lifetime Trustee and Jesse Tutor, Audit Chair & Lifetime Trustee have a family relationship.

Cora Sue Mach, Governing Director & Lifetime Trustee and Steven P. Mach, Board Chair & Trustee have a family relationship.

Janice Barrow, Governing Director & Lifetime Trustee and Barbara McCelvey, Governing Director & Secretary have a family relationship.

Ann Ayre, Trustee & Jonathan Ayre, Trustee have a family relationship.

Janet Clark, President and Governing Director & Virginia Clark, Trustee have a

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

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

family relationship.

Bob Duff, Trustee & Joan Duff, Trustee have a family relationship.

Paul Mann, Governing Director and Michael Mann, 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 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

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

Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO & Top Management (continued) 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.

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

	(A)	(B)	(C)	(D)
	Total	Program <u>Services</u>	Management <u>& General</u>	Fund- raising
Artist fees Consulting fees Payroll processing fees Professional services	5,479,815. 41,151. 59,030. 511,934. Total \$ 6,091,930.	5,479,815. 322,165. \$ 5,801,980.	41,151. 59,030. 59,328. \$ 159,509.	130,441. \$ 130,441.

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

Change in value of pension liability under FASB 87 $\frac{-1,160,297}{-1,160,297}$. Total $\frac{-1,160,297}{-1,160,297}$.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

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

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

0010

2019

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

(a) Name, address, and EIN (if applicable) of disregarded entity		(b) Primary ad	ctivity	Legal dom or foreign	c) (d) iicile (state n country) Total income		(d) otal income	(e) ncome End-of-year assets		Direc	(f) ct contro entity	lling
<u>(1)</u>												
	· – – – – ·											
<u>(2)</u>												
(3)												
Part II Identification of Related Tax-Exempt Contact had one or more related tax-exempt or	Organizatio ganization	 ons. Complete s during the ta	if the org	anization	answered	d 'Yes'	on Form 99	0, Part	IV, line 34,	becau	se it	
(a) Name, address, and EIN of related organization	Prim	(b) ary activity	Legal domi or foreign	icile (state country)	(d) Exempt (section	Code	(e) Public charity (if section 501	status (c)(3))	Direct contro entity	olling	Sec 512(controlled) (b)(13) I entity?
											Yes	No
(1) Houston Symphony Endowment 615 Louisiana St. #102 Houston, TX 77002 20-8350227		port the	Т	'X	501(c)) (3)	12a, Tyr	oe I	Housto Sympho Societ	ny	X	
(2) Foundation for Jones Hall 55 Waugh Dr #601 Houston, TX 77007 76-0202646		ore Jones Hall	Т	'X	501(c)) (3)	12a, Tyr	oe I	N/A			Х
<u>(3)</u>	-				, ,							
(4)												

Part III	Identification of Related Organizations Taxable as a Partnership.	Complete if the organization answered 'Yes' on Form 990, Part IV, line 34,
	^J because it had one or more related organizations treated as a par	thership 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	Lior	h) ropor- nate ations?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	mana	ral or	(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 controlled	(b)(13) d entity?
		country)	entity	or trust)				Yes	No
<u>(1)</u>									
(2)									
(3)									
									<u> </u>

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

Yes No

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)			1	b	X			
c Gift, grant, or capital contribution from related organization(s)			1	с Х				
d Loans or loan guarantees to or for related organization(s)			1	d	X			
e Loans or loan guarantees by related organization(s)			1	e X				
f Dividends from related organization(s)			1	f	X			
g Sale of assets to related organization(s)			1	g	X			
h Purchase of assets from related organization(s)			1	h	Х			
i Exchange of assets with related organization(s)			1	i	X			
j Lease of facilities, equipment, or other assets to related organization(s)			1		Х			
k Lease of facilities, equipment, or other assets from related organization(s)			1	k	v			
Performance of services or membership or fundraising solicitations for related organization(s).					X			
m Performance of services or membership or fundraising solicitations by related organization(s)				m A	X			
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				_				
o Sharing of paid employees with related organization(s)				_	X			
• Sharing of paid employees with related organization(s)	• • • • • • • • • • • • • • • • • • • •				^			
p Reimbursement paid to related organization(s) for expenses			1	р	Х			
q Reimbursement paid by related organization(s) for expenses.								
r Other transfer of cash or property to related organization(s)			1	r X				
s Other transfer of cash or property from related organization(s)			1	s X				
2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including coverage of the above is 'Yes,' see the instructions for information on who must complete this line, including coverage of the above is 'Yes,' see the instructions for information on who must complete this line, including coverage of the above is 'Yes,' see the instructions for information on who must complete this line, including coverage of the above is 'Yes,' see the instructions for information on who must complete this line, including coverage of the above is 'Yes,' see the instructions for information on who must complete this line, including coverage of the above is 'Yes,' see the instructions for information on who must complete this line, including coverage of the above is 'Yes,' see the instructions for information on who must complete this line, including coverage of the above is 'Yes,' see the instructions of the above is 'Yes,' see the instruction of the above is 'Yes,' see the instruction of the above is 'Yes,' see the above is 'Yes,' see the instruction of the above is 'Yes,' see	ered relationships and tran	saction thresholds.						
(a) (b) (c) Name of related organization Transaction type (a-s)								
(1) Houston Symphony Endowment	С	3,802,023.	Cash					
		10 040 450	-					
(2) Houston Symphony Endowment	е	13,040,452.	Loan (garan	tee			
(3) Houston Symphony Endowment	s	1,500,000.	Cach					
of nouscon symphony indownence	5	1,300,000.	Cabii					
(4)								
(5)								
3AA TEEA5003L 06/27/19		Sched	ule R (F	orm 99	0) 2019			
1 LLA3003L 00/2/113		Juliou	∽.~ •• (I '		0, 20, 3			

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unre- lated, excluded from tax under	section 501(c)(3) organizations?		501(c)(3) organizations?		Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managing		(k) Percentage ownership
			from tax under sections 512-514)	Yes	No			Yes	No	(3	Yes	No	<u> </u>		
<u>(1)</u>															
	1														
(2)															
(2)	-														
	-														
	-														
(3)															
	_														
	1														
(4)															
(4)	-														
	-														
	-														
(5)															
	<u> </u>														
(6)															
(6)	-														
	-														
	-														
(7)															
	1														
(8)															
(8)	-														
	-														
	†														
DAA	•	•	•					-		0 1 1	L B /	- 0	20) 0010		

BAA TEEA5004L 06/27/19 Schedule **R** (Form 990) 2019

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